

INDONESIA NATIONAL ACTION PLAN for Cancer Control 2020 –2024

Introduction

Non-communicable diseases (NCDs) are responsible for 71% (41 million) of the 57 million deaths that occurred globally (2016). NCDs account for the most significant deaths from cardiovascular disease (17.9 million deaths, made up 44% of all NCD deaths and 31% of all global deaths) and cancer (9 million deaths, 22% of all NCD deaths and 16% of all global death).

Cancer will eventually become a major public health problem in Indonesia. The Basic Health Survey (RISKES-DAS) revealed that cancer prevalence has increased by 28% from 1.4 per 1,000 (2013) to 1.8 per 1,000 (2018), equivalent to 477,000 increase for the last 5 years. The data also show more than 70% of cancer patients were diagnosed at late stage. Furthermore, GLOBOCAN (2018) indicates breast and cervical cancers are the most frequent cancers in Indonesia, amounting to 16.7% and 9.3% of all-cancer incidence, respectively.

In 2014 the Ministry of Health established the National Cancer Control Committee (NCCC). The NCCC was initially intended as a specific forum for managing cancer prevention and control across participants, sectors, and levels. However, the existence of the NCCC was ultimately only supported by sectoral policies at the ministerial level. The existence of “structural and functional” was under the auspices of the directorate, hence its lack of authority. It worsened by the lack of a State Budget allocation for working and supporting resources. Meanwhile, at the regional level, there is no certainty in coordinating and managing cancer work across parties, sectors, and levels. All of these factors have significantly weakened the performance of cancer programmes.

Reviewing from the IMPACT mission and challenges, and learning from past experiences, MoH intends to develop a focused and pragmatic National Action Plan for Cancer Control 2020–2024 (NAP). A comprehensive, evidence-based cancer control plan of action that emphasizes promotive and preventive efforts towards cancer risk factors through changes in community behavior and cancer discovery at an early stage through screening efforts and early detection at primary health facilities is a top priority. Firstly, the program may prioritize the three common cancers namely breast and cervical cancer in women and leukemia in children.

Method

With WHO technical support and guidance, the Ministry of Health through the Directorate for Prevention and Control of Non-communicable Diseases and the NCCC compiled a situation analysis and the NAP for Cancer Control 2020-2024: (1) through the review of the quantitative and qualitative data in the report, review, policy, journal undertaken by other parties such as cancer-related national and international institutions, WHO, MoH and other ministers; (2) in-depth interview and focus group discussion with representatives from the experts in medicine, public health, health financing, epidemiologist, medical and other health-allies associations, such as NGOs, patient/survivor groups, faith-based networks, and community-based organizations; (3) in-depth visits and interviews at health facilities.

Results

The strategies and actions to prevent and control cancer along with noncommunicable diseases in Indonesia are inseparable from the local context as well as the regional and global commitments. Considering that, NAP for Cancer Control 2020 - 2024 was designed referring to these related principles: A. Outcome based provision of health program in the decentralized system; B. Equality and Universal Health Coverage; C. Community Empowerment; and D. Cross-sector Involvement and Stakeholders.

The NAP for Cancer Control 2020-2024 uses a strategic approach that takes into account various determinants which theoretically has the potential to produce synergistic interactions between approaches at the individual and population levels so that they can achieve common goals in these 5 years and for a long term in the next 15 years. These common goals are fewer Indonesians suffer from cancer, more Indonesians who suffer from cancer survive from it and Indonesians who suffer from cancer have a good quality of life.

Outcomes of National Action Plan 2020 -2024 (Figure 1)

1. Improvement of individuals with 9 healthy behaviors (no smoking; no alcohol consumption; low intake of salt, sugar and fat; increase physical activity; increase consumption fruits and vegetables; manage stress; participate in NHI; women to perform breast self-examination; recognize of signs and symptoms of cancer in children)
2. Fulfilment of Minimum Service Standards for early detection of breast and cervical cancers in accordance with Government Regulation No. 2 of 2018
3. Effective and evidence-based cancer control programme

Conclusion

The NAP was designed in an integrated manner covering two main pillars, namely (1) health promotion-primary prevention, and (2) health services. The basis of good governance and leadership will support the two main pillars. The NAP both at national and local levels will be implemented by the national, provincial and regency government in partnership with various stakeholders. The overall results and success of all plans depend on the commitment, cooperation, collaboration, and optimization of resources from many stakeholders across all levels of government.

Country or Int. Organization

Indonesia

Affiliation

Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia

Primary authors: Prof. GONDHOWIARDJO, Soehartati A (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Mrs PERMATA, Tiara Bunga Mayang (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Mr OCTAVIANUS, Steven (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Mrs NURHANITA, Nurhanita (Coordinator Development Team for National Action Plan 2020 –2024, National Cancer Control Committee of Indonesia); Ms KHUMAESA, Novi Elis (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Ms MAHARANI, Putri (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Mr NICHOLAS, Nicholas (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Ms RAHMARTANI, Lusi Tania (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia)

Presenters: Prof. GONDHOWIARDJO, Soehartati A (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Mr OCTAVIANUS, Steven (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia); Ms MAHARANI, Putri (Faculty of Medicine, Universitas Indonesia –Department of Radiation Oncology, Dr. Cipto Mangunkusumo National General Hospital –Jakarta, Indonesia)

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