Leading the global fight against cancer
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In September at the United Nations General Assembly, I was delighted to see that all countries agreed to include cancer and the other non-communicable diseases (NCDs) in the Sustainable Development Goals (SDGs). This means that for the first time, cancer and the other NCDs have been recognised as significant global challenges which demand the attention of all countries, and in particular in low- and middle-income countries, where we anticipate the majority of cancer cases to occur in the next fifteen years.

The UICC Board takes its purpose statement very seriously and placing cancer in the SDGs shows that through working with colleagues across the NCD Alliance and our membership base in over 150 countries, we can collectively leverage global policies which change the way in which cancer is addressed in all countries. The challenge we will face in the coming years is converting those commitments into action at a national level.

However, I am confident that we are in a good position to see this happen. UICC has grown from 340 members to nearly 1,000 members in only six years. And that membership base is more interactive and cohesive than at any other time in the past. We therefore have the ability to mobilise action in all countries, pressing home recent global wins into real and funded plans which governments will implement and report progress on.

Our reach and impact is greater than it has ever been and I am hopeful that we can capitalise quickly on the momentum achieved at the various UN meetings in which cancer has been positioned as a global issue requiring immediate and sustained action to resolve.

Welcome to the UICC Annual Report for 2015. I have had the privilege to be the President of UICC during a year of significant progress on many fronts. Together with my Board, the Geneva team, our members and partners, we can look back at 2015 and be proud that cancer gained the recognition it deserves as a global health and development imperative.
There is much to be proud of in 2015, but let me highlight a few key achievements which I consider to be worthy of note:

1. UICC is a founding member of the NCD Alliance and for the last three years, through our CEO, Cary Adams, we have been the Chair of the Steering Group. During that time the Alliance has grown from four to seven organisations and the number of supporters has increased impressively. The Alliance is now financially sound and through the leadership of Katie Dain, a new five-year strategic plan has been agreed, improvements in governance implemented and a new Memorandum of Understanding has been signed which commits all parties to a further three years working together. I am proud that we have handed over the Chair of the Steering Group role to Jose Castro from the International Union Against Tuberculosis and Lung Disease (The Union) at a time of growth and increased impact. UICC will continue to be a great supporter of the NCD Alliance.

2. For the first time in many years, the Essential Medicines List (EML) at the World Health Organization (WHO) was revised to include a further 16 cancer drugs on top of the existing 30. By any measure, this was a significant result and I am proud of the way in which UICC, its members and partners worked diligently over the past few years to assist the World Health Organization (WHO) in reviewing the list. The challenge now is to ensure that all countries take this lead and increase the drugs available to treat cancer patients in their own populations.

3. In November, the World Cancer Leaders’ Summit took place in my home country, Turkey. 250 of the world’s leaders in health met to discuss how we can work together as collaborators and in partnership to impact cancer control globally, regionally and nationally. We were fortunate to have many impressive speakers and I was honoured to welcome the Turkish Minister of health to that event. The Summit is an impressive opportunity for our leaders to meet and agree ways in which we can address cancer in a coordinated fashion around the world.

At the end of 2015, we conducted a membership research project to understand how well UICC is doing in comparison to previous years. The results were reviewed by the UICC Board of Directors in November and we were delighted to see that our members are positive about the organisation and willing to contribute more to the agenda we have set out for the next few years for the organisation. It was particularly exciting to learn that 90% of our current members would recommend the UICC membership to other cancer organisations, up from 67% in 2013 when we last conducted the membership survey.

I am proud to be the President of an organisation which has such positive responses from its members.

We are now entering a new planning cycle for UICC. It covers the period 2016-2018. We will continue to organise ourselves around three key themes – convening, capacity building and advocacy – but we will give greater focus to our ability to help UICC members do better tomorrow than they can do today.

Our new Capacity Building team will reach out to members to support their training and education needs, their resourcing, skills and capabilities and deliver a suite of online services which help them run their organisations more effectively and efficiently. We are very hopeful that this will be received positively by all members, and in particularly those in low- and middle-income countries where the need is greatest.

