



Policy Document

December 2021

## INTERNATIONAL PUBLIC POLICY INSIGHTS

BUILDING THE FOUNDATION FOR ADOPTING THE  
UNIVERSAL SCREENING APPROACH, FOCUSING ON  
WOMEN BETWEEN THE AGES OF 40-59

ASMA'A AHMAD

In Jordan, the policy remains that screening is only for diagnosing symptomatic cases, and only these cases are covered by insurance. 53% of diagnosed breast cancer women present at late stages. Most of the treatment cost is used to treat 53% of patients in advanced stages of breast cancer rather than using the resources to cure and save women. Breast cancer awareness and screening led by Jordan breast cancer program. The policy issue relies on both monetary (purchasing of new technologies, reducing the cost of examination, and providing comprehensive capacity-building activities) and non-monetary aspects (advocacy efforts, new policy development, and regulation). The policy is related to SDG number 3 (good health and well-being).



الكشف المبكر ينقذ الحياة  
Early Detection Saves Lives



*'There is an opportunity to use a new software for breast cancer screening (patient's records, navigation and recall), which provide a good database to build the national research.'*

**Editors:** Moonesar, I.A., Stephens, M. & Warner, R.

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## Abstract

The Jordanian breast cancer screening strategy still depends on the opportunistic method focusing on awareness, service delivery, and quality management. One million one hundred forty thousand four hundred sixty women are eligible (40 years and above) for mammography screening, where only 13,000 were screened, making it 1.14% of the eligible population( JBCP,2020). 64% of Jordan's population is covered by health insurance, both public and private insurance.

However, 36% of Jordanians do not Note that private health insurance does not cover the cost of screening examination and only covers the diagnostic, which puts a financial burden on women and hinders efforts to encourage women to early detection and thus achieve the desired outcome, which is the descent from the advanced stage (3,4 and 5) to the early stages (0, 1, and 2).

The Jordan cancer registry (JCR) (2016) shows that 53% of our diagnosed women presenting themselves at late stages (3,4, and 5) means that the mortality rate is well above 53%. This means that currently, most of the treatment cost is used to treat 53% of patients in advanced stages of breast cancer rather than using the resources to cure and save women, who can return to society as vibrant members.

Furthermore, the association of early detection of breast cancer and survival rates has been proven worldwide. Therefore, it is tragic that so many women are dying due to a lack of knowledge that breast cancer can be cured once detected early. The long-term survival rate of women is at its highest when breast cancer is detected early. There is an equal or more than 98% chance of a 5-year survival rate when the cancer is detected in Stages 0 and I.

Treatment is more effective when the disease is found in early stages (0,1 and 2), preferably before the development of symptoms and when the cancer is localized in the breast without invasion of surrounding tissues or distant organs.

To reduce the financial burden and social consequences on society due to not initiating the universal screening strategy, all stakeholders must advocate unified country-based action against breast cancer towards providing free early detection services for Jordanian women.



## Key Messages

- In Jordan, the policy remains that screening is only for diagnosing symptomatic cases, and only these cases are covered by insurance.
- 53% of diagnosed breast cancer women present at late stages (JCR, 2016).
- Most of the treatment cost is used to treat 53% of patients in advanced stages of breast cancer rather than using the resources to cure and save women.
- 64% of Jordan's population is covered by health insurance, both public and private insurance (Department of Statistics, 2015).
- Breast cancer awareness and screening led by Jordan breast cancer program.
- The policy issue relies on both monetary (purchasing of new technologies, reducing the cost of examination, and providing comprehensive capacity-building activities) and non-monetary aspects (advocacy efforts, new policy development, and regulation).
- The policy is related to SDG number 3 (good health and well-being).
- The policy will apply across Jordan governorates and in all health sectors.
- There is an opportunity to use new software for breast cancer screening (patient records, navigation, and recall), which provides an excellent database to build the national research.

