



Ministero della salute



WP5 – MS PLATFORM

Call for Experts for the participation to the Drafting Groups of a Position Paper on “Equity mainstreaming in the cancer control in Europe”

1. Scope

1.1 This document is designed to enable the selection of experts, scientists and policy makers who wish to provide a sound scientific and methodological support to the Core Writing Groups (CWG) of the above reported Position Papers (PP) on the Topic, which was selected by the MS Platform as priority in the frame of the *European Guide on Quality Improvement in Comprehensive Cancer Control* (CanCon) Project. This Call follows a similar launched in April 2015 about 4 other Topics selected by the Platform.

2. Background

2.1 CanCon is a joint action initiative, co-funded by the EU Commission (DG Health, 2nd EU Health Programme) and by participating organizations, which include National Governments, Research and Public Health Institutes, Universities and Health care services from 17 EU Member States. **CanCon** aims to contribute in different ways to reduce the cancer burden in the EU. Its main deliverable will be the *European Guide on Quality Improvement in Comprehensive Cancer Control* for which aims to become a reference document on cancer control for the different potential targets such as governments, parliamentarians and other policy makers, health care providers and funders, and cancer experts and professionals at every level.

2.2 CanCon is coordinated by the National Institute of Public Health of Slovenia (NIPH-SI), has 3 horizontal work packages and 5 operational WPs (4 to 9), which aim to produce the actual content of the project. CanCon started in February 2014 and will continue until February 2017. You can find more detailed and in depth information about CanCon at www.cancercontrol.eu

2.3 WP5 is the specific Work-package designed to share among Members States (MS) the different challenges they face and those national/local experiences in cancer control which could be a valuable lesson for others. WP5 is coordinated by the Italian Ministry of Health (MoH-IT) and by the Belgian Cancer Centre in the Belgian Scientific Institute of Public Health (WIV-ISP); it is focused on 5 topics, agreed as priorities by the MS, with a group leaders for each topic. As mentioned above, 4 CWGs groups have already got started, while recently MS has agreed to launch a new Call about “*Equity mainstreaming in the cancer control in Europe*”, which will be run by

an International team led by *La Fundación para el Fomento de la Investigación Sanitaria y Biomédica de la Comunitat Valenciana* (FISABIO, Valencia, Spain) and including the University of Turin-Piedmont Region (Italy), the Belgian Cancer Centre in the Belgian Scientific Institute of Public Health (WIV-ISP) and the European Cancer Patient Coalition (ECPC).

3. Subject of the call

3.1 The call is addressed to experts in the topic reported at previous paragraph 2.3. A synthetic description of the expected general content for the topic is available in Annex A at the end of this Call.

4. Selection procedure

4.1 The selection procedure will briefly consist of the following steps:

- i. checking the applications' eligibility;
- ii. evaluating whether the applicants meet the selection criteria;
- iii. drawing up a list of the most suitable candidates.

1.2 The Evaluation Board will be composed of leaders of the CWG. Each application will be assessed by at least two members of the Board against the eligibility criteria (see below). The Board, in agreement with each subgroup leader will proceed to nomination mainly according to the scientific experience of the applicant

1.3 The selection process will also have to ensure, among others, independence of the experts (in particular, avoiding potential conflicts of interest) and a balanced scientific expertise (see below), as much as geographical and gender distribution of the candidates.

5. Candidates Requirements

5.1 . Eligibility criteria

Each application will be screened against the following eligibility criteria:

- i. **University degree** in: Medicine, Sociology, Engineering, Physics, Statistics, Mathematics, Biological Sciences, Biomedical Engineering, Economics, Medical Laboratory Science;
- ii. **At least 5 years professional experience** in a field relevant to the topic, gained after obtaining the degree mentioned in point (i);
- iii. ability to work in English¹: successful applicants must be able to read English and report in English, in writing and orally, including ability to screen and analyze the relevant international scientific literature in the specific context.

5.2 Relevant areas of experience and skills

5.2.1 - Applicants will be evaluated on the following areas of scientific expertise: Social and equity disciplines, epidemiology, occupational medicine and hygiene, environment and health, public health, health policy, or other scientific disciplines relevant to the topic.

5.2.2 - Applicants will be evaluated with regard to the following skills:

- professional experience in a multidisciplinary scientific environment, preferably in an international context;

¹'Ability to work in English' corresponds to level B2 or above, as set out in the Council of Europe reference document for the European Language Portfolio ('Common European Framework of Reference: Learning, Teaching, and Assessment'). For more information please refer to <http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>

- published scientific papers on topics relevant to developing scientific proposals or recommendations about the specific topic;
- project management related to scientific matters.