Let me conclude this message by thanking the Board of Directors for their commitment throughout 2015. Every member of the Board takes on a leadership role in UICC and is an active participant in the governance of a growing organisation. I would like to thank Mary Gospodarowicz, the Immediate-past President, and Sanchia Aranda, our President Elect who have helped me lead this great organisation. Of course, the work of UICC is undertaken by our CEO, Cary Adams and the wonderful team in Geneva who drive forward our mission with such professionalism, energy and commitment. Although the Geneva team is small, it certainly produces a lot of output and always of the highest quality. On that note, the Board was proud to see Cary Adams awarded ‘CEO of the Year’ at the Annual Associations World Congress in May – appropriate recognition for his achievements during the last six years at UICC.

I conclude by wishing you all well in 2016. I hope that many of you will be at the 2016 World Cancer Congress which will open on 31 October in Paris, a city which will always be special and gracious to those who visit.

Tezer Kutluk, President
Union for International Cancer Control (UICC)
It is with considerable pride that I write my seventh UICC Annual Report message. Each year I start by recognising the growth in the membership base, the increasing number of partners we work with, the significant achievements of the year and of course, I recognise the Board and staff who work so diligently to deliver a suite of initiatives which collectively impact cancer around the world. This year however, I am going to extend my commentary to include the progress we have made over the last six years, to properly reflect on that progress and set out the high-level agenda which we will pursue in the coming years.

Since 2009, UICC has grown in several important and interlinked dimensions. Probably most importantly, we have increased our membership base from 340 to nearly 1,000. Not only have our membership figures increased, but the percentage of members who we would consider active in supporting or working with UICC has increased dramatically to more than 40%. This means we have been able to keep the UICC Geneva Team to less than 30 while delivering a larger volume of work at a higher quality due to the active participation of volunteers from across UICC’s membership base. We have been privileged to work with and be inspired by the best in the global cancer community.

Critical to our success has been the growth in the number of partners who have supported UICC’s plans with funding and other resources. We have increased our partner base from 9 to 52 - comprising a mix of cancer organisations, foundations and private sector companies. They have fuelled an accelerated programme of work, given us the means to deliver output of the highest quality and they have been great ambassadors for our advocacy messages and participants in our major events.
MESSAGE FROM THE CEO

World Cancer Day is now one of the largest health days of the year and we believe that it will grow organically from now on, given so many organisations have marked 4 February in their diaries and are integrating it into their own plans. The World Cancer Congress has grown from 1,700 delegates in Shenzhen in 2010 to more than 2,700 in Melbourne in 2014 and we anticipate at least 3,500 delegates will join us in Paris this coming October. Because we have listened intently to the views, ideas and perspectives of our members, we have been able to design and deliver a Day and a Congress which meet the requirements of our growing membership base.

From an advocacy perspective, 2015 marked the culmination of six years of work with our NCD Alliance colleagues and UICC members who have shared an ambition to place cancer and the other non-communicable diseases (NCDs) on the global health and development agenda.

I vividly remember meeting Ann Keeling, the then CEO of the International Diabetes Federation (IDF), who articulated an ambitious plan to secure a high-level UN Meeting on NCDs and to ensure that NCDs were included in the replacement Millennium Development Goals in 2015. The NCD Alliance at that time comprised only UICC, IDF and the World Heart Federation. It had no staff and only a sketchy plan on how this ambition could be delivered. Six years later and we can be proud to have played such a pivotal role in securing the UN High-level Meeting on NCDs in 2011 and the progress since, with NCDs included in the Sustainable Development Goals 2016-2030. Quite rightly, Tezer Kutluk highlights this achievement as a game-changing one for cancer around the world. Without doubt, the last six years have been wonderfully successful for our community. The challenge we face now is to capitalise on those global commitments at a national level, and this is where UICC members will play a critical role in the next few years.

