Nursing Leadership to Affect Policy Change for Cancer Care

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- Population of Patients with Cancer
- Types of Health Policy for Cancer Care
  & Health Policy for Cancer Care of Korea
- Nursing Leadership for Cancer Care Policy
Age-standardized Cancer Incidence Rates

Unit: rate per 100,000

<table>
<thead>
<tr>
<th>Year</th>
<th>UK</th>
<th>USA</th>
<th>Korea</th>
<th>Japan</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>590.2</td>
<td>479.2</td>
<td>292.1</td>
<td>244.3</td>
</tr>
<tr>
<td>2010</td>
<td>592.9</td>
<td>460.3</td>
<td>312.3</td>
<td>254.8</td>
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<tr>
<td>2012</td>
<td>590.1</td>
<td>440.3</td>
<td>322.3</td>
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<tr>
<td>2013</td>
<td></td>
<td></td>
<td>311.6</td>
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year
Age-standardized Cancer Incidence Rates by Sex

<table>
<thead>
<tr>
<th></th>
<th>Male</th>
<th>Female</th>
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<tbody>
<tr>
<td>Korea (2013)</td>
<td>311.6</td>
<td>277.2</td>
</tr>
<tr>
<td>Japan (2012)</td>
<td>260.4</td>
<td>185.7</td>
</tr>
<tr>
<td>USA (2012)</td>
<td>347</td>
<td>297.4</td>
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<tr>
<td>UK (2012)</td>
<td>284</td>
<td>267.3</td>
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</table>

Unit: rate per 100,000
5-year Survival of Major Cancers

<table>
<thead>
<tr>
<th>Year</th>
<th>Korea</th>
<th>USA</th>
<th>Canada</th>
<th>Japan</th>
</tr>
</thead>
<tbody>
<tr>
<td>('09-'13)</td>
<td>69.4%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>('05-'11)</td>
<td></td>
<td>66.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>('06-'08)</td>
<td></td>
<td></td>
<td>63%</td>
<td></td>
</tr>
<tr>
<td>('03-'05)</td>
<td></td>
<td></td>
<td></td>
<td>58.6%</td>
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</table>
## Cause of Death & Mortality in Korea

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Cancer</td>
<td>132.6</td>
<td>Cancer</td>
<td>150.9</td>
</tr>
<tr>
<td>2</td>
<td>Cerebrovascular dz.</td>
<td>70.1</td>
<td>Cardiac dz.</td>
<td>52.4</td>
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<tr>
<td>3</td>
<td>Cardiac dz.</td>
<td>36.7</td>
<td>Cerebrovascular dz.</td>
<td>48.2</td>
</tr>
<tr>
<td>4</td>
<td>Diabetes</td>
<td>24.2</td>
<td>Suicide</td>
<td>27.3</td>
</tr>
<tr>
<td>5</td>
<td>Suicide</td>
<td>23.7</td>
<td>Pneumonia</td>
<td>23.7</td>
</tr>
<tr>
<td>6</td>
<td>Hepatic dz.</td>
<td>19.0</td>
<td>Diabetes</td>
<td>20.7</td>
</tr>
<tr>
<td>7</td>
<td>Chronic respiratory dz.</td>
<td>17.3</td>
<td>Chronic respiratory dz.</td>
<td>14.1</td>
</tr>
<tr>
<td>8</td>
<td>Transport accident</td>
<td>17.1</td>
<td>Hepatic dz.</td>
<td>13.1</td>
</tr>
<tr>
<td>9</td>
<td>Hypertensive dz.</td>
<td>10.4</td>
<td>Transport accident</td>
<td>11.2</td>
</tr>
<tr>
<td>10</td>
<td>pneumonia</td>
<td>7.1</td>
<td>Hypertensive dz.</td>
<td>10.0</td>
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</tbody>
</table>
### Gross Death Rate of Cancer in Korea

**2000** | **2014**
---|---
**Types of Ca** | **No. of death** | **Gross Death Rate** | **No. of death** | **Gross Death Rate**
All Cancer | 57,725 | 121.4 | 76,611 | 150.9
Lung Ca | 11,545 | 24.2 | 17,440 | 34.4
Liver Ca | 10,040 | 21.2 | 11,566 | 22.8
Stomach Ca | 11,503 | 24.2 | 8,917 | 17.6
Colon Ca | 4,201 | 8.8 | 8,397 | 16.5
Breast Ca | 1,169 | 2.5 | 2,271 | 4.5

GDR Unit: rate per 100,000

Statistics Korea (2014). Cancer registration statistics
Health Policies for Cancer Care

1. Prevention Policy
2. Early Detection Policy
3. Clinical Practice Policy
4. Supportive Care Policy
1. Prevention Policy

- Tobacco Control
- Alcohol Control
- Physical Activity
- Nutrition
- Obesity
1) Smoking Cessation Policy
- Tobacco: causing an estimated 22% of cancer deaths per year.
- For World No Tobacco Day 2016, WHO are calling on all countries to get ready for plain (standardized) packaging of tobacco products.
Smoking Cessation Policy in Korea

