

DELIBERATIVE DIALOGUE: Improving resource allocation for cancer treatment in Latin America

Brazil, May 2017

EXECUTIVE SUMMARY

The deliberative dialogue was carried out to share evidence among relevant stakeholders regarding allocation of resources for cancer care in Latin America, with the objective of effectively contributing to the development and implementation of effective cancer policies. The purpose of bringing together different stakeholders to discuss the evidence brief was to listen to their perspectives and experiences on the evidence presented, and to stimulate action for those involved or affected by the policies related to cancer.

The dialogue in Brazil was conducted to discuss 1) the problem of cancer care in Latin America with a specific focus on Brazil, 2) potential elements to address the problem as well as their relevance and feasibility in Brazil, and 3) barriers to implement those elements. The problem was presented in terms of the increasing burden of cancer in Latin America, health inequities related to cancer treatment within the region, the existing healthcare budget constraints and limited access for innovation in cancer care. The potential elements to address the problem included:

- 1) Define budget characteristics / resource allocation that improve cancer care;
- 2) Set up cancer-specific targets related to access, equity, and quality in care;
- 3) Improve efficiency in cancer care expenditure.

Below is an overview of the items discussed during Brazil's deliberative dialogue event, which brought together key stakeholders from government, private sector and civil society in the country.

Deliberation on the problem

In general, the participants agreed on the importance of decision-making based on scientific evidence. They also endorsed evidence presenting the problem, although they discussed that equal emphasis should be given to prevention strategies and diagnosis. Participants also agreed that there are inequities in access to cancer care in the country, and that multiple challenges pose limitations on the ability to reach adequate care for cancer patients.

The challenges to reach comprehensive cancer care are related to: 1) the growing importance of cancer control in Latin America and Brazil specifically in the face of demographic and health system changes; 2) limited infrastructure, personnel, and technology to diagnose and treat cancer; 3) the heavy emphasis on innovation in treatments rather than on prevention; 4) problems in the organization of patient pathways, especially in relation to secondary care; 5) limited resources coupled with a growing *judicialization* of health and the limited evidence on costs to evaluate cost-effectiveness of interventions.

Deliberation on elements:

- 1) Define budget characteristics / resource allocation that improve cancer care - Participants of the dialogue mentioned the need to ensure that referral and treatment guidelines are followed, as healthcare continues to be mostly budget-driven. Further, they discussed a need to improve knowledge on evidence-based medicine among court judges, to improve allocation of resources.

- 2) Set up cancer-specific targets related to access, equity, and quality in care - Two key points were mentioned, the need to bring all the stakeholders together to discuss cancer care, and the need to collect quality information for monitoring indicators, considering that inequalities in cancer care exist across the country. Indeed, progress has been made towards achieving quality cancer care. Yet, there is still much to be done, notably in terms of reducing wait times, building capacity of healthcare personnel, educating the media, and improving prevention strategies.
- 3) Improve efficiency in cancer care expenditure - Participants considered that cancer registries of good quality, as well as professionals with data analysis capacity, are essential to monitor patient care and to perform economic evaluations. Another issue related to improving efficiency in cancer care expenses was the need for early diagnosis of cancer. To achieve this goal, the participants recommend educating people on cancer prevention, as fast-tracking the diagnosis might not be always feasible in Latin America. Also, building capacity of health workers in health economy aspects, with a focus on cancer, should be the approach to improve resource allocation for cancer care. The participants mentioned that more research on health technology assessment is needed, and discussed the potential decentralization of cancer care by offering facilities in medium-sized cities.

Deliberation on implementation

This discussion focused on the barriers related to the health system and the patient/individual. Participants discussed how any initiative aimed at generating evidence to inform cancer care should be implemented jointly with the National Cancer Institute. Moreover, the misconceptions on cancer lead to avoidance of the topic by the public, which promotes misinformation.

The participants specifically discussed the limited influence of government-related organizations to influence decisions made at the Ministry of Health level. From the patient/individual perspective, they discussed the barriers related to cultural beliefs that hinder an open discussion of the problem in the country.

Deliberation on next steps

The participants emphasized the need for collaboration among several sectors to conduct a joint discussion on solutions, and on the approach to be taken with the government, especially the National Cancer Institute. New drugs entering the Brazilian market and included in the treatment guidelines should go through a rigorous economic evaluation, and data collection is necessary for quality management. Additional steps discussed included improvement of registries, building capacity among healthcare professionals, media training on cancer, and improving the amount and type of information offered to the general population.