

# THE REPUBLIC OF KOREA

## Overview: National Cancer Control Programme

Cancer has been the leading cause of death in the Republic of Korea since 1983. Approximately 110,000 people develop cancer annually with 64,000 annual fatalities. The five-year relative survival rate was 44.3% for 1995-2001 (35.6% for men and 55.5% for women). Cancer control is expected to become a more important issue in the near future considering the country's rapidly aging society that tends to entail an increased burden of cancer.

The government's cancer control policy was started in 1989 when it formulated a plan to establish the National Cancer Centre (NCC). In 1996, the government initiated a comprehensive "The 10-year Plan for Cancer Control". In 2004, a process to prepare second plan "The 10-year Plan for Cancer Control" was started. An important pitfall realized at this time was that validated evaluation methods or indices were absent to assess the accomplishment of "First 10 Years Plan for Cancer Control". Therefore the development of monitoring and evaluation system has been now included in "Second Term 10-years Comprehensive Plan for Cancer Control".

It aims at decreasing cancer mortality in year 2015 through comprehensive control programme and full government support regarding health equity, and alignment with worldwide effort for cancer control.

The major components of Cancer Control Programs include anti-smoking program, Hepatitis B vaccination, cancer registration and networking, National Cancer Screening Program  
Financial support for the Cancer Patients, National Cancer Research Program, Public Relations and Education of cancer prevention-National Cancer Information Centre (NCIC)  
National Cancer Control Program for Terminal Cancer Care, Home-based Cancer Patient Management Program in Community Health Centre, designation of Nine Regional Cancer Centres to the National Medical School Hospital.

Additional information can be accessed in Korean at: <http://www.mohw.go.kr/index.jsp>  
and in English at: <http://english.mohw.go.kr/index.jsp>

**The following information was provided in a questionnaire (May 2006) by:**

Dr Jong-Koo Lee  
Director-General, Bureau of Public Health, Ministry of Health and Welfare

Dr Hai-Rim Shin  
Director of Cancer Control Research Institute  
National Cancer Centre  
Email: [hrshin@ncc.re.kr](mailto:hrshin@ncc.re.kr)

**1. Is it a new plan or is it an updated one? When was the previous plan published and who did it?**

“First 10 Years Plan for Cancer Control” for years 1996-2005 was established and proceeded in 1996 under the governmental support, by forming a steering committee whose members were cancer professionals (university professors, cancer clinicians, cancer researchers, etc). We established the “Second Term 10-years Comprehensive Plan for Cancer Control” for years 2006-2015 that follows the “First 10 Years Plan for Cancer Control”.

**THE FOLLOWING QUESTIONS REFER TO THE PRESENT PLAN**

**2. When did you start the planning process? Who decided to do the plan and why?**

The initial planning of the “Second Term 10-years Comprehensive Plan for Cancer Control” was conceptualized in March 2004, which was the finishing final stage of the “First 10 Years Plan for Cancer Control”. The establishment of this plan was then preceded by designated projects of “National R&D Program for Cancer Control” during the period of August 2004 to November 2005.

The plan was decided by the government (Ministry of Health and Welfare) and cancer experts to meet the needs of more comprehensive and concrete cancer control program based on the infrastructure established from the “First 10 Years Plan for Cancer Control”.

**3. What steps did you take to do the plan and how long did each step take?**

Recognizing the necessity for establishing “Second Term 10-years Comprehensive Plan for Cancer Control” (in 2003, finishing stage of “First 10 Years Plan for Cancer Control”).

Preparing the proposal to develop “Second Term 10-years Comprehensive Plan for Cancer Control” (March 2004 – August 2004) and decided as a designated project (August 2004) (Research period: August 2004-July 2005).

Evaluating the accomplishment from “First 10 Years Plan for Cancer Control” (August 2004 – November 2004).