## Background & Policy Issues

### The Problem

Cancer overall is set to increase in developing countries in line with increased urbanization, increased adoption of unhealthy lifestyles, and the aging of populations. Incidence rates are growing at 0.5 to 3% per year. In Jordan, this is true, particularly in the issue of the aging population. Currently, around 50% of our population is under 18 years old. Therefore, if we do not address the issue of breast cancer awareness now and cancer in general, this issue will become uncontrollable in the years to come when the population begins to age.

Furthermore, the association of early detection of breast cancer and survival rates has been proven worldwide. Therefore, it is tragic that so many women are dying due to a lack of

knowledge that breast cancer can be cured once detected early. The long-term survival rate of women is at its highest when breast cancer is detected early. There is an equal or more than 98% chance of a five-year survival rate when the cancer is detected in Stages 0 and I. Treatment is more effective when the disease is found in the early stages (0, 1, and 2), preferably before the development of symptoms and when the cancer is localized in the breast without invasion of surrounding tissues or distant organs.

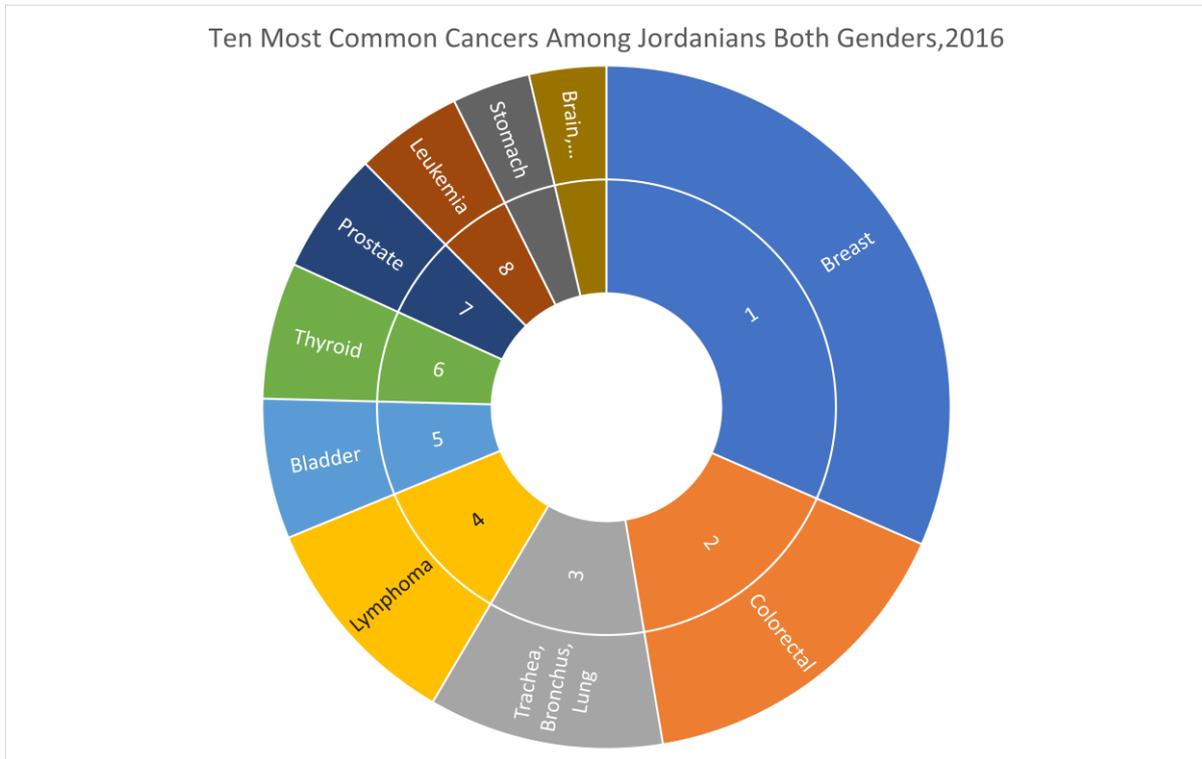
The problem is that, on average, 53% of discovering breast cancer cases are at late stages (3 and 4) rather than discovering breast cancer cases in early stages (0, 1, and 2). Therefore, the chance of surviving more and the treatment cost is less. Unfortunately, discovering cancer in late stages increases the mortality and morbidity rate. In addition, it negatively affects society as we lost the backbone of the family earlier in her years of giving and increased the burden on health system delivery and financial expenses.