6. Estimated work burden – Fees and reimbursement

6.1 Selected experts are expected to work at distance through electronic tools following procedures that will be detailed by the CWG coordinator. A specific electronic tool has been implemented in order to have easier communication within the CWG. Each selected expert will have personal access to this tool, receiving from the WP5 leading team specific login credentials.

6.2 The estimated overall work burden will be of 10 w.d. full time, with the goal of concluding all the activities within the end of 2015 (first trimester 2016 at the latest).

6.3 The experts are expected to attend in person one (two in exceptional circumstances) coordination meeting(s)/workshop(s) in an EU city to be selected by the CWG. Timing of these will depend on the progress of the activities (present forecast November 2015).

6.4 Experts will receive no fees for their contribution to the CWG . They will receive full reimbursement of the travel and subsistences costs for their participation to the meeting(s), based on the applicable EU funding regulations.

7. Submission of applications

7.1 Experts/Scientists willing to apply are invited to express their interest in joining the CWG by sending an application request to the following mail:

g.nicoletti@sanita.it

7.2 The application MUST include at least:

- The applicant's personal information and contact details (including mobile phone and E-mail contacts)
- a EU curriculum vitae, preferably not exceeding three pages;
- a list of the applicant's scientific publications (written in Vancouver style) relevant to the specific topic of the Call;
- a declaration about any potential conflict of interest.

7.3 Applicants are kindly asked to complete their application and related documents in English, in order to facilitate the selection procedure.

7.4 The application MAY include:

- A letter of support to the candidate by a MS Authority, one of the CanCon Partner/Stakeholder or any other relevant Organisation;
- Any further documents considered relevant by the candidate

7.5 Further supporting documents might be requested at a later stage.

7.6 The **closing date for submitting applications for the present Call is September 14, 2015.** Applications will not be accepted after the deadline has expired.

8. Conclusion of the procedure - Publication of results – Expected number of experts

8.1 The leading team of CanCon WP5 will publish the results of the selection procedure on the CanCon web site no later than 30 days after the dead line of the Call.

8.2 Applicants will also be informed by e-mail.

8.3 The maximum number of experts to be included in the CWG is 5. The CWG could increase this figure in exceptional circumstances up to 7.

9. Personal data

9.1 Personal data submitted by the applicants will be collected, processed and published in accordance with Regulation (EC) No 45/2001 of the European Parliament and of the Council².

10. Information about the Call

10.1 Experts and any other interested individual may ask for further information and details exclusively by E-mail to the following contacts at the Italian Ministry of Health:

g.nicoletti@sanita.it ; an.federici@sanita.it

Rome, July 31. 2015

² OJ L 8, 12.1.2001, p. 1

ANNEX A – SYNTHETIC DESCRIPTION OF THE TOPIC

Equity mainstreaming in the cancer control in Europe

The description of health inequalities has been well established. Also in the field of cancer, some studies have identified inequalities, between European countries and within countries by subgroups of population. The policy paper should include the description of the “state of the art” of inequalities in cancer in a concisely way, summarizing the influence of the main inequalities axis, such as gender, socioeconomic position, ethnicity, territory (European countries) and others, in the cancer continuum, from primary, secondary, tertiary prevention, care, survivorships to rehabilitation. Now it is time to focus on discussion about how to intervene and tackle these inequalities on the basis of ‘the state of evidence’. Reference should be made to important overview studies or documents, rather than we providing an extensive description ourselves. It’s not the objective to produce new knowledge about cancer inequalities.

Understanding the underlying mechanisms and pathways that drive the persistent inequalities in health is essential to develop adequate policies. Therefore a description of how inequalities are embedded within the larger social structure will highlight that tackling health (cancer) inequalities is largely a policy matter and should not focus on individual behavioral change alone. Different mechanisms might be at play for the different axes of inequalities (gender, socioeconomic, ethnic and territory). These differences should be outlined, but also the commonalities should be stressed. It is also important to subscribe to a long-term perspective and to pay attention to the processes of how (dis)advantages often accumulate over peoples’ life course.

With this background the objective will be to identify the key issues, dimensions and questions that could be included for mainstreaming equity in cancer control policies, programs’ and services. This could be used as a tool to help policymakers in every European country to try to highlight and tackle cancer inequalities. The policy paper will include examples of the tool being applied to the different aspects of the cancer continuum.