Review of possible establishment of an international fund to support cancer control in developing countries

Note by the Secretariat

1. At the request of the Government of Turkey, the Executive Board is invited to review the possible establishment of an international cancer control fund to support and strengthen the implementation of comprehensive cancer-control plans in developing countries.

2. Cancer, along with other chronic diseases, represents a major component of the global disease burden. Interventions exist to prevent and control the disease and to ensure that terminal patients suffer minimal pain. More new cases of cancer now occur in low- and medium-resource countries; hence the importance of improving their prospects for prevention. However, there is a serious gap between the available knowledge and its implementation. Greater access to affordable and effective cancer prevention and control services, including treatment and palliative care, has the potential to reduce the burden of preventable death and disability from cancer.

3. Prevention and control of chronic diseases, including cancer, in developing countries has so far received little attention from multilateral and bilateral donors. Most funds allocated to cancer-related activities are channelled to basic research carried out in developed countries; little financing is provided for applied research or for translating existing knowledge into public health programmes.

4. In the 1960s, WHO took the lead in cancer control by establishing IARC, which today has an assessed (biennial) budget of US$ 37 million contributed by the 16 Member States, and raises voluntary funds of US$ 28 million. IARC conducts studies and activities of direct relevance to cancer control in many parts of the developing world. In addition, WHO and the International Union Against Cancer launched in 2003 the Alliance for Global Cancer Control. Its goals are to identify and increase opportunities for collaboration in global cancer control, to provide advocacy for national cancer-control programmes, and to serve as a forum for communication and exchange of information.

5. Some bilateral programmes exist, especially between individual cancer institutions in developed and developing countries. For example, the National Cancer Institute (United States of America) provides support for the development of cancer-control programmes in the Eastern Mediterranean Region. UICC promotes national cancer-control planning and helps to improve the knowledge and skills of cancer and patient/survivor organizations and networks so that they may effectively influence framing of cancer policy and implementation of programmes. However, these initiatives are insufficient to ensure that the benefits of existing knowledge on the prevention and control of cancer are widely spread.
6. Several new international funds or alliances have recently been established in the field of health. Some, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, have required political commitment at the highest level, following extensive discussion of the impact of these diseases on social and economic development. Others, such as the Global Alliance on Vaccines and Immunization, needed the foresight of a major private foundation to provide the necessary stimulus. New mechanisms have been put in place for monitoring and evaluating donations from these sources.

**ACTION BY THE EXECUTIVE BOARD**

7. The Board is invited to review the possibility of establishing an international fund to support cancer control in developing countries.