### **Size of the Problem**

Breast cancer is an essential public health and development problem in Jordan. According to the latest statistics from JCR, breast cancer is the most common cancer in Jordan, accounting for 21.3% of cancers in Jordanians of both sexes and 39.6% of cancers among Jordanian women (Ministry of Health: Cancer incidence in Jordan, 2016). Furthermore, breast cancer afflicts Jordanians at a relatively younger age (Median Age 53) (Ministry of Health, Cancer incidence in Jordan, 2016) when compared with other countries that have well-described patterns of Breast Cancer, namely the United States and Europe (Median Age 60-65). This adds another burden on the family, as women in their prime years are still raising children, are the primary caretakers of their family, and are still active members contributing to economic growth and society. Therefore, the unnecessary deaths of these women negatively impact society as a whole.



Figure 1: Ten Most Common Cancers Among Jordanians Both Genders, 2016.



### Underlying factors

#### Governance

The responsibility for developing and implementing breast cancer early detection and screening programs usually rests with the Ministries of Health and other relevant organizations. The overall aim should be to establish a mechanism for the political and technical support of the early detection program. A successful managerial approach to breast cancer detection rests on the combined impact of several activities, including surveillance, protection, continuing education and prevention, early detection, and care.

Jordan Breast Cancer Program (JBCP) was established in 2007 upon the directive of the Ministry of Health and under the leadership of King Hussein Cancer Foundation and Center (KHCF/KHCC) as a national program that coordinates breast cancer early detection efforts across Jordan by ensuring the availability of quality screening services, improving access to screening and early detection

services, raising public awareness and education about breast cancer, and creating an enabling environment for adopting breast cancer control practices.

JBCP worked with all stakeholders and partners to seize the opportunity of addressing breast cancer detection and control in the national and regional health strategies and make sure that Jordan's interventions are in line with the national priorities and strategies.

## **Financing**

Jordan's health system is a complex amalgam of three major sectors: public, private, and NGOs. The public sector is composed of three public programs that finance and deliver care: the Ministry of Health (MOH), Royal Medical Services (RMS), and 2 university hospitals.

64% of Jordan's population is covered by health insurance, both public and private insurance. 36% of Jordanians do not have health insurance (Department of statistics, 2015) and cant afford the costs of early detection examinations, which cost from approximately 40-100 Jordanian dinars.

On other hands JBCP ia a non-for-profit program led and funded mainly by KHCF and MOH, operating in a low-resource setting accompanied by the demographic and economic challenges that the country faces. A significant challenge for all stakeholders is to afford universal health coverage (UHC), including early detection and screening of breast cancer in light of economic and political changes.

## **Delivery**

Jordan has around 90 breast imaging units that provide the mammography service for breast cancer screening and early detection distributed between the three main sectors: public, private, and military (RMS). These breast imaging units should be operating at optimum and high-quality levels to improve the screening services provided. In addition, JBCP has two mobile mammography units (MMU) allocated at different places to serve remote areas across Jordan.

MOH and JBCP should focus on improving the delivery of breast cancer screening and early detection by directing the efforts on the structural and proficiency and the quality of the service.

Breast cancer detection and prevention is a systemic and continuous management process that includes planning, developing, and evaluating breast cancer detection programs, including policy formulation and the identification of priorities. Countries must develop comprehensive plans for screening and detecting breast cancer, including outreach and education with the general population,

training for medical and technical staff, development of programs and processes for accurate diagnosis of breast cancer, and facilities for timely and effective treatment.

### **Methodology**

The policy elements Developed by analyzing the policy issue using PESTLE and SWOT Analysis with a comprehensive plan for stakeholders management.

