

Not (just) another declaration

→ Peter McIntyre

The World Cancer Declaration, issued in July, aims to mobilise efforts behind a limited number of aims that will make a big difference and can be quickly achieved.

The World Cancer Declaration adopted at the UICC Congress in Washington this summer aims to be different from other closing statements – longer on action than in words.

Most conferences end with a declaration or statement, and most vanish into the ether. Nobody has yet been cured of cancer, or even of the common cold, by rhetoric. Without hard slog to turn the rhetoric into action, conventions and declarations are soon forgotten.

On the other hand, declarations can play a valuable role in setting agendas, focusing attention on the main issues, and bringing people together to work in the same direction.

The cancer world has had its share of big statements in recent years. In 2000, the World Summit against Cancer in the New Millennium adopted the Charter of Paris. This adopted a rights agenda, and focused on early detection, translational research, clinical guidelines, evidence-based medicine, quality of life and patient advocacy. Most people remember another

outcome of the summit better than the ten articles and preamble of the Charter, since this was the meeting that established 4 February each year as 'World Cancer Day'.

In May 2003, the World Health Assembly (WHA), the global 'Parliament' of the World Health Organization, opened the WHO Framework Convention on Tobacco Control for signature. The FCTC came into force in February 2005 and has become one of the most widely embraced treaties in the history of the United Nations. This was seen as a declaration of war on the harmful effects of tobacco, and has strengthened international campaigns against the tobacco industry. However, the 38 Articles and more than 9,000 words are not especially memorable. And many governments have proved readier to sign it than to take action afterwards.

In May 2005, the WHA, "alarmed by the rising trends of cancer risk-factors, the number of new cancer cases, and cancer morbidity and mortality worldwide, in particular in developing countries," passed a landmark resolution on

Anti-cancer vaccination. Adding Hepatitis B to child immunisation programmes like this one at the Hai Linh Commune Health Centre, in Vietnam, will have a significant impact on the incidence of liver cancer – one of the most prevalent cancers in some areas of the world



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cancer prevention and control that set the agenda for comprehensive national cancer control plans in each country. For the first time the WHO declared cancer to be a priority issue for all governments. This has given a tremendous boost to global efforts on cancer, but the comprehensive nature of the resolution and the plodding UN language, means that it is hardly a call to arms.

The World Cancer Declaration adopted at the UICC World Cancer Congress in Washington July 2006 sets out to fill the gap. It does not set a new agenda, but attempts to identify strategic and urgent steps that cancer organisations and campaigners can address in the short term. This is unashamedly an advocacy declaration, designed to give a much higher profile to cancer and to put it on the political and public agenda.

At under 1,000 words, it is less than half the length of the Charter of Paris, and the nine key

calls to action are admirably brief. It was the result of widespread consultation and has the support of high-profile global intergovernmental agencies. However, the Declaration was essentially produced by NGOs, so it has natural allies to work with it in every country.

The Declaration has a short shelf-life, since progress will be monitored and reported to each World Congress, after which it will be redrafted. It must therefore show results by the next UICC Congress in Geneva in August 2008.

Relative simplicity was not easy to achieve. Responsibility for the early drafts rested with the hosts for the Washington Congress, the American Cancer Society (ACS). Ten months in advance of the Congress, the ACS and UICC trawled a list of 250 experts worldwide for ideas about what it should contain. Unsurprisingly, the first draft ran to 20 pages.

This draft went back to the experts and global bodies (WHO, IARC etc) for comment. The



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second draft was even longer. Then began the process of simplifying and clarifying – it took six or seven drafts to achieve the short version. At the Congress itself, participants were given three days to comment on the draft, and suggestions were made at a ‘World Leader Summit’ – although the Declaration hardly changed at this late stage.

Franco Cavalli, President of the UICC, says that brevity and clarity were key aims, as it is important that the Declaration is backed with action. “Of course, the World Cancer Declaration is based on the Charter of Paris, but the idea was to have something which could have much more immediate results, to pick topics that seem to be the most important and urgent and to summarise them very briefly. The Charter of Paris is a declamatory declaration without

immediate consequences; here we are trying to have consequences.

“It is not enough to have governments signing declarations, you need interventions from civil society to push governments to realise what they have written. Here the driving forces were NGOs. We are trying to follow the example of the AIDS NGOs, which have been able to put the topic of AIDS on the political and media agenda, which, alas, has not yet been the case for cancer.”

Cavalli admits that he was initially sceptical, but is increasingly enthusiastic about the Declaration’s power to mobilise. He was at the Chinese Congress on Cancer in October, organised by the two major Chinese associations. They further reduced the World Cancer Declaration to six points, set priorities for combating cancer in

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China, and adopted it as “the Tianjin Declaration”. At a meeting in Bangkok in early November – Empowering Cancer Prevention in the Asia Pacific – the Declaration was also a topic for debate in many of the sessions.

“What I am hearing is much more positive than what I expected. I have the impression that this is starting to create a little avalanche which is increasing speed. The fact that such a declaration has been launched is a sign of the momentum which is being created currently about the emerging problem of cancer in the developing world. There was an editorial by Peter Boyle in the *Lancet* and I published an editorial in the last issue of *Nature Clinical Practice Oncology*. This is part of a movement which is just starting to roll.”

The Declaration says that it “requires partnerships between governments, private sector, non-governmental organisations, and international organisations”.

Cavalli cites the PACT global partnership that brings together governmental and non-governmental entities involved in cancer control, as a good example. “There are different types of partnership. I think that the private sector is to be understood mainly in the sense that NGOs and private organisations should be also very much involved. As regards the private sector in the narrower sense, meaning private hospitals and structures, this is so different from country to country, it is in my opinion very difficult to have a general statement. If you set up a cancer control plan you have to include NGOs and the private sector, but the responsibility of course lies with the government. That is quite clear.”

The Declaration has been translated into several languages and is now being distributed worldwide amongst UICC members. The UICC is preparing an action plan based on the Declaration, and is talking to WHO about monitoring progress. “We want to monitor

where we will be in 2008 so we can judge progress,” says Cavalli. “We will see whether there will be 10 or 15 countries more with a cancer control plan than in the past.”

The full text of the World Cancer Declaration can be downloaded at <http://www.uicc.org/>

WORLD CANCER DECLARATION – SUMMARY

The World Cancer Declaration predicts that by 2020 there will be 16 million new cancer cases and 10 million cancer deaths each year, with 70% of the deaths in developing countries. It says that cancer can be eliminated as a major threat, but only if cancer control is made a priority for the decade.

PRIORITIES:

- **Investing in health:** with compelling messages to win the argument for countries to invest in cancer prevention and control
- **Cancer control planning:** increasing the number of countries that have national cancer control plans with budgets
- **Cancer surveillance:** increasing the number of countries with adequately funded cancer surveillance systems
- **Tobacco control:** increasing the number of countries implementing successful initiatives connected with the WHO Framework Convention on Tobacco Control
- **Vaccines:** developing an international plan for HPV vaccination in low- and middle-income countries, and integrating Hepatitis B into infant vaccination programmes
- **Early detection/treatment:** adopting evidence-based guidelines for early detection and treatment tailored to socioeconomic, cultural and resource settings
- **Palliative care:** increasing the number of countries that make pain relief and palliative care an essential service in cancer treatment and home-based care
- **Mobilising individuals:** empowering those affected by cancer to participate in cancer control efforts
- **Supporting steps:** implementing a process to monitor actions, report on progress and identify organisational roles