Underpinning our progress since 2009 has been attention to organisational efficiency. We have addressed our governance model, improved our programme management processes, become more effective in conflict of interest management, developed a partnership philosophy which engages our partner base in our long-term plans and we have delivered financial stability to the organisation. In 2015, we ran the organisation to a tight budget, and as I write this, we have closed the financial year with a small surplus which will be invested in our next business plan. We are also privileged to have developed a group of wonderfully talented and committed staff over the last few years. The management team has worked together for five years now and collaborates effectively with the Board of Directors to ensure that our aspirations turn into action and delivery. We are committed to work as diligently as possible to provide UICC members with as much value as possible and constantly look at how we can amplify our impact with the resources that we have at hand.

In the last few years, we have been honoured to have had strong Boards of Directors, ably led by a series of outstanding individuals as Presidents - David Hill, Eduardo Cazap, Mary Gospodarowicz, Tezer Kutluk and from the end of 2016, Sanchia Aranda - who have all provided the energy and vision to lead UICC through its recent stages of growth. They have carefully set out a long-term agenda and worked with the Board and the team in Geneva to guide it through rapid change. We are proud to have worked with such inspirational people.

So what next? Well, the next three years’ plans have been written and the Board has signed them off. We will invest more of our time building our ability to help UICC members do, as Tezer describes it, “a better job tomorrow than they do today”, and this will manifest itself in different ways. On top of the fellowship and workshop programmes we have run successfully for many years, we will invest in leadership and partnership training, running more master courses, securing funds for our members and enhancing our ability to share toolkits, guidelines and training materials.

Our advocacy agenda will be a combination of follow-through on previous wins and a new agenda highlighting the treatment imperative in low- and middle-income countries with a focus on city readiness. And, of course, we will continue to invest in growing World Cancer Day, the Congress and the Summit – the design and delivery of which will be done with and through our membership.

May I thank the UICC team in Geneva, our members, partners and others who have worked with us in 2015. I think we all found opportunity to contribute and delight in the work we have undertaken on behalf of our members.

As satisfying as the year was, we know that we have much to do. The cancer burden globally is not reducing. The number of preventable deaths continues to rise. The inequity is getting wider. UICC and its members and partners have a lot to do, but I am confident that we can work more effectively in partnership in the coming years to achieve the impact we want to have.

Cary Adams, Chief Executive Officer
Union for International Cancer Control (UICC)
UICC 2009-2015
Delivering a challenging and impactful global agenda

9 Partners

52 Partners

350 Members

767 Members

830 Members

1800 Delegates

2000 Delegates

2700 Delegates

Corporate Partner Contributions USD 2.5m

Partner Contributions USD 200k

3.8bn Media Opportunities

4.7bn Media Opportunities

8.7bn Media Opportunities

10.7bn Media Opportunities

5700 Delegates

Purpose Statement

Roadmap Phase I

Roadmap Phase II

Roadmap Phase III

Roadmap Phase III

Roadmap Phase II

Roadmap Phase I

UICC Strategy

2009

2010

2011

2012

2013

2014

2015

2016

Nov 2009

May 2011

Feb 2013

Sep 2013

May 2014

May 2015
Advocacy milestones

2009

NCD Alliance formed (International Diabetes Federation, World Heart Federation, UICC) (May)
Campaign launched for UN High-level Meeting on NCDs (Mid-2010)

2010

NCD Alliance welcomes The International Union Against Tuberculosis and Lung Disease (The Union) as 4th Partner (May)
First global Ministerial Conference on healthy lifestyles and NCDs control, Moscow, Russia (Apr)
Civil Society Interactive Hearing on NCDs (Jun)
UN High-level Meeting on NCDs and Adoption of UN Political Declaration on NCDs (Sep)
Global Roundtable Series (GRS), ‘Pause for Thought: A review of the UN Summit and supporting govs. to live up to their commitments,’ New York, United States (Sep)
‘CAN25by25’ Advocacy Network launched (Oct)
2011 World Cancer Leaders’ Summit, ‘From Resolution to Action’, Dublin, Ireland (Nov)

2011

WHO Global Monitoring Framework (GMF) on NCDs agreed (Nov)