*The policy objectives:*

- Increase % of breast cancer cases discovered in early stages
- Increase # of screening examinations done across Jordan
- Increase # of screening services across Jordan.
- Unified screening examinations cost across health sectors.
- Address breast cancer detection and control in the national health strategies as a priority.

### **Proposed policy options affect**

#### *1. Improving Service Delivery of Breast Cancer Early Detection and Screening*

If service delivery in Jordan improved by ensuring equitable accessibility to services, upgrading units, enhancing the healthcare provider's capacities and providing high quality screening services by developing national guidelines, standardizing the quality of reading images and certifying all mammography units across Jordan then the Service Delivery of Breast Cancer Early Detection and Screening is improved.

#### *2. Increasing Demand on Breast Cancer Screening and Early Detection Services*

If the awareness of breast cancer screening is enhanced by outreach activities (one to one /one to group), national campaigns, and mobilizing the community to advocate for breast cancer screening, then the Demand on Breast Cancer Screening and Early Detection Services is increased.

#### *3. Ensuring Sustainability and Impact of Early Detection Services and Awareness Efforts*

If advocacy efforts implemented to solicit financial and technical support for all activities intended to be implemented on the ground, providing reinforce policies, enabling environment, and buy-in of stakeholders to unified country-based action against breast cancer towards providing free early detection services for Jordanian women to achieve comprehensiveness of service and reach the desired goal, which is discovering the disease in the early stages and reducing the cost resulting from disease and treatment with a planned collaborations and partnerships among different national, regional and international entities and stakeholders to Create supporting environment to advocate

for breast cancer within community entities and policy makers through decision based on scientific data then the Sustainability and Impact of Early Detection Services and Awareness Efforts is enhanced.

### **Policy Assumptions**

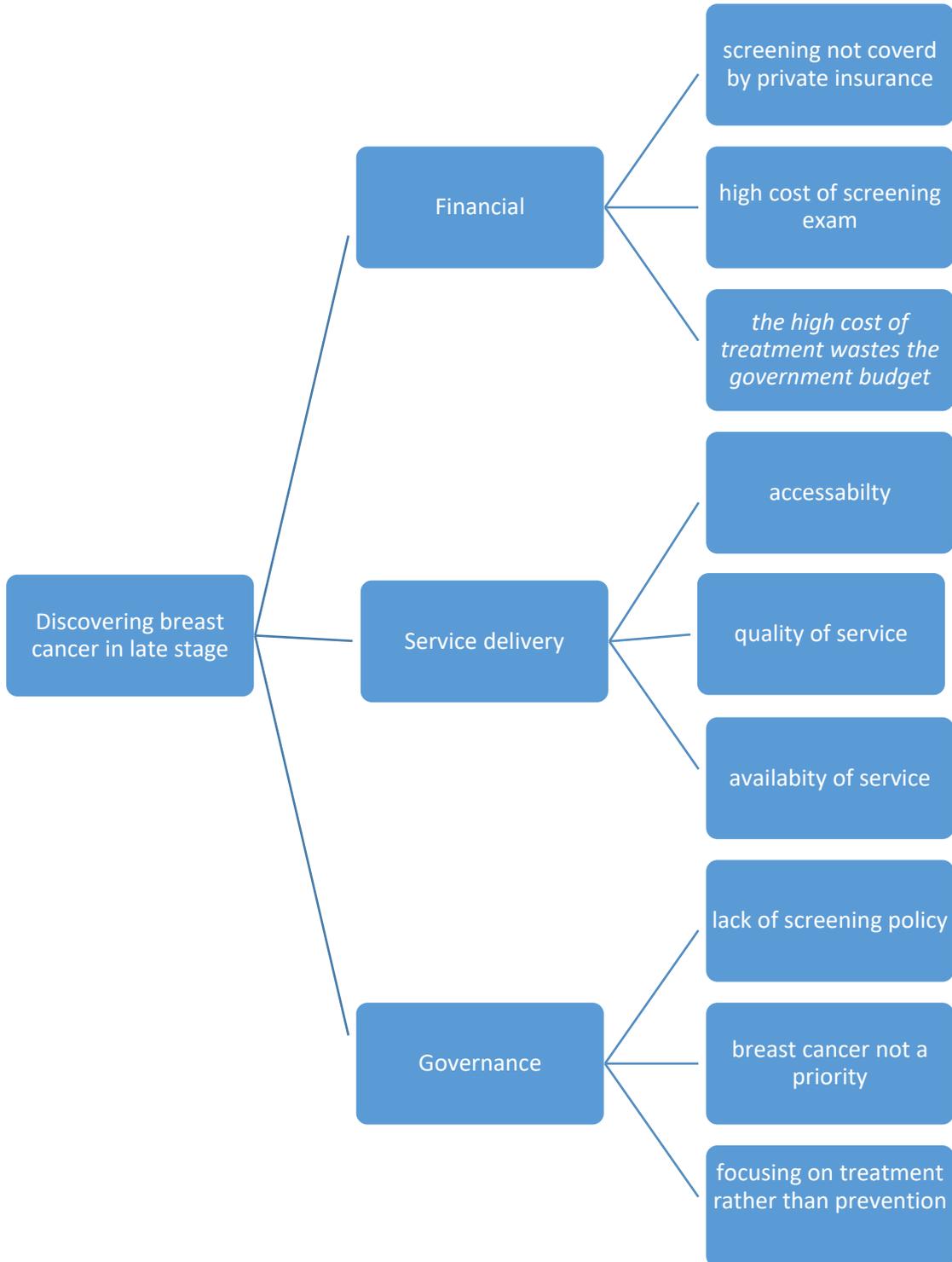
- Stakeholders' support is available.
- Jordan's health governance focuses and supports screening and early detection for breast cancer and sets it as a national health priority.
- Funds are available to conduct all activities planned.