Obtaining the review for the proposal of “Second Term 10-years Comprehensive Plan for Cancer Control” from “National Cancer Control Committee” (November 2004) and based on the review comments, preparing extensive plan for nationwide comprehensive cancer control program (extension of the research period: to November 2005).

Reviewing and modifying the “Second Term 10-years Comprehensive Plan for Cancer Control” and preparing how to pursue the plan (December 2005 – March 2006).

Obtaining the review for the “Second Term 10-years Comprehensive Plan for Cancer Control” by “National Cancer Control Committee” (March 2006).

Announcing the “Second Term 10-years Comprehensive Plan for Cancer Control” to the public of the Republic of Korea by the government after reporting to the members of the State Council meeting (25.4.2006).

#### **4. Who were the persons involved in each step of the process?**

The needs for “Second Term 10-years Comprehensive Plan for Cancer Control” were recognized by the persons in charge of advancing each specific field of “First 10 Years Plan for Cancer Control”. The government (Ministry of Health and Welfare) and “National Cancer Control Planning Board” suggested the formation of “Second Term 10-years Comprehensive Plan for Cancer Control” through designated health policy projects.

Cancer professionals such as health policy makers, university professors, cancer researchers, cancer clinicians were involved in the evaluation of “First 10 Years Plan for Cancer Control” and the preparation of the preliminary draft of “Second Term 10-years Comprehensive Plan for Cancer Control”.

The specific fields for “Second Term 10-years Comprehensive Plan for Cancer Control” were studied through a Delphi project of 177 experts. And the preliminary draft was reviewed by the Steering Committee for “First 10 Years Plan for Cancer Control”, “The Supporting and Evaluation Board of National Cancer Screening Program”, “National Cancer Control Planning Board”, Steering Committee for “Second Term 10-years Comprehensive Plan for Cancer Control”.

Government agencies discussed how to implement the “Second Term 10-years Comprehensive Plan for Cancer Control” and the final version of “Second Term 10-years Comprehensive Plan for Cancer Control” were reviewed by the “National Cancer Control Committee”.

#### **5. How the plan was prepared, what resources were used in each step, and what were the results?**

For “Second Term 10-years Comprehensive Plan for Cancer Control”, 89,000,000 Korean Won (approximately \$ 91,000) has been allocated for research funding of designated projects in “National R&D Program for Cancer Control”.

After the agreement among governmental agencies, and the review of this plan by the “National Cancer Control Committee”, the “Second Term 10-years Comprehensive Plan for Cancer Control” was launched in May 2006. Ministry of Health and Welfare announced it through the newspaper for public, and document for the plan was distributed to each governmental agencies and related organization.

## **6. What problems were encountered in the planning process? How were they dealt with?**

Because the suggestions by experts such as university professors were somewhat ideal or theoretical rather than practical, there were some difficulties in converting these ideas into specific plans to be practiced. However, we have been dealing with this problem by forming a steering committee for “Second Term 10-years Comprehensive Plan for Cancer Control” that includes cancer experts, health policy makers and administrators, and obtaining opinions from relevant field experts and committees, then finally obtaining the agreement among governmental agencies and departments.

There were occasions when cancer experts and health policy makers disagreed on the importance and priorities in pursuing each field of cancer control program depending on their focused fields. We have dealt with this problem by performing a Delphi project to come up with a well-balanced plan for all steps of cancer control program that covers from cancer prevention to death.

Validated evaluation methods or index were absent when assessing the accomplishment of “First 10 Years Plan for Cancer Control”. We included the development of monitoring and evaluation system as one of the items in “Second Term 10-years Comprehensive Plan for Cancer Control”.

There were some demands for the application of oriental medicine to cancer diagnosis and treatment. However, since there are not enough scientifically-proven evidences of the role of oriental medicine in cancer diagnosis and treatment, we have included the area of oriental medicine as one of research items in the cancer control plan instead.

