

Role of Community-Based Organizations in Supporting Cancer Patients in Eastern Nigeria

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ABSTRACT

Cancer is a major public health challenge in Eastern Nigeria, where breast, cervical, and prostate cancers dominate the disease burden. The rising incidence is exacerbated by limited healthcare infrastructure, low cancer awareness, entrenched cultural beliefs, and economic barriers. Community-Based Organizations (CBOs) have emerged as critical stakeholders in addressing these gaps by promoting cancer awareness, facilitating early detection through screening programs, providing psychosocial and financial support, and advocating for improved healthcare policies. This review explores the roles, achievements, and challenges of CBOs in supporting cancer patients in Eastern Nigeria. It highlights how CBOs contribute to improved cancer literacy, increased access to screening services, and better patient outcomes, while also examining the financial constraints, cultural resistance, and lack of healthcare system integration that hinder their impact. The study emphasizes the need for strengthened partnerships between CBOs, healthcare providers, and policymakers to ensure sustainable cancer care delivery. By empowering CBOs through capacity building, funding, and systemic collaboration, cancer prevention and management efforts in Eastern Nigeria can be significantly enhanced.

Keywords: Community-Based Organizations (CBOs), cancer burden, Eastern Nigeria, cancer awareness.

INTRODUCTION

Cancer remains a major public health challenge worldwide, with its burden particularly severe in low- and middle-income countries, including Nigeria [1]. Over the past few decades, the incidence and mortality rates of cancer have surged significantly across the country, exacerbated by factors such as limited healthcare access, insufficient screening programs, and delayed treatment. Eastern Nigeria, in particular, has witnessed a high prevalence of cancers, including breast, cervical, and prostate cancers, which account for a large proportion of the cancer-related morbidity and mortality in the region. Several factors contribute to this growing cancer burden in Eastern Nigeria. Limited healthcare infrastructure, particularly in rural areas, hinders access to timely screening, diagnosis, and treatment services [2]. Furthermore, low awareness of cancer symptoms and risk factors among the population, coupled with entrenched cultural beliefs, often leads to late-stage diagnoses, when treatment options are less effective. Economic constraints further compound the issue, as many families lack the financial means to afford cancer care, which often involves high costs for diagnosis, treatment, and follow-up care [3]. These challenges disproportionately impact vulnerable populations, leading to significant disparities in cancer outcomes.

Amidst these challenges, Community-Based Organizations (CBOs) have emerged as crucial actors in addressing the gaps in cancer prevention, treatment, and care in Eastern Nigeria. CBOs are typically grassroots organizations that are deeply embedded in their communities, making them well-positioned to provide essential support services. Their efforts include raising cancer awareness, facilitating screening programs, offering psychosocial and financial support to patients and families, and advocating for improved cancer care infrastructure.

Given the critical role that CBOs play in mitigating the cancer burden, this review aims to explore their contributions and assess their impact on cancer prevention, treatment, and care in Eastern Nigeria. By analyzing

the activities, challenges, and successes of these organizations, this study seeks to provide insights into how CBOs can be further empowered to strengthen cancer care delivery in the region.

Cancer has become an increasingly pressing issue in Nigeria, ranking among the leading causes of death. According to the World Health Organization (WHO) [4], over 120,000 new cancer cases are diagnosed annually in Nigeria, with mortality rates alarmingly high due to late detection and limited access to care. In Eastern Nigeria, cancers such as breast, cervical, and prostate cancers dominate, posing serious health and economic challenges to individuals and communities.

Healthcare infrastructure in Eastern Nigeria struggles to cope with the rising cancer burden due to inadequate facilities, a shortage of skilled healthcare professionals, and insufficient government funding. The lack of awareness about cancer prevention and early detection among the population often results in delayed diagnoses, by which time the disease has progressed to advanced stages [5]. Additionally, cultural misconceptions—such as beliefs in supernatural causes of cancer—discourage many individuals from seeking medical intervention, leading them to rely on alternative and often ineffective traditional therapies.

Economic challenges further exacerbate the situation. The high costs associated with cancer diagnosis, treatment (chemotherapy, surgery, and radiotherapy), and follow-up care place immense financial strain on families, many of whom are already living in poverty. These challenges highlight the urgent need for community-level interventions that address awareness gaps, provide accessible support, and advocate for systemic improvements in cancer care delivery.

CBOs have played an instrumental role in complementing the efforts of government and healthcare institutions [6]. They are often at the forefront of creating cancer awareness campaigns, facilitating early detection through free or subsidized screenings, and providing emotional, psychosocial, and financial support to patients and their families. Despite their significant contributions, there remains limited documentation and understanding of the full scope of CBOs' roles and the challenges they face in Eastern Nigeria.