• Purpose
  - Smoking prevention & smoker’s no smoking
• Tobacco business act (1986) : warning against smoking
• Set up no smoking area (1995)
• Expanding no smoking area & Strengthening warning against smoking (2005)
• Guidance staff for no smoking & Putting warning picture on a cigarette box (2014)
• Regulation to prohibit smoking in public area (2015)
Smoking Cessation Policy in Korea

**Price Policy**
- Increase of cigarette price

**Non-Price Policy**
- Antismoking campaign
- Smoking Prevention program

**Recognition Improvement**
- Smoking clinic in community healthcare center
2) Alcohol
- Risk factor for many cancer types including cancer of the oral cavity, pharynx, larynx, esophagus, liver, colorectum and breast.
• Goals
  ✓ Recognize the harmful use of alcohol & change social atmosphere
  ✓ Minimize the harmful use of alcohol to health promotion life habit practice
  ✓ Reduce prevalence rate & accident rate by high-risk alcohol use decrease
  ✓ Enhance return to society by alcohol related disease management & rehab service
  ✓ Social safety environment support by private & governmental joint disposal related to the harmful use of alcohol

Moderation in Drink in Korea

1. Primary prevention service for the general public
   • Nationwide campaign, PR ambassador, manage the moderation in drink period, education

2. Secondary prevention service for the risky group
   • Early detection & early management, education & publicity for high-risk group, education for female, early detection & diagnosis system for alcohol related disease

3. Tertiary prevention service for alcohol use disability
   - Establish professional treatment institution for alcohol abuse
   - Link to alcohol abuse treatment & rehab system
   - Encourage alcohol abuse rehab & social return

4. Safe social environment to prevent harmful use of alcohol
   - Alcohol free area
   - Establish safe social environment with healthy alcohol
   - Education about harm of drunken driving & drunken crime
   - Strengthen preventing & monitoring alcohol use

5. Establish infra for alcohol policy propulsion

• Develop professional human resources & volunteers related to alcohol
• Enhance informatization of policy related to alcohol
• Enhance epidemiological survey and research for evidence based policy performance
• Research development service

3) **Physical activity**
- Regular physical activity and the maintenance of a healthy body weight, along with a healthy diet, will considerably reduce cancer risk.
Physical Activity in Korea

• Purpose
  ✓ Increase the physical activity practice population & increase the regular physical activity practice rate of walking with moderate and high-intensity

• Goals
  ✓ Increase regular physical activity practice rate
  ✓ Enhance physical activity management capacity

Physical Activity in Korea

1. Education & Program support by life-cycle

2. Obesity & chronic disease prevention service

3. Publicity & Campaign

4. Environment support

5. Link to community and support

1. Education & Program support by life-cycle (adults)
   - Provide ADL & physical activity practice program
   - Provide obesity & chronic disease management program
   - Encourage exercise 3/week, 50 minutes
   - Encourage Visiting program management
Physical Activity in Korea

2. Obesity & chronic disease prevention service

1) Individualized service
   • Subjects selection, screening, professional counseling, link to program & post confirm
   • Face-to-face, 20-30 minutes
   • Check physical activity level & encourage appropriate physical activity by healthy status (DM, BP & s-lipid)

2) Provide linked program service

3) Post management
   • Additional counseling service
   • Identify physical activity level
3. Publicity & Campaign

• Brochure & leaflet, physical activity materials
• Advertisement publicity
• Media source
• Online publicity-website, SNS

4. Environment support

- Healthy stairs, calorie consumption effects etc.
4) Nutrition
- Dietary modification is another important approach to cancer control.
- Taxes on sugar-sweetened beverages as a public health strategy
Nutrition in Korea

• Purpose
  ✓ Optimal nutritional management & eating habits improvements for community persons’ healthy life

• Goals
  ✓ Improve dietary life
  ✓ Minimize nutritional gap by population
  ✓ Nutritional management by life cycle
  ✓ Decrease chronic disease’ increase rate

Community integrated health promotion service-Nutrition (2015) http://www.mw.go.kr/front_new/jb/sjb030301vw.jsp,
1) Nationwide publicity & campaign

2) Nutritional management by life-cycle

3) Establish environment

Community integrated health promotion service-Nutrition (2015) http://www.mw.go.kr/front_new/jb/sjb030301vw.jsp,
1) Nationwide publicity & campaign
   • Sodium intake reduction strategies
   • Expand the recognition of healthy dietary life
   • Expand the recognition of healthy body weight improvement
2) Nutritional management by life-cycle
- Adults: Obesity & chronic disease prevention nutritional management service
- Subjects: 30-65 ages of community
- Contents:
  ✓ Group nutritional education by risk factors (DM, hypertension, obesity etc.)
  ✓ Dietary life guidelines, Standards of Korean nutritional intake guidebook, education
  ✓ Connect link service of physical activity service and education
3) Establish environment