### **Policy Indicators**

- % of Breast Cancer Discovered in the early stages
- # of Mammogram examinations conducted in Jordan
- Word of mouth index in the local communities
- # Breast Imaging Units Upgraded
- # Mammography Units certified
- # of people reached by targeted message
- Y/N Funds are available
- # of new partnerships formed (local, regional, and international)
- Y/N Research conducted

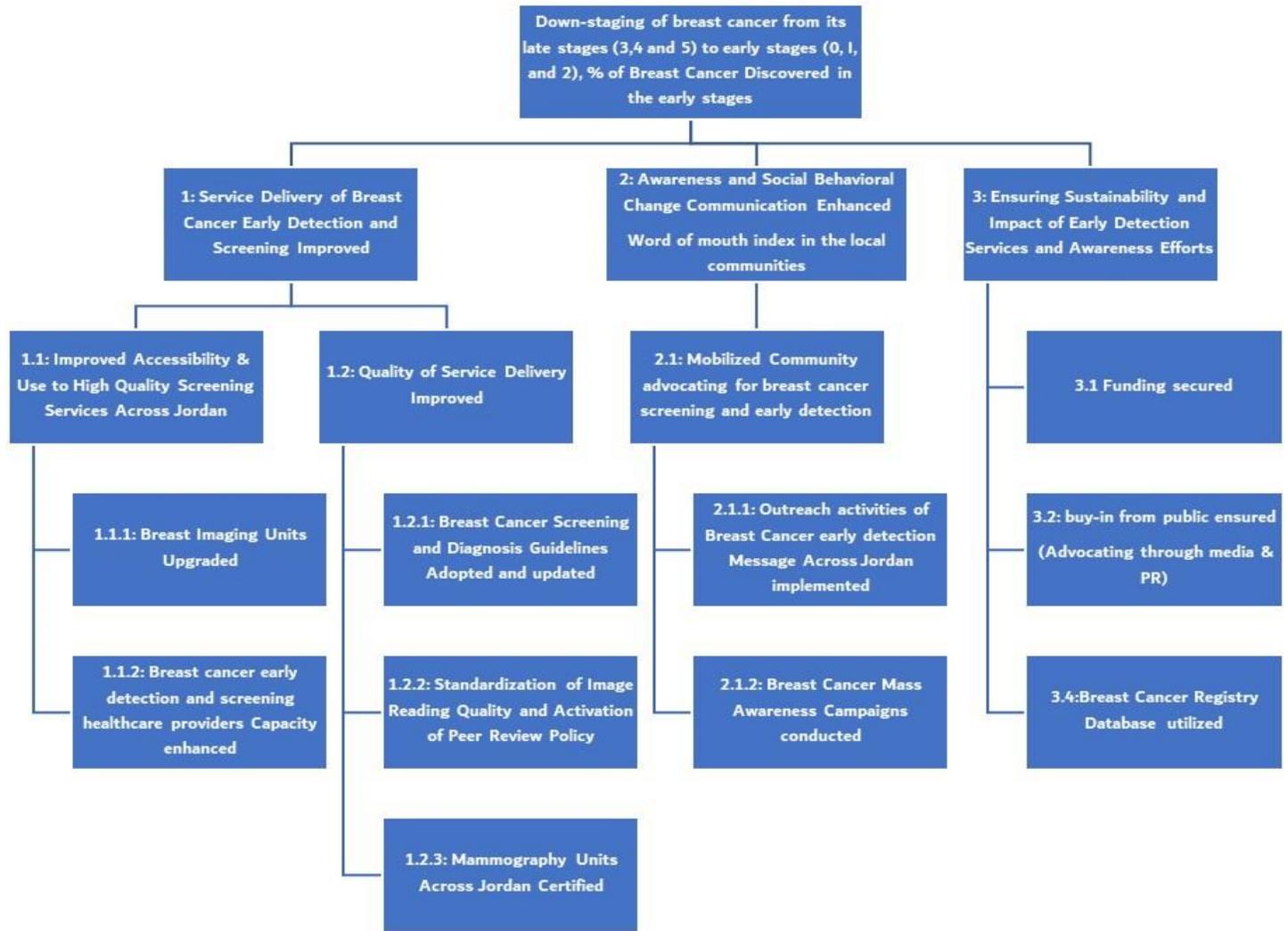


**Figure 2: Policy issues diagram**



# Theory of Change

Figure 3: Policy Theory of Change Diagram





## Policy Options & Recommendations

### Elements to address the problem

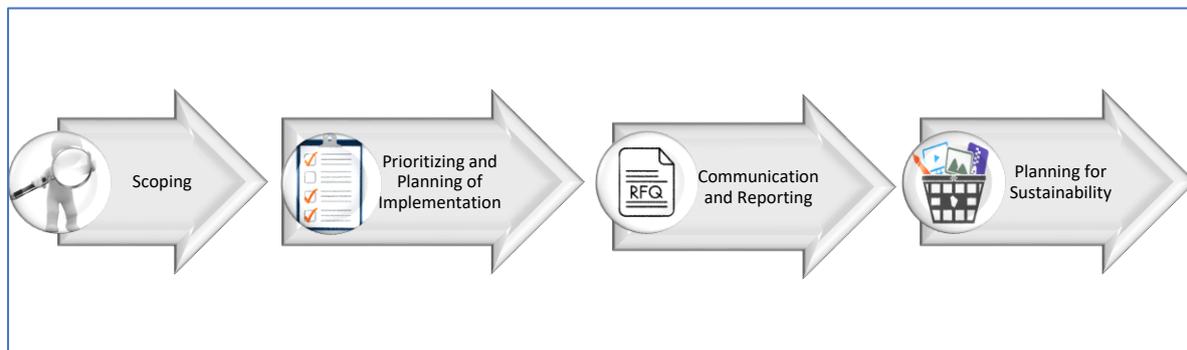
#### Element/Option 1- (Improving Service Delivery of Breast Cancer Screening and Early Detection)

Problems related to availability, accessibility, equity, duplication of services, poor coordination among major providers, limited quality improvement programs, old and depreciated breast imaging equipment and inappropriate health information system are the main challenges facing all providers of health care in the breast cancer early detection and diagnosis field. The MOH face several constraints that hamper their ability to contribute more effectively to providing proper services to the poor and the uninsured.