Eastern Nigeria is experiencing a rising incidence of cancers, particularly breast, cervical, and prostate cancers, yet outcomes remain poor due to multiple systemic and societal challenges. Limited healthcare infrastructure, lack of cancer awareness, deep-rooted cultural beliefs, and financial barriers prevent timely diagnosis and effective treatment [7]. While Community-Based Organizations (CBOs) have emerged as essential actors in mitigating these challenges, there is a paucity of comprehensive evidence on their roles, effectiveness, and challenges in supporting cancer prevention, treatment, and care in the region. Without a deeper understanding of these contributions, efforts to scale up and strengthen cancer care interventions remain fragmented and insufficient.

This review examines the role of Community-Based Organizations (CBOs) in cancer prevention, awareness creation, and early detection in Eastern Nigeria. It assesses the support provided by CBOs to cancer patients and their families, identifies challenges faced in implementing cancer-related programs, explores opportunities for strengthening CBOs' capacity, and provides recommendations for enhancing partnerships between CBOs, healthcare providers, and government institutions to improve cancer care outcomes. The expanded section provides a detailed foundation for the study.

Cancer Burden in Eastern Nigeria

Prevalence of Common Cancers: Eastern Nigeria faces a significant cancer burden, with breast, cervical, and prostate cancer being the most prevalent types [8]. Breast cancer remains the leading malignancy, but most cases are diagnosed at advanced stages, reducing survival rates [9]. Factors such as limited access to mammography screening, cultural taboos, and low awareness contribute to late-stage detection [10]. Cervical cancer is the second most common cancer in Nigerian women, with Human Papillomavirus (HPV) being the primary cause. However, vaccination and screening programs are scarce, particularly in rural areas. Prostate cancer is the most frequently diagnosed cancer among men in Eastern Nigeria, driven by lack of routine screening, cultural stigmas, and financial barriers to treatment. The high prevalence of these cancers is further compounded by late-stage presentations, with many patients arriving at healthcare facilities with advanced cancers, leaving fewer treatment options and poorer outcomes [11].

Barriers to Cancer Care

Cancer care delivery in Eastern Nigeria faces several systemic, cultural, and economic challenges. These include limited healthcare facilities, high out-of-pocket costs, cultural beliefs and stigma, and poor awareness. Limited healthcare facilities, particularly in rural areas, leave rural populations with minimal access to essential care [12]. The lack of well-equipped hospitals and trained healthcare professionals further exacerbates the problem, forcing patients to travel long distances for specialized care. Financial constraints also contribute to the lack of cancer care, making it unaffordable for low-income households. The absence of widespread health insurance coverage often leads to treatment abandonment. Cultural misconceptions about cancer, such as viewing it as a spiritual affliction or a result of witchcraft, also discourage open conversations about symptoms and treatment. Poor awareness about

cancer symptoms, risk factors, and preventive measures also exacerbates the problem. Many rural communities are unaware of the importance of early detection through routine screenings. Limited public education campaigns and targeted awareness initiatives further perpetuate late-stage diagnoses.

Roles of Community-Based Organizations in Cancer Support

Awareness and Education Campaigns: Community-Based Organizations (CBOs) are instrumental in reducing cancer awareness by educating communities about prevention, early detection, and treatment options. They use outreach programs, workshops, and media campaigns to challenge misconceptions and dispel cancer-related stigmas [13]. For instance, the Breast Cancer Awareness Foundation (BCAF) conducts sensitization campaigns in rural areas, teaching women about breast self-examination and cervical cancer screening. These campaigns enhance cancer literacy and promote proactive health-seeking behavior.

Facilitation of Screening and Early Detection: CBOs are partnering with local clinics and healthcare providers to provide cancer screening services to underserved populations. They organize mobile clinics, health fairs, and community outreach programs to identify cancers at earlier stages [14]. They also organize free or subsidized screening camps for breast and cervical cancer. These interventions have increased uptake of screening services, enabling early detection and reducing advanced-stage presentations.

Psychosocial and Emotional Support: Cancer diagnosis and treatment can be overwhelming for patients and their families. CBOs provide psychosocial support through counseling, peer-led support groups, and advocacy networks. These services help patients manage stress, anxiety, and emotional trauma, while providing a platform for sharing experiences and coping strategies. These support systems enhance emotional resilience, improve treatment adherence, and foster a sense of community among cancer patients and caregivers.

Financial Assistance and Resource Mobilization: Cancer Benefit Organizations (CBOs) are mobilizing resources to help patients with cancer treatment costs, transportation, and supportive care. They use fundraising campaigns, donor partnerships, and financial grants to provide assistance for chemotherapy, surgeries, and palliative care. Crowdfunding initiatives are particularly effective for low-income patients undergoing cancer treatments. These efforts alleviate financial barriers, ensuring more patients can access life-saving treatments.