- Monitoring, publicity, nutrition labeling
- Green food zone around school
- Healthy food restaurant
- Healthy food cafeteria in school
5) Obesity
- There is a link between overweight and obesity to many types of cancer such as esophagus, colorectal, breast, endometrium and kidney.
• 2nd Health screening included obesity evaluation (2007)

• 1st Health screening include obesity evaluation (2009)
• Purpose: Reduce the obesity population, improve healthy life practice (balanced food life & regular exercise), reduce obesity related disease & medical expenses decrease
Obesity Management in Korea

Preventing Chronic dz. & Increasing Healthy Life Expectancy

Improvement of Healthy diet & Physical activities

Development & Evaluation of program
Dissemination & PR
Collaborate with related institution
2. Early Detection Policy

- Cancers become more difficult to treat as they advance, particularly when they metastasize from their point of origin to other parts of the body.

- Early detection of cancer or precancerous conditions through screening is one of the best public health measures for reducing cancer disease burden.
Activate national cancer screening

- Cancer screening rate increased
  - 2004: 12.7%, 2008: 31.7%, 2015: 65.8%
  - Education & publicity of cancer examination
  - Continuous quality management of cancer examination service

<table>
<thead>
<tr>
<th>Ca. Type</th>
<th>Screening age/ cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stomach Ca.</td>
<td>40yrs or above 40yrs/ every 2 years</td>
</tr>
<tr>
<td>Hepatic Ca.</td>
<td>High risk person at 40yrs or above 40yrs/ every 1 year</td>
</tr>
<tr>
<td>Colon Ca.</td>
<td>50yrs or above 50yrs/ every 1 year</td>
</tr>
<tr>
<td>Breast Ca.</td>
<td>Women at 40yrs or above 40yrs/ every 2 years</td>
</tr>
<tr>
<td>Cervical Ca.</td>
<td>30yrs or above 30yrs/ every 2 years</td>
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</table>
The most effective and efficient treatment programs are those that: a) are provided in a sustained and equitable way; b) are linked to early detection; and c) adhere to evidence-based standards of care and a multidisciplinary approach.

Employee multidisciplinary professionals into the delivery of clinical cancer care, providing evidence-based clinical input into health policy resources
Policy of Education & Counselling for Cancer Patients (Dec. 2015)

1) Provide self-management of cancer patients after chemotherapy, radiation therapy, & operation

2) Individual education & counselling

3) Physician: 20min, Nurse: 30min, Nutritionist: 30min
Supportive care can include allied health services, such as psychosocial support (often referred to as psycho-oncology) to improve the quality of life of people living with cancer.

The supportive care spectrum also includes travel and accommodation support and other forms of financial assistance for people living with cancer and their families.
Supportive Cancer Care of Korea

◆ Establish cancer survivor management system

1) Cancer survivor comprehensive support service
   - Set up the cancer related institution roles and functions
   - Program development of cancer survivor (by death, stages & types)

2) Community based service development & application in the community cancer center

3) Enforce hospice care & palliative care service policy for terminal cancer patients since 2015
Medical Expense for Outpatients’ Cancer Care in Korea

- 1985: 67 million dollars
- 1990: 278 million dollars
- 2000: 1,787 million dollars
- 2009: 1,820 million dollars
- 2013: 4,150 million dollars

*Note: All amounts in ten million dollars.*
We are talking about health expenditure support for cancer patients in Korea.

- **National Health Insurance (NHI) subscribers**
  - Employees & self-employed person who pay less than about $74 for NHI per month
  - New cancer patient diagnosed by national cancer screening program in 2015
  - Stomach ca., breast ca., cervical ca., liver ca., colon ca. diagnosed before 2014
Health expenditure support

• All who receive medical care
  ✓ Primary ca., malignant tumor, intraepithelial tumor, known tumor

• Cancer patients pay 5% of medical expense for treatments covered by national health insurance
Nursing Leadership for Cancer Policy

1. Development of Cancer Care Service & Guideline
2. Expand Expertise of Cancer Care
3. Promoting Advanced Cancer Care Practice
4. Development Payment System
5. Collaboration & Participation
1. Development of Cancer Care Service & Guideline

- Involve in task force teams for development of cancer management & play a leading role in the teams
- Research evidence-based cancer care practice & develop cancer care guidelines for improvement of QoL of cancer patients
2. Expand Expertise of Cancer Care

✓ Strengthen professional training for oncology nurses to improve quality of cancer care

✓ Develop & strengthen education programs for advanced oncology nursing (APN programs, special education programs)
3. Promoting Advanced Cancer Care Practice
   ✓ Encourage oncology nurses to practice evidence-based cancer care in clinical settings
   ✓ Conduct evaluation research about effectiveness of current health policy for cancer care

4. Developing appropriate payment system for cancer care
   (i.e: education, counselling etc.)
5. Collaboration & Participation
   ✓ Establish public relations for cancer care
   ✓ Involve in publicity & campaign for cancer prevention
   ✓ Dissemination

Policy Legislation and Policy Changes for Cancer Care
Q&A
Thank you!