

CRISIS TO CATALYST

NOVEMBER 2023

USING LESSONS LEARNED FROM COVID19 TO
PRIORITIZE CANCER CARE IN CANADA

thecancercollaborative



COLAB.BRIEF

The COVID19 pandemic has had a profound impact on the world and has brought about unprecedented challenges for healthcare systems worldwide. Governments, health authorities, politicians and decision makers mobilized in an unprecedented fashion to prevent further spread and deaths from the SARS-COV-2 virus. Amidst the chaos and devastation caused by the pandemic, there are valuable lessons to be learned that can be applied to cancer. In this *colab.paper*, we examine the response to COVID19 and explore how it can be used to inform a renewed political effort to address the growing burden of cancer. We argue that by applying these lessons, a more patient-centered and equitable system can be created, focused on improving patient outcomes and enhancing the quality of life for Canadians diagnosed and living with cancer.

LESSONS LEARNED

1. COLAB(ORATION)

The COVID19 pandemic demonstrated the power of collaborations across sectors, including public-private partnerships and international cooperation, in accelerating research, developing vaccines, and distributing medical supplies. The pandemic also highlighted gaps in science policy and the need for more equitable and sustainable policies that prioritize research and development. Successful public-private partnerships during the pandemic included the COVID19 Immunity Task Force, Code Life Ventilator Challenge, and COVID19 Supply Council. These partnerships can serve as a model for improving cancer care in Canada by leveraging the expertise and resources of various sectors to accelerate progress towards effective treatments and policies.

2. (re)IMAGINING PATIENT PARTNERSHIPS and care

Lessons learned from COVID19 include the impact of health disparities and social determinants of health on morbidity and mortality, the need for improved patient partnership models in healthcare, the importance of consistent terminology for patient engagement, and the recognition of primary care as a critical component of healthcare systems and cancer care delivery. Collaboration between scientists, policymakers, and the public is crucial for improving outcomes for cancer patients and building resilient healthcare systems.

3. RESILIENCE & SUSTAINABILITY. BUILDING STRONGER HEALTH SYSTEMS

The COVID-19 pandemic exposed vulnerabilities in healthcare systems worldwide, highlighting the need for resiliency and sustainability across different sectors. A resilient healthcare system can quickly and effectively respond to challenges without compromising quality of care, while a sustainable healthcare system can meet current needs while conserving

resources for future generations. The pandemic accelerated the use of real-world data and telemedicine, but also revealed workforce shortages and underinvestment in healthcare infrastructure. Investments in healthcare infrastructure, technology, and workforce development can improve the overall health of the population, increase economic productivity, and reduce the burden of disease on society. The lessons learned from the pandemic are expected to have enduring implications for the future of healthcare delivery.

4. DATA. the foundation for evidence based action

Data played a crucial role in informing decision making during the COVID19 pandemic, from tracking the spread of the virus to developing vaccines. Real-time data collection and analysis allowed for nimble policy decision making and the use of data visualization tools, such as dashboards, successfully communicated crucial information to the public. The pandemic exposed the need for increased investment in digital public health infrastructure and highlighted the importance of data standardization and interoperability. The pandemic also demonstrated the feasibility and importance of open science, facilitating rapid and collaborative sharing of scientific knowledge, data, and tools among researchers worldwide.

5. (DISRUPTIVE) INNOVATIONS for transforming cancer care

The COVID19 pandemic has accelerated the adoption of digital health and process innovations, resulting in unprecedented transformation across all sectors. The pandemic has led to considerable growth of the digital health industry in Canada while also highlighting the need for increased regulatory agility, resulting in the implementation of rolling reviews and adaptive regulatory pathways. The pandemic has provided healthcare systems with an opportunity to deliver better value to patients by adopting a value-based healthcare approach. Clinical trials have also been impacted by the pandemic, leading to widespread disruption and delays in ongoing clinical trials, but also spurring a wave of innovation and adoption of decentralized trial models, virtual visits, and remote monitoring.

6. ADDRESSING INEQUITIES (social determinants of health)

The COVID19 pandemic has exposed disparities in the social determinants of health, resulting in noticeable inequities in COVID19 health outcomes among different population groups. This has led to increased recognition of the impact of social determinants of health and health disparities on patient outcomes, highlighting the pressing necessity for policies and measures to address these disparities and has spurred efforts to improve shared decision making. By

recognizing the need to engage patients to address social determinants of health, health outcomes can be improved.

7. the best defence (PREVENTION)

The COVID19 pandemic highlighted the importance of prevention strategies such as social distancing, mask wearing, and vaccines. Prevention is critical not only during a pandemic but also in cancer care, where measures such as cancer screenings, public education campaigns, and personalized medicine can improve outcomes and reduce healthcare costs. Investing in prevention leads to better health outcomes and ensures the long-term sustainability of healthcare systems.

In addition to the importance of a strong healthcare system, the pandemic has highlighted the need for prioritizing mental health, geriatric populations and women's health. The vulnerability of individuals with mental health issues, older adults in long-term care facilities and the underrepresentation of women in clinical trials are among the challenges that need to be addressed. Furthermore, the cost of inaction on cancer is significant, and cancer care services have generally not been prioritized. The consequences of inadequate investment and delayed interventions in cancer care are profound for both individual patients and society as a whole.

Governments must prioritize cancer in their policy agendas, allocate resources and funding, and work collaboratively with healthcare providers, patients, communities, and industry to develop effective health policies and strategies. Building on the lessons learned from the pandemic, Canada can create a more patient-centered and equitable cancer care system that is better prepared to face the challenges of the future. It requires sustained political will and commitment, innovation, and transformation, and a collaborative effort from all stakeholders to prioritize cancer care and improve outcomes for cancer patients.

This is an independent report and the views expressed are those of the authors alone. It draws on interviews with stakeholders across Canada, leveraging our network of thought leaders to maximize learnings, conferences and events conducted by other parties as well as a literature review.

The information provided aims to be comprehensive but is by no means exhaustive. Rather, the goal is to provide a starting point for dialogue around the lessons learned from COVID19 and how they can be applied to improve cancer care in Canada. We recognize that the issues surrounding cancer care are complex, and there are no easy solutions.

We would like to acknowledge the many healthcare professionals, researchers, patients, and caregivers who have worked tirelessly throughout the COVID19 pandemic and those who continue to work towards improving cancer care. Their dedication and expertise are essential in helping to address the challenges and opportunities facing cancer care.

the cancer collaborative (colab) would like to thank the following partners for contributing funding which made this paper possible. Funders had no role in the study design, data collection, analysis, interpretation, or in the writing of this manuscript.



© 2023. the cancer collaborative (colab). all rights reserved. All rights reserved. no part of this publication may be reproduced, distributed, or transmitted in any form or by any means, including photocopying, recording, or other electronic or mechanical methods, without the prior written permission of the author.