2012

Global Roundtable Series (GRS), ‘Personalised cancer medicine’, Alexandria, United States (Jan)
Global Roundtable Series (GRS), ‘Understanding and curing prostate cancer: Important issues, patient knowledge, and support for prostate cancer research’, Houston, United States (Apr)
66th World Health Assembly – WHO Global Action Plan (GAP) on NCDs 2013-2020 adopted (May)
Global Roundtable Series (GRS), ‘A unique opportunity to transform our knowledge of cancer’, Geneva, Switzerland (Jun)
UN ECOSOC Meeting – Establishment of the UN Interagency Taskforce on NCDs (Jul)
UN General Assembly MDG Review Summit (Sep)
2013 World Cancer Leaders’ Summit, ‘Closing the Cancer Divide by 2025’, Cape Town, South Africa (Nov)

2013

Global Roundtable Series (GRS), ‘Developing solutions to the cancer information dilemma’, Geneva, Switzerland (Apr)
Global Roundtable Series (GRS), ‘Global targets, indicators and expectations for the 2012 World Health Assembly’, Geneva, Switzerland (Apr)
65th World Health Assembly – Adoption of global target to reduce premature mortality from NCDs by 25% by 2025 (May)

2014

Global Roundtable Series (GRS), ‘Australia and New Zealand’s role in the cancer and NCD Development agenda in the (Asia-Pacific) Region’, Melbourne, Australia (Feb)
NCD Alliance expands to 7 partners and welcomes Alzheimers Disease International (ADI), Management Sciences for Health (MSH) and Framework Convention Alliance (Mid-2014)

2015

Global Roundtable Series (GRS), ‘Access to essential cancer medicines’, Geneva, Switzerland (Sep)
2015 World Cancer Leaders’ Summit, ‘Effective International Collaboration’, Istanbul, Turkey (Nov)

UICC became a formally recognised NGO partner of UNODC (Mid-2014)
67th World Health Assembly – Adoption of palliative care resolution & Terms of Reference for the Global Coordination Mechanism (GCM) on NCDs (May)
UN Informal Interactive Civil Society Hearing on progress achieved in the prevention and control of NCDs (Jun)
UN High-level Review and Assessment of progress achieved in the prevention and control of NCDs and adoption of Outcomes Document (Jul)
New edition of the WHO Model List of Essential Medicines (EML) published, following UICC-led review process of cancer medicines (May)
68th World Health Assembly – Adoption of resolution recognising surgery and anaesthesia as essential components of universal health coverage (UHC) (May)
WHO lays out plans for financing new global health goal: to ensure healthy lives and promote well-being for all at all ages (Jul)
UN General Assembly adopts Agenda 2030, officially recognises NCDs as a development issue for the first time (Target 3.4) (Sep)
Global Roundtable Series (GRS), ‘A unique opportunity to transform our knowledge of cancer’, Geneva, Switzerland (Jun)
UN ECOSOC Meeting – Establishment of the UN Interagency Taskforce on NCDs (Jul)
UN General Assembly MDG Review Summit (Sep)
2013 World Cancer Leaders’ Summit, ‘Closing the Cancer Divide by 2025’, Cape Town, South Africa (Nov)

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In 2015 UICC saw an 11.5% increase in membership, closing off the year with 906 members in 154 countries and continuing to actively work to have a member in every country. We are also grateful to members who have contributed in growing our cancer control network by sponsoring other members and giving an opportunity for other organisations to engage in our global activities.
With an ever-growing membership base of this size, it is important we continually remind ourselves that while we may have goals of expansion, our ambition is still firmly rooted in the outcomes that can be achieved through our network. In the end, quality of engagement outweighs quantity.

To increase our knowledge and engage with our members, in the autumn of 2015 UICC conducted a membership survey to measure our progress since the last survey in 2013. Our goals were to better understand the needs and expectations of our members so that we could improve our services. The responses provide us with a base for targeted actions in the future and we thank all who participated, and those who helped encourage participation.