Advocacy for Improved Cancer Policies: CBOs are influential advocates for systemic changes in cancer care delivery, advocating for improved healthcare policies, increased funding for oncology services, and amplifying the voices of cancer patients and communities [15]. They engage with policymakers, government agencies, and other stakeholders to push for reforms and increased investments in cancer services. Their impact is significant, contributing to improved cancer care infrastructure and outcomes in Eastern Nigeria.

Challenges Faced by Community-Based Organizations (CBOs)

Community-Based Organizations (CBOs) play a pivotal role in addressing cancer burden in Eastern Nigeria, yet they face significant challenges that limit their effectiveness and long-term impact. These challenges are multifaceted, involving financial, human, cultural, and systemic constraints.

Limited Funding and Resources: CBOs often struggle with limited financial resources, relying heavily on donations, grants, and volunteer efforts. This lack of funding hinders the sustainability and scalability of their programs. It limits the expansion of outreach activities, procurement of essential tools, and long-term planning, often leading to premature terminations. For instance, mobile clinics for cancer screenings face operational costs like fuel, vehicle maintenance, and staff compensation [16]. To overcome these limitations, CBOs need sustained financial partnerships with governments, international donors, and private sector entities.

Lack of Skilled Personnel: Cancer care organizations (CBOs) face a shortage of skilled personnel, affecting the quality and reach of their services. This is due to the limited availability of trained healthcare workers, lack of formal training in cancer-related care, and high turnover rates. Without skilled personnel, CBOs may struggle to interpret screening results accurately, provide appropriate referrals, or offer emotional counseling. To address this, capacity-building programs that train CBO staff and volunteers in cancer education, early detection techniques, and psychosocial support can help. Collaborating with healthcare professionals for periodic training and mentorship can also enhance their capabilities.

Socio-Cultural Barriers: Cancer-related beliefs, stigma, and misinformation in Eastern Nigeria pose significant challenges for Community-Based Organizations (CBOs). These barriers hinder the acceptance of cancer education, prevention, and treatment initiatives. Cultural misconceptions about cancer, such as its spiritual curse or witchcraft, discourage individuals from seeking medical help and encourage reliance on traditional healers [17]. Cultural taboos about sensitive topics, like breast self-examination or cervical cancer screenings, limit CBOs' efforts to promote preventive practices. Stigma and discrimination discourage early detection, treatment adherence, and community dialogue about cancer. Women diagnosed with breast or cervical cancer may face marital challenges or rejection due to misconceptions. CBOs must invest time and resources to dispel myths and build trust within communities.

Repeated resistance to cancer interventions can slow awareness campaigns and discourage participation in screening programs.

Inadequate Collaboration with Healthcare Systems: Community-Based Organizations (CBOs) face significant challenges in cancer care delivery due to poor coordination between them and formal healthcare systems. This leads to fragmented services, such as gaps in patient referrals, follow-ups, and access to treatment. Inconsistent data sharing also hinders efforts to track patients' progress and measure the impact of interventions. Some formal healthcare systems may not fully recognize CBOs' complementary role in cancer care, leading to exclusion from policy discussions and resource allocation [18]. CBOs operating in rural areas often struggle to secure formal partnerships with healthcare authorities, further isolating their efforts. The impact on patients is significant, as without proper collaboration, patients may experience delays in receiving timely care, incomplete treatment regimens, and fragmented support systems. Addressing these challenges requires targeted solutions, including long-term financial support, capacity-building initiatives, culturally sensitive programs, and enhanced partnerships with formal healthcare systems. By overcoming these challenges, CBOs can play an even more effective role in reducing the cancer burden and improving health outcomes in Eastern Nigeria.

Impact of CBOs on Cancer Care

Despite these challenges, CBOs have made significant contributions to improving cancer awareness, facilitating early detection, and providing emotional and financial support. Case studies show that CBO interventions have led to increased participation in screening programs and better patient outcomes.

Case Study: A community-based initiative in Eastern Nigeria reported a 30% increase in cervical cancer screening following targeted awareness campaigns.

Recommendations for Strengthening Community-Based Organizations' (CBOs) Role

To effectively address the growing cancer burden in Eastern Nigeria, it is essential to strengthen the capacity, reach, and sustainability of Community-Based Organizations (CBOs). The following recommendations focus on enhancing CBO operations through financial support, capacity development, healthcare integration, and cultural engagement.

