International Childhood Cancer Day

My Child Matters is helping reduce healthcare inequalities

- Six years of campaigning to improve childhood cancer survival in low- and middle-income countries
- 40 projects supported between 2005 and 2011 in 26 countries
- 23 of these projects ongoing across 18 countries in Africa, Latin America and Asia

Paris, France and Geneva, Switzerland - February 15, 2011 - Today, on International Childhood Cancer Day, the Union for International Cancer Control (UICC) and Sanofi Espoir Foundation announced that 23 ongoing projects from 18 low- and middle-income countries have been awarded renewed support of up to € 50,000 each to improving cancer care for children through the My Child Matters initiative. On this occasion, both partners have jointly published a successful review of the six-year programme.

Each year, more than 160,000 children are diagnosed with cancer, and about 90,000 die from the disease. With prompt and effective treatment, most childhood cancers can be cured – but global statistics expose a shocking disparity - in developed countries, around 80% of children with cancer survive, but in low resource settings this figure falls to 20% or even 10% in the world's poorest countries, where it is difficult to gain access to information, early diagnosis, care and treatment.

"After six years of unwavering commitment, the first very significant results show that it is possible to join forces and build new forms of partnership to improve the management of childhood cancer at all stages in a country's development," says Caty Forget, Managing Director of the Sanofi Espoir Foundation. “We shall continue with our efforts to provide more sustainable support for the local actors who are doing such a great job, and help them share their practices with other countries facing similar challenges.”

My Child Matters has already provided support to 43 hospitals and NGOs in 26 countries to reduce inequalities between developed and resource-constrained countries through grass-roots projects in these six years. Today, 23 projects across 18 countries continue to benefit from this initiative to improve every link in the health chain: better information, education and prevention, improved training for qualified personnel, helping to ensure earlier diagnoses, fostering better access to care and better pain management, developing palliative care and encouraging better understanding of the social aspects of this disease both for children and their families.

Dr. Julie Torode, Deputy CEO of UICC said : “The United Nations High-Level Meeting on the Prevention and Control of Non-Communicable Diseases in September 2011, provides UICC and other civil society partners with the opportunity to lay down the challenge to governments to capitalise on public-private initiatives such as My Child Matters, and work with these centres of excellence to integrate and expand on these and other cancer success stories as part of their national cancer plans”.

The My Child Matters initiative was launched in 2005 when the Sanofi Espoir Foundation proposed to create an innovative partnership with UICC. It has now grown into one of the largest childhood cancer initiatives in terms of the number of low- and middle-income countries involved. The programme enables local partners, hospitals and NGOs to benefit from financial support (€20,000 to €50,000 per project per year, following an annual evaluation of each project by the Steering Committee†), advice from international paediatric oncology and public health experts, and the South/South pooling of project experiences. The Sanofi Espoir Foundation has contributed a total of €3,700,000 towards the initiative since 2005.
Annual reviews with all local partners help to measure the programme’s impact on the community - the children, their families and health workers - and assess its leverage on the health policies of the countries concerned.

Extremely promising results have been obtained on three continents:

**Latin America:**
In Honduras, in an effort to reduce the number of patients dropping out of treatment, the support provided has made it possible to position satellite clinics much closer to patients. This reduces both time spent travelling to the care centre, and work absenteeism among parents. Following the opening of six satellite clinics, dropout rates fell from 40% to 10% between 2005 and 2010.  
In Paraguay, where they face the same problem, a national network of professional support for childhood cancer has been formed (and declared of national interest) and a number of satellite clinics have been opened. Patient treatment dropouts have decreased from 20% to 0% in two years. The programme has expanded to include training projects by twinning with Spain and the United States, and a South/South pooling of expertise with Argentina and Bolivia.