There were many important takeaways from this survey which will help steer our interactions with members and evaluate our current focus areas. We were particularly pleased that 90% of our respondents said they would recommend UICC membership to another organisation. Additionally, 78% also reported being satisfied or very satisfied with their UICC membership. Both have increased since 2013.

We hope to continue engaging with our members in an effective manner and to unite the work of the global cancer community.

The survey also identified several key issues that our members voiced as areas where they would like to see UICC do more. Based on that feedback, we will be taking steps to provide additional one-to-one communication from UICC representatives, as well as raise awareness on our offered resources and benefits.

The results of this survey show us that we have made major improvements over the past two years, but there is still work to be done. We will continue to strive for improvement, and we will be sharing this progress with members over the coming year.

How far we’ve come

Our membership base features the world’s major cancer societies, research institutes, treatment and comprehensive centres, universities, hospitals, scientific and professional associations, ministries of health, public health agencies, and patient support groups.

90% of UICC members would recommend UICC membership to another organisation

2013 67%

78% of UICC members are satisfied or very satisfied with their UICC membership

2013 51%
From our members
Comments shared in the members’ survey:

“I view UICC as THE important main player in international cancer collaboration.”

“UICC and the World Cancer Congress participation have presented the opportunity to network with our peers from all over the world. Furthermore, World Cancer Day organised by UICC has provided a springboard for promoting cancer prevention in our country.”

“We consider UICC support as a key tool for our organisation.”

“UICC is a true crusader for cancer control at a global level. The working attitude of the organisation is always very positive and helpful, and UICC can be relied upon to produce and share new literature, resources, and initiatives from and with its members. Overall, it is a pleasure to be associated with UICC. All the best and please keep it up, as still there is a long way to go in the fight against cancer.”
PARTNERSHIPS

Hand in hand to drive change on a global scale

In the last few years, UICC has deliberately and effectively built a group of active partners with whom we work to strategically achieve the World Cancer Declaration* targets. We believe that cancer cannot be addressed by one community alone – it demands engagement from civil society, governments, the private sector and the general public. We all have a role to play alone and collaboratively.

There is clear value in these relationships by providing topic-related expertise, access to resources and/or financial support, and by association with their known, credible reputations within their industry, networks and the general public. The importance of networks cannot be overstated; partners give UICC access to communities we would otherwise struggle to reach, thereby expanding our scope and impact.

Our current fundraising campaign ‘Together for Action’ has successfully engaged 52 partners from across our membership and the private sector in the last 6 years. In 2015, we have seen a significant increase in their engagement across UICC’s convening activities and the relationship with our members, resulting in more complex and mutually beneficial partnerships. We thank all our partners for their commitment, energy and support.

Within this report we take the opportunity to feature some partners and the work they undertake globally.

World Cancer Research Fund International, a member since 2005 and a UICC partner since 2011, has been active in supporting World Cancer Day and our advocacy priorities. Experts in cancer risk factors and nutrition, WCRF International has provided invaluable insight in this area as UICC advocates at the global level.

Roche, a leading pharmaceutical company, has been a longstanding partner of UICC, working with us on different streams of work in advocacy, convening and capacity building with a focus on women’s cancers. At our World Cancer Leaders’ Summit in Istanbul, Roche delivered an inspirational speech on the need for increased shared value in multi-sector partnerships to deliver long-lasting impact in healthcare. They also convened a session on the pivotal role of women in driving positive change in oncology. Roche is also a dedicated supporter of World Cancer Day.

Astellas, a leading pharmaceutical company, has been a UICC partner since 2011. Their mission is to contribute towards improving the health of the world, and their support enables UICC to fight for more prevention, early detection, access to treatment and palliative care for cancer patients globally.

Merck & Co. / MSD (Merck), a leading pharmaceutical company, has been a partner of UICC for years but in 2015 increased their long-term engagement across UICC priorities. Merck sees the value of collaboration that together we can accomplish more in global cancer control; simultaneously through Merck’s reputation and networks UICC has gained access to new communities.