All efforts should be directed toward the aim of improving the availability and accessibility of quality screening and early detection services across Jordan through upgrading services and improving infrastructure by achieving the main objectives of this element:

1. Ensure the availability of quality screening and early detection services across Jordan.
2. Improve breast imaging units by upgrading them to ensure high-quality service.
3. Reduce morbidity and mortality from breast cancer in the urban and rural areas and detect breast cancer at its earliest stages.
4. Eliminate accessibility barriers to screening services in Jordan with the provision of breast imaging services on the remote governorates.

#### Intervention phases:



### **Element/Option 2- (Increasing Demand on Breast Cancer Screening and Early Detection Services)**

Enhancing the awareness and social behavior change communication through mobilizing the community advocating for breast cancer screening and early detection across Jordan, exposing high proportions of the population to breast cancer screening and early detection messages, and building specialized technical capacities in the field of cancer control to increase the demand on breast cancer screening and early detection services.

This element focuses on raising awareness and creating behavioral change through the Social Behavioral Change Communication' (SBCC). To channel early detection and prevention messages through the community, it is necessary to build advocates from within. For this reason and to facilitate all outreach activities, partnerships are formed with local and international entities. Building advocates depend on providing the needed training for each target group or sector. The training programs are provided by specialized trainers that underwent training of trainers (TOT) by the specialized entity. As a result, they have gained extensive knowledge on breast cancer and the importance of screening.

Two main outreach activities are needed at this point: the one-to-one (home visits) and the one to group (lectures) with a mass awareness campaign.

### **Element/Option 3- (Ensuring sustainability and impact of early detection services and awareness efforts)**

In parallel with other elements, advocacy efforts will be implemented to solicit financial and technical support for all activities intended to be implemented on the ground, providing reinforce policies, enabling environment, and buy-in of stakeholders to unified country-based action against breast cancer towards providing free early detection services for Jordanian women to achieve comprehensiveness of service and reach the desired goal, which is discovering the disease in the early stages and reducing the cost resulting from disease and treatment.

Develop collaborations and partnerships among different national, regional, and international entities and stakeholders to maintain sustainability and create a supportive environment to advocate for breast cancer within community entities and policy-makers. Moreover, searching for opportunities to provide financing by obtaining the funding of



international organizations for the activities in the field of early detection or finding innovative financing solutions that support less fortunate women.

At the same time, to promote scientific decision-making, data must be collected and monitored continuously, encouraging academic research and studies regarding breast cancer to gear evidence-based strategic decisions and efficient interventions.

**Table 1: Policy options assessment**

Policy instruments		The rationale for policy option
<b>Policy Option 1</b>	Improving Service Delivery of Breast Cancer Early Detection and Screening	<p><i>Effectiveness:</i> service delivery in Jordan improved by ensuring equitable access to services, upgrading units, enhancing the healthcare provider's capacities, and providing high-quality screening services by developing national guidelines, standardizing the quality of reading images, and certifying all mammography units across Jordan.</p> <p><i>Efficiency:</i> Positive effect by decreasing the burden of treatment cost; Most of the treatment cost is used to treat 53% of patients in advanced stages of breast cancer rather than using the resources to cure and save women.</p> <p><i>Practicality:</i> the policy will be supported by most stakeholders and rejected by those who consider the policy will affect their revenue.</p>
<b>Policy Option 2</b>	Increasing Demand on Breast Cancer Screening and Early Detection Services	<p><i>Effectiveness:</i> increasing demands will increase the number of cases discovered in the early stage.</p> <p><i>Efficiency:</i> Positive effect by decreasing the burden of treatment cost; Most of the treatment cost is used to treat 53% of patients in advanced stages of breast cancer rather than using the resources to cure and save women).</p> <p><i>Practicality:</i> the policy will be supported by most stakeholders and rejected by those who consider the policy to affect their revenue.</p>

