EDITORIAL

Megatrends and cancer control

Recently, a report about international global megatrends arrived on my desk entitled, “Future State 2030: The global megatrends shaping governments”. The report was produced by KPMG International and the Mowat Centre (an independent public policy research centre at the School of Public Policy and Governance at the University of Toronto). I found the report intriguing and would encourage you to seek it out.

There are major global forces (megatrends) taking shape today that will have a significant impact on the business landscape for the public and private sector through to 2030 and beyond. These forces have implications for national governments and public sector policy, including health care.

The megatrends are salient to the future of governments and their core responsibilities of economic prosperity, security, social cohesion, and environmental sustainability. I thought it was particularly relevant to us in an election year to consider these megatrends and understand more about them and their impact on public policy.

It is anticipated these global megatrends will influence governments and citizens alike well into 2030. The megatrends are highly inter-related, yet each will have its own impact. The trends can be grouped broadly into three categories concerning the individual (#1–3), the global economy (#4–6), and the physical environment (#7–8).

1. **Demographics**: Falling birth rates and higher life expectancy are increasing the proportion of older and elderly people across the world, challenging the solvency of social welfare systems (including pensions and health care).
2. **Rise of the individual**: Advances in education health and technology have helped to empower individuals like never before, leading to increased demands for transparency and participation in government and public decision-making.
3. **Enabling technology**: Information and communication technology has transformed society over the past 30 years, creating novel opportunities while testing the ability to harness their benefits.
4. **Economic interconnectedness**: The interconnected global economy will see a continued increase in the levels of international trade and capital flows, but is in need of strengthened conventions to fully realize the optimum benefits.
5. **Public debt**: Public debt is expected to operate as a significant constraint to fiscal and policy options. How do we keep this debt under control yet continue to offer public services?
6. **Economic power shift**: Emerging economies are lifting millions out of poverty while also exerting more influence in the global economy. How will transparency and inclusiveness be achieved and maintained?
7. **Climate change**: Rising greenhouse gas emissions are causing climate change and driving a complex mix of unpredictable changes in the environment while taxing the resilience of natural and built systems.
8. **Resource stress**: The combined pressure of population growth, economic growth, and climate change will place increased stress on essential natural resources including water, food, arable land, and energy.
9. **Urbanization**: Almost two-thirds of the world’s population will reside in cities by the year 2030. Urbanization is creating significant opportunities for social and economic development and more sustainable living, but also exerting stress in infrastructure and resources (particularly energy).

The Future State report highlights that appropriate strategies for future success include greater cooperation in the international arena, promoting individual change in citizens, and an increased focus on proactive measures to mitigate the worst of the impacts. The available tools for governments are policy, regulation, and programs while developing the necessary strategies, structures, and skills in order to be effective in the future. I commend the report to you for more details regarding each of the megatrends and their respective impacts. The content within the report presents many questions we ought to be asking our candidates during the election campaign this year.

But, in the meantime, this report also stimulated me to think about megatrends in cancer control and the potential impact they will have on us and our working lives over the next decades. What are the megatrends in the world of cancer control? What do you see as the cancer control megatrends? Here are the ones I thought about based on what I have been hearing recently at conferences and my reading in the literature.

1. **Advances in science and technology producing a foundation and driving force for personalized medicine (or cancer care)**: Genomics and molecular discoveries are heralding the day when we can predict with confidence which patients have more aggressive disease, as well as which individuals will respond to specific treatments (chemotherapies, surgeries, and radiotherapies). Treatment regimens will be tailored to the individual’s biological make-up with ever-increasing frequency.
2. **Increasing disparities and inequities across many aspects of life:** Disparities and inequities are evident in many places in terms of socio-economic status, gender, geography (rural versus remote versus urban living), indigenous peoples, education and literacy. Such disparities influence access to health and illness care.

3. **Increasing understanding about the impact of individual behaviour and the role of lifestyle on health:** Knowledge about the complexities of individual behaviour change is growing, as is our understanding about the links between lifestyle and wellness (or illness). Identifying how to effectively influence what are believed to be modifiable cancer risks factors (e.g., tobacco smoking, obesity, physical inactivity) remains somewhat elusive at this point in time.

4. **Growing recognition of quality of life and the rights of the individual:** Attention to the burden of suffering from chronic and other illnesses and how that burden impacts so many aspects of an individual’s life has been discussed with greater frequency over the last decades. As an example, access to palliative and end-of-life care is now seen as a human right. What a country is doing about whole person care (person-centred or patient-centred care) is cited as a hallmark of quality in a health care system.

5. **Escalating numbers of individuals that will be diagnosed with cancer and of cancer survivors:** The changing population demographics around the world will result in an escalation of cancer incidence, but the advent of early diagnosis programs and advances in cancer treatments will result in a growing number of individuals who are cured of their disease or living with controlled disease. In many instances, some cancers will become a chronic illness. However, cancer survivors are a vulnerable population and can experience late and long-term effects from their cancer experience and treatments. There is much to learn in this field if we are to improve the outcomes for cancer survivors.

6. **Mounting financial constraints (especially for health care) at both a personal and public level:** As the cost of living escalates and public service cutbacks are imposed, challenges will continue to rise in terms of daily living and providing necessary health and social services.

These trends have led to the recognition that change is necessary in our health care delivery system, including the cancer care system. We need to reinvent how we deliver care across the cancer trajectory from prevention through diagnosis, treatment, and follow-up phases (including survivorship care, supportive care, and end-of-life care) and ensure we are moving to a person-centred system. The systems we have used successfully in the past are no longer sustainable or effective. We need a transformative culture change.

Transformative change demands a new way of thinking. It means embracing a new attitude about curiosity and finding creative and innovative approaches to wellness, to health care, and to cancer control. It implies that we need to work collaboratively in effective partnerships to think about and identify the most relevant approaches for the future. In the words of Einstein, “We cannot solve our problems with the same thinking we used when we created them.”

As cancer nurses, I think we need to anticipate the impact of these cancer control megatrends and begin to prepare ourselves now. We cannot afford to wait until the trends are fully upon us. It is important that we learn about these various trends, understand their implications (for our patients and their families and for ourselves, as professional practitioners), and develop the necessary skills to cope and adapt for the future realities.

As cancer nurses, we also need to participate in the change (in the words of Gandhi, “You must be the change you wish to see in the world”). Historically, cancer nurses have been at the centre of cancer care and played a significant role in many of the significant trends in cancer control over the past several decades. I see no reason for that to change. We make a difference in the lives of patients and their families and we need to be able to continue to do that. Hence, we must participate in the transforming of the cancer control system and not stand on the sidelines.

But, enough from me. I would love to hear from you. What do you think are the megatrends in cancer control? Are the ones I identified the major ones from your perspective? What did I miss? What do you think we need to do, as nurses, to incorporate these trends into our working lives?

Send me a note and let me know what you think (marg.i.fitch@gmail.com).

![Margaret Fitch, RN, PhD
Editor in Chief](image)

**REFERENCE**