## **7. What were the lessons learned from the planning process?**

In order to establish a next-term cancer control plan followed by a previous plan, it is required to review and evaluate the previous plan. Therefore, comprehensive efforts to evaluate the accomplishment of current plan and gather the information will be needed during “Second Term 10-years Comprehensive Plan for Cancer Control” for the upcoming preparation for the third-term plan.

The establishment of cancer control plan cannot be expected to complete right in the beginning stage of each step, and it should be accompanied by continuous modification and complementation via consistent involvement and active participation of experts and professional organizations.

We have reaffirmed the importance of including the relevant professional organizations in the process of obtaining the opinion and consensus in the establishment of cancer control plan.

## **8. What are the priorities, main goals, and objectives of the plan?**

Main goals:

- Decreasing cancer mortality by establishment of comprehensive control program and full government support regarding health equity, and alignment with worldwide effort for cancer control

Objectives:

The following objectives are supported by corresponding research planned in the second plan:

- strengthening prevention with preventable risk control
- providing cost-benefit and quality screening program for the whole nation
- intensifying the economic support for cancer treatment at the national level
- ensuring optimal and comprehensive care for end of life care
- building comprehensive infrastructure for active cancer control
- developing new diagnosis and treatment methods for increasing survival rate
- serving tailor-made education and information on cancer with the evidence
- shaping organized monitoring and evaluation system based on cancer registry

### **9. Is monitoring and evaluation included in the plan? Briefly describe**

Yes, monitoring and evaluation is included in the plan. Specifically we plan to establish a comprehensive monitoring and evaluation system based on cancer registry and development of index for evaluation of cancer control program to produce annual nationwide cancer incidence within two years after concerned year and basic data for decision-making on cancer policy.

### **10. What are the resources allocated to carry out the implementation of the plan?**

Since “Second Term 10-years Comprehensive Plan for Cancer Control” has just announced (25.4.2006), we cannot provide the specifics of resource allocation at this moment, but the financial resources are expected to come from mostly governmental budget consisting of taxes such as tobacco tax and/or national/provincial/local tax.

### **11. Has the plan been implemented? If NO, Why not?**

“Second Term 10-years Comprehensive Plan for Cancer Control” is just reviewed at the government level, hence the specific plans have not yet been implemented. However, “National Cancer Screening Program”, “Hospice-palliative care”, “Home-based cancer patient management” have been implemented as a continuation of “First 10 Years Plan for Cancer Control”, regardless of the review status of “Second Term 10-years Comprehensive Plan for Cancer Control”.

As one of the essential item in “Second Term 10-years Comprehensive Plan for Cancer Control”, setting up and maintaining a national cancer registry program is also required. There are some issues in privacy protection laws within cancer control laws that need to be resolved in order to smoothly implement this national cancer registry program.

### **12. If YES, When did the implementation phase start?**

“National Cancer Screening Program”, “Hospice-palliative care”, “Home-based cancer patient management” have been implemented as a continuation of “First 10 Years Plan for Cancer Control”, regardless of the review status of “Second Term 10-years Comprehensive Plan for Cancer Control”.

### **13. What has been implemented so far, when and where?**

“National Cancer Screening Program” in 1999, “Hospice-palliative care” in 2004 and “Home-based cancer patient management” in 2005 have been implemented as a continuation of “First 10 Years Plan for Cancer Control”. These programs are nation-wide.

### **14. What problems have you encountered during the implementation phase?**

In the process of implementing the “Second Term 10-years Comprehensive Plan for Cancer Control”, we have encountered the problems such as:

- 1) lack of legal and institutional complementation
- 2) difficulty in reserving the realistic allocation of financial resources
- 3) lack of well-trained cancer professionals
- 4) difficulty in arranging and balancing the tasks of relevant organizations and departments

### **15. What are the lessons learned from the implementation phase so far?**

In order to successfully implement the cancer control plan such as “Second Term 10-years Comprehensive Plan for Cancer Control”, it is required to have a designated leader who recognizes the cancer burden and understands the importance of cancer control and who has a strong leadership and driving-force to advance a well-designed plan.

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