<b>Policy Option 3</b>	Ensuring Sustainability and Impact of Early Detection Services and Awareness Efforts	<p><i>Effectiveness:</i> discovering the disease in the early stages and reducing the cost resulting from disease and treatment with a planned collaborations and partnerships among different national, regional and international entities and stakeholders to Create supporting environment to advocate for breast cancer within community entities and policy makers through decision based on scientific data then the Sustainability and Impact of Early Detection Services and Awareness Efforts is enhanced.</p> <p><i>Efficiency:</i> Positive effect by decreasing burden of treatment cost; most of the cost of treatment is used to treating 53% of patients in advanced stages of breast cancer rather than using the resources to cure and save women) and life saving of women.</p> <p><i>Practicality:</i> Breast cancer is a societal issue, and stakeholders will support the policy from a social responsibility point of view.</p>
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### Implementation considerations and counterstrategies

The implementer should take into account the following key challenges that are specific to Jordan prior to the formulation of the policy and interventions:

1. Cultural sensitivity and social taboos towards the subject of cancer and in particular Breast Cancer.
2. Scarcity of trained mammogram radiologists and technicians.
3. Access to screening services is unequitable.
4. Cost of screening (JD 40 - 100) for those not covered by insurance cannot be afforded by the majority of women.
5. In Jordan, the policy remains that screening is only for diagnosing symptomatic cases, and only these cases are covered by insurance.



**Table 2: Implementation Considerations Summary**

Level	Barriers	Element(s)	Systematic review	Counterstrategies
<b>Individual</b>	Cultural sensitivity and social taboos towards the subject of cancer, particularly breast cancer.	Increasing Demand on Breast Cancer Screening and Early Detection Services	The reviewed studies indicated that cultural norms and religious beliefs constituted barriers to early diagnosis and treatment (Denewer et al.,2011; Hwang et al.,2017)	outreach activities (one to one /one to the group), national campaigns, and mobilizing the community to advocate for breast cancer screening
<b>Professional</b>	Scarcity of trained mammogram radiologists and technicians.	Improving Service Delivery of Breast Cancer Screening and Early Detection	The reviewed study indicate that The eight studies identified from the MENA region identified barriers to breast cancer screening related to service quality, fear of pain and of cancer itself, female versus male provider, having a physician recommend the screen, cost issues as well as time and convenience of the services(Bowser et al., 2017)	ensuring equitable access to services, upgrading units, enhancing the healthcare provider's capacities, and providing high-quality screening services by developing national guidelines, standardizing the quality of reading images, and certifying all mammography units across Jordan
<b>Organizational</b>	Access to screening services is inequitable.  Cost of screening (JD 40 - 100) for those not covered by insurance cannot be afforded by the majority of women.	Improving Service Delivery of Breast Cancer Screening and Early Detection  Ensuring sustainability and impact of early detection services and awareness efforts	The reviewed studies indicated that a lack of health insurance, low economic status/income, and distance from health care facilities (being unable to pay for transportation or accommodation near hospitals) seemed to be the most prominent causes of late diagnosis (Alsolami et al.,2019; Donnelly et al.,2011; Donnelly et al.,2015)	ensuring equitable access to services, upgrading units, enhancing the healthcare provider's capacities, and providing high-quality screening services by developing national guidelines, standardizing the quality of reading images, and certifying all mammography units across Jordan.

Level	Barriers	Element(s)	Systematic review	Counterstrategies
<b>System</b>	In Jordan, the policy remains that screening is only for diagnosing symptomatic cases, and only these cases are covered by insurance.	Ensuring sustainability and impact of early detection services and awareness efforts	No evidence of studies were found regarding the screening strategy in Jordan.	Providing reinforce policies, enabling environment, and buy-in of stakeholders to unified country-based action against breast cancer towards providing free early detection services for Jordanian women

## Conclusion

Policy decision-makers need to engage the key stakeholders (Ministry of health, Royal medical services, Private hospital association , Insurance company, Medical syndicates, Medical council , Private hospital, etc.) when adopting and implementing this policy to ensure the commitment and support.

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