**Africa:**
Kenya improved its management of Burkitt's lymphoma (which accounts for 40% of childhood cancers in this country) by keeping records, improving public information and the training of health professionals. These developments have helped break the vicious cycle of stigma among communities, families, and carers, and encouraged more early diagnosis of curable cancer.  
In Morocco, an interdisciplinary approach has been set up to fight pain in children, a still largely uncharted area. This integrated approach is based on awareness raising among children and parents, training for caregivers and appropriate treatment. Today, pain management has made significant progress and ‘anti-pain committees’ have been trained in several hospitals. This innovative experience has helped humanize care and will be shared with other countries.  
In Senegal, the rehabilitation of the paediatric oncology unit, the prevention of nosocomial infections, the treatment of febrile neutropenia and pain, the introduction of appropriate protocols and better training of health professionals have all led to greater government and civil society commitment to the project. This has led to an overall improvement in the survival rate for cancer, with the survival rate for kidney cancer (the most frequent children’s cancer in the unit) rising from 46.7% in 2005 to 71% in 2010.

**Asia:**
In the Philippines, the support provided has helped improve early diagnosis of acute leukaemia and retinoblastoma by boosting the training of primary care physicians and paediatricians. In 2010, the first and only centre for the diagnosis and treatment of childhood cancer was opened, and is now deemed a reference centre by the health authorities. In 2011, the first computerised database of childhood cancer will be compiled with the support of My Child Matters.  
In Thailand, advances have resulted in the recognition of the importance of palliative care and psychosocial support. The country will host a World Congress on palliative care for the first time in 2011.

**About UICC**
Founded in 1933, the Union for International Cancer Control (UICC) is the largest cancer-fighting organisation of its kind, with more than 400 member organisations across 120 countries. Headquartered in Geneva, Switzerland, it is the leading non-governmental, non-profit, non-political and non-sectarian cancer organisation. UICC’s mission is to eliminate cancer as a life-threatening disease for future generations. For more information please visit www.uicc.org.

**About the Sanofi Espoir Foundation**
The Sanofi Espoir Corporate Foundation was created in October 2010 by sanofi-aventis Group to capitalize on over 15 years of commitment to international solidarity. It is tasked with helping reduce inequalities in healthcare, especially among the most needy, in a socially responsible way. For more information please visit www.fondation-sanofi-espoir.com.
About the *My Child Matters* initiative: see appendix

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Appendix: About *My Child Matters*

**About childhood cancer**

Cancer is the leading cause of death worldwide. The WHO estimates that cancer will cause 84 million deaths between 2005 and 2015 if no action is taken. Although childhood cancer forms a small proportion of cancer in general, there is a very large difference in survival rates between rich countries and developing countries where 80% of children with cancer are found.

**History and purpose of the initiative**

*My Child Matters* is part of a social responsibility agenda to help boost local expertise and support the development of initiatives driven by local partners, hospital staff and NGOs.

After reading a WHO report in 2004 giving estimates on the development of cancer in developing countries up until 2020, the Sanofi Espoir Foundation team proposed a new initiative to fight cancer in children in developing countries built around a partnership with the Union for International Cancer Control (UICC). A brand new joint initiative - *My Child Matters* - was then launched to fight cancer in children in countries where paediatric oncology is still an emerging specialty.

*My Child Matters* is based on the concept that improvements to healthcare infrastructure, the training of qualified personnel, better public information and the involvement of local governments in more active public health policies are key drivers of improving childhood cancer survival in developing countries.

The programme’s main objectives are to:
- generate actions on the ground that are as sustainable as possible, directly benefiting the country, including children and their families, and health professional partners
- raise greater awareness in civil society and among policy makers to help reduce the access-to-healthcare gap between developed countries and developing countries where paediatric oncology is still emerging.

It also creates the opportunity to build momentum by bringing countries together around the same initiative against childhood cancer so that experiences and ideas can be actively shared.

