Title: Mapping stakeholders to enhance coordination of cancer prevention and control

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Introduction/Background

• Coordination of stakeholders – prudent use of resources; reduction of overlaps/redundancies
• NCI Kenya mandate to coordinate and centralize cancer prevention activities
• Cancer Control Act 2012- National register of associations, institutions and organizations involved in cancer management
• NCCS 2017-2022: 4th pillar envisions a national stakeholders database
Introduction/Background

• National Cancer Institute of Kenya (NCI-K) collaborated with US National Cancer Institute (NCI-US) to map stakeholders involved in cancer control in Kenya.

• Aim: To determine the geographical distribution, scope of cancer prevention and control activities, and sources of financing for identified stakeholders.
Methodology

- Online survey adapted from similar stakeholder mapping activities coordinated by NCI-US in other settings
- A Google link to a standard pre-tested questionnaire was circulated
  - attendance lists to past multi-sectoral forums organized by NCI-K, Kenyan Ministry of Health, and NCI-US
- Data collection: October 2017- May 2018
- Descriptive analysis was conducted using Microsoft Excel.
Results/Findings

- Survey requests-176; Total respondents-52
- Country-wide presence-20(38%)
- Counties with highest presence
  - Nairobi: 19
  - Uasin Gishu: 16
  - Kisumu: 10
Results/Findings

Stakeholder main area of focus

Access to medicine
Palliative care
Financing
Training
Research
Registration/Surveillance
Clinic screening
Community screening
Prevention
Advocacy/IEC
Results/Findings

Cancer focus area

- All
- Pediatric
- Breast
- Burkitts
- Cervical
- GIT
- Gynae
- Prostate
### Results/Findings

#### Scope of Screening Programs

<table>
<thead>
<tr>
<th>Screening Program</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skin</td>
<td>4%</td>
</tr>
<tr>
<td>Colorectal</td>
<td>6%</td>
</tr>
<tr>
<td>Prostate</td>
<td>11%</td>
</tr>
<tr>
<td>Cervical- HPV Testing</td>
<td>16%</td>
</tr>
<tr>
<td>Cervical- Pap Smear</td>
<td>18%</td>
</tr>
<tr>
<td>Cervical- VI</td>
<td>18%</td>
</tr>
<tr>
<td>Breast</td>
<td>22%</td>
</tr>
</tbody>
</table>

#### Scope of Prevention Programs

<table>
<thead>
<tr>
<th>Prevention Program</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental Control</td>
<td>1%</td>
</tr>
<tr>
<td>HBV Vaccination</td>
<td>4%</td>
</tr>
<tr>
<td>Alcohol Control</td>
<td>6%</td>
</tr>
<tr>
<td>Tobacco Control</td>
<td>6%</td>
</tr>
<tr>
<td>HPV Vaccination</td>
<td>9%</td>
</tr>
<tr>
<td>Physical Activity</td>
<td>9%</td>
</tr>
<tr>
<td>Prevention of Infections</td>
<td>12%</td>
</tr>
<tr>
<td>Health Education</td>
<td>20%</td>
</tr>
</tbody>
</table>
Results/Findings

Funding Sources

- Government of Kenya: 8
- Charitable Donations: 14
- International Assistance: 17
- Institutional Funding: 18
- Grant Funding: 31

Institutional Funding
Conclusions/Recommendations

- There is strong stakeholder presence in most parts of the country
- Training, screening and advocacy/awareness are the main areas of focus for many stakeholders
- Breast and cervical cancers are the most commonly screened
- Most common source of funding for cancer control is through grants
Acknowledgement

• US National Cancer Institute
• Study participants

• https://goo.gl/forms/47U4gJlwFemXlebh1
Thank you...