Increased Funding and Partnerships: Cancer Business Organizations (CBOs) need sustained funding and strategic partnerships with governments, private sectors, and international organizations to overcome financial constraints and resource limitations. Governments should allocate funds for cancer awareness, screening, and support programs, while policies should encourage grant schemes and tax incentives for CBOs. Private sector and international partnerships can adopt CBOs as part of their Corporate Social Responsibility programs, providing funds, medical equipment, and logistical support. International organizations and donor agencies should prioritize funding CBO-led programs, particularly targeting rural and underserved populations. CBOs should explore innovative funding mechanisms like public crowdfunding, social enterprise ventures, and micro-donations from the local community. Building partnerships with pharmaceutical companies for subsidized cancer medications and screening tools can help reduce treatment costs.

Capacity Building and Training: To enhance the effectiveness of cancer-related services, it is crucial to improve the skills and knowledge of CBO staff and volunteers. This can be achieved through regular capacity-building workshops, specialized training in health communication, partnerships with healthcare professionals, hospitals, and training institutions, and international training programs. Strengthening volunteer networks, such as training community volunteers as health educators or cancer advocates, can help amplify outreach efforts in hard-to-reach areas. Programs should focus on providing volunteers with educational materials and tools to engage communities effectively. Implementing peer-to-peer training programs, where experienced CBO staff mentor new recruits, can foster knowledge transfer and enhance team efficiency.

Integration with Formal Healthcare Systems: To ensure efficient cancer care delivery, it is crucial to establish stronger partnerships between Cancer Survivors Organizations (CBOs) and healthcare systems. This can be achieved through formal referral pathways linking CBO cancer screening initiatives with diagnostic centers, hospitals, and treatment facilities. Healthcare systems should provide training and technical support to CBOs to ensure accurate cancer screening, diagnosis, and patient follow-up. Encouraging CBOs to participate in government-led health initiatives and integrating CBO programs into national cancer control frameworks can enhance resource allocation and avoid service duplication. Additionally, developing shared platforms for documenting, tracking, and evaluating patient outcomes can improve service delivery. Collaborating in data collection can provide accurate statistics on cancer prevalence, early detection rates, and treatment outcomes.

Addressing Cultural Stigma: Cultural misconceptions and stigma surrounding cancer are significant barriers to cancer care uptake in Eastern Nigeria. To address this, targeted efforts should be made to engage community leaders, influencers, and religious organizations in cancer education campaigns. Local leaders, religious figures, and traditional healers can help legitimize messages about cancer prevention, screening, and treatment. Culturally sensitive campaigns should be used to adapt cancer education materials and awareness programs to local languages,

cultural norms, and beliefs. Visual storytelling, local media, and community drama can be powerful tools for communicating complex health messages. Peer education and role models can also be used to inspire others to seek early diagnosis and treatment. Establishing community support groups led by survivors can help reduce stigma and build trust within communities. Faith-based Community-Based Organizations (CBOs) can collaborate with churches and mosques to integrate cancer education into sermons and community gatherings, promoting health-seeking behaviors without cultural resistance. A multi-stakeholder approach involving governments, private sectors, healthcare providers, and community influencers will ensure CBOs deliver sustainable cancer care services, bridging critical gaps in cancer prevention, treatment, and support, ultimately improving cancer outcomes in Eastern Nigeria.

CONCLUSION

Community-Based Organizations (CBOs) play a pivotal role in supporting cancer prevention, treatment, and care in Eastern Nigeria, where systemic and societal barriers have perpetuated poor cancer outcomes. Their grassroots presence and deep understanding of community dynamics enable them to address critical gaps in cancer awareness, early detection, psychosocial support, and financial assistance. By organizing educational campaigns, facilitating access to screening services, and providing resources to vulnerable patients, CBOs serve as a lifeline for individuals and families grappling with the challenges of cancer. However, CBOs continue to face significant challenges, including limited funding, shortages of skilled personnel, cultural misconceptions, and inadequate collaboration with formal healthcare systems. These constraints hinder their ability to scale up and sustain impactful interventions. Addressing these challenges requires a multi-stakeholder approach involving governments, healthcare institutions, international donors, and the private sector. Strategic partnerships, increased funding, capacity-building initiatives, and integration of CBOs into formal healthcare frameworks are essential to amplify their contributions to cancer care. Moving forward, strengthening the capacity of CBOs and fostering better collaboration between these organizations and healthcare systems can lead to more effective and sustainable cancer interventions. Policymakers must prioritize cancer care as a public health imperative by implementing supportive policies, investing in infrastructure, and recognizing the indispensable role of CBOs in bridging gaps within the healthcare system. With a collective and sustained effort, CBOs can continue to alleviate the cancer burden in Eastern Nigeria, improving outcomes and enhancing the quality of life for those affected by the disease.

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