**My Child Matters Current Projects**

**Africa:**
- **Burkina Faso**: strengthening the treatment of childhood cancer in the University Hospital of Yalgado Ouedraogo and the Charles de Gaulle University Hospital. University Hospitals, Ouagadougou.
- **Cameroon**: extending, upgrading and training health workers in the paediatric hemato-oncology unit in the Mother and Child Centre of the Fondation Chantal Biya, Yaounde.
- **Côte d'Ivoire**: rehabilitating the paediatric oncology unit at the University Hospital of Treichville. University Hospital of Treichville, Abidjan.
- **Kenya**: information campaign on the prevalence of Burkitt's lymphoma so as to improve early diagnosis, therapeutic care and the rapid detection of environmental factors and family members. Medical Research Institute of Kenya, Nairobi.
- **Mali**: improving medical care and psychosocial support for children with cancer. Gabriel Toure Hospital, Bamako.
- **Senegal**: building a continuing care unit in pediatric oncology. Hôpital le Dantec, Dakar.
- **Tanzania**: improving access to treatment for children with Burkitt's lymphoma. Ocean Road Cancer Institute, Dar es Salaam.
In Latin America:
- **Bolivia**: free diagnosis of childhood leukaemia. Medical School, Universidad Mayor de San Andres, La Paz.
- **Colombia**: introducing a childhood cancer monitoring system. Cali Cancer Registry, University of Valle, Cali.
- **Ecuador**: new cancer registry of children in Quito, Cuenca, Manibi and Loja. SOLCERA (Society for Fighting Cancer), Nucleo de Quito, Quito.
- **Honduras**: fighting cancer treatment dropouts among children by introducing multi-regional outreach clinics. Escuela Hospital, Tegucigalpa.
- **Panama**: education and treatment program in pediatric cancer among ethnic groups. Children's Hospital of Panama, Calidonia.
- **Paraguay**:
  - Establishing a child cancer care network to improve early diagnosis, and access to care and treatment for children with cancer. Pediatric Oncology Unit, Mother and Child center at the School of Medicine, National University, Ascension.
  - "A Bridge for Life" to improve the hospitalization and education of children with cancer and the training of medical personnel. Ninos de Acosta Nu General Pediatric Hospital, Ascension.

In Asia:
- **Bangladesh**: a reception and palliative care center for poor children. ASHIC Foundation, Dhaka.
- **Pakistan**:
  - Creating a palliative care unit in a department of oncology. Department of Oncology and Paediatrics, Children's Hospital and Institute of Paediatric Health, Lahore.
- **Philippines**: improving access to treatment and care for children with retinoblastoma and leukaemia. Paediatric Medical Centre of the Philippines, Quezon.
- **Thailand**:
  - Establishing a national care network to improve the treatment of brain tumours in children. Thai Paediatricians Group, Bangkok.
  - Improving the quality of life and palliative care for children with cancer. 'Wishing Well' Foundation, Bangkok.
  - Improving the overall care of children with cancer. Faculty of Medicine, University of Prince Songka, Hat Yai.

**Members of the My Child Matters Steering Committee:**

The President, Professor Raul Riberiro (Director of the Leukemia and Lymphoma Division, St Jude Children's Research Hospital, USA), and other members: Dr. Andrea Biondi (Clinica Pediatrica Ospedale S. Gerardo, Italy), Dr. Franco Cavalli (Director, Istituto Oncologico della Svizzera Italiana), Mr. Kenneth Dollman (International Confederation of Childhood Cancer Parent Organizations-I CCCPO), Dr. Bharat Agarwah (SIOP International Pediatric Oncology Society, The Netherlands), Dr. Joe Harford (Director of International Relations, National Cancer Institute, USA), Ms. Ruth Hoffman (Director, Childhood Cancer Foundation, USA), Mr. Kenneth Dollman (International Confederation of Childhood Cancer Parent Organizations-I CCCPO), Dr. Bharat Agarwah (SIOP International Pediatric Oncology Society, The Netherlands), Dr. Joe Harford (Director of International Relations, National Cancer Institute, USA), Ms. Ruth Hoffman (Director, Childhood Cancer Foundation, USA), Dr. Tezer Kutluk (Turkish Association for Cancer Research Control, Turkey), Dr. Mhamed Harif (Chairman, , Groupe Franco-Africain d'Oncologie Pédiatrique, France), Dr. Ian Magrath (President, International Network for Cancer Treatment and Research, Belgium), Dr. Twalib Ngoma (Director, Ocean Road Cancer Institute, Tanzania) Dr. Eva Stelianova-Foucher (Research Director, Centre International de Recherche sur le Cancer, France).

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