To manage the growing portfolio of partners and to ensure that UICC operates effectively in the context of conflict of interest, the UICC Board of Directors has approved a refreshed due diligence process to guarantee partnerships are built on mutual respect, cooperation, dedication, communication, transparency and productivity. The process bears in mind the need to protect UICC and potential partners from various forms of risks such as conflict of interest, reputational, financial and compliance.

We are content that the UICC governance model and the due diligence we undertake ensures that UICC works positively and effectively with all its partners – United Nations agencies, NGOs, foundations, government bodies and the private sector. We pride ourselves on what we achieve together.

*Please visit www.uicc.org/world-cancer-declaration for more information about the Declaration.
MAXIMISING OUR IMPACT THROUGH STRATEGIC PARTNERSHIPS

UICC enjoys strategic partnerships with some of the most influential international organisations that help drive action in our priority areas of convening, advocacy and capacity building.

We wholeheartedly believe that strong strategic partnerships are central to achieving the World Cancer Declaration vision, and as such have successfully partnered with UN agencies to establish the World Cancer Leaders’ Summit as a key advocacy platform. Progress over the last five years has emphasised this through the development of strategic partnerships that now drive global initiatives in cancer control.

UICC continues to maintain key relationships such as Economic and Social Council (ECOSOC) status with the United Nations, official relations with the World Health Organization (WHO) and United Nations Office for Drugs and Crime (UNODC). As we move into the next phase of growth at UICC, alliances and networks will play a strong role in increasing our impact across the three priority areas of convening, capacity building and advocacy.

International Agency on Research in Cancer (IARC)

UICC’s strategic partnership with IARC has focused on the need to develop cancer surveillance networks as a fundamental tool for targeting effective investments in cancer. Building on the inclusion of cancer incidence as an indicator in the Global Action Plan for the Prevention and Control of NCDs (2013-2020), IARC, the American Cancer Society (ACS) and UICC launched an updated Cancer Atlas depicting these data. UICC members took the lead in launching translated versions of the Cancer Atlas in 2015, which is now available in seven languages.

IARC is also the lead agency for the Global Initiative on Cancer Registry Development (GICR). The GICR partnership provides guidance, resources, and technical assistance to countries wishing to establish and expand their population-based cancer registration capacity. UICC has supported this work through workshops with a number of the GICR locations, with a specific focus on those in Latin America and Sub-Saharan Africa, to help build active networks.

International Atomic Energy Agency (IAEA)

September 2015 saw the publication of the much anticipated Lancet Oncology commission on Expanding Global Access to Radiotherapy which was a joint project with the UICC-launched Global Task Force on Radiotherapy for Cancer Control (GTFRCC) which worked in close collaboration with IAEA.

The commission concluded that:

- Investment in radiotherapy not only saves lives but brings measureable economic benefits.
- 50-60% of all patients with cancer need radiotherapy, but equity in access around the world is poor.
- Across the spectrum of countries and investment scenarios modelled, the report found that non-treatment of cancer is more expensive than the effective and sustainable implementation of radiotherapy services.
- Conservative estimates demonstrated that scaling up radiotherapy would cost USD 184bn across all low- and middle-income countries and would save nearly 30 million life years, delivering a global net benefit of USD 278.1bn by 2035 and thereafter.

The commission concluded with a clear five-point call to action which urges organisations, including IAEA and UICC, to follow through on the commission’s recommendations and ensure that radiotherapy is viewed as a cost-justifiable investment for all countries intent on cancer control.

The report is available from Lancet Oncology at www.thelancet.com/journals/lanonc/article/PIIS1470-2045(15)00222-3/abstract
CONVENING

UICC convenes the global cancer community through three signature events aimed at driving action on a global scale. Each is aligned with our long-term strategic vision to hold the world to account, provide resources for impact and mobilise a movement.

World Cancer Congress

UICC and its host organisations, the French League against Cancer (La Ligue contre le Cancer) and the Alliance of African & Mediterranean French Speaking Leagues Against Cancer (ALIAM) have actively been preparing for the 2016 World Cancer Congress which will be held in Paris, France - from 31 October to 3 November 2016 at the Palais des congrès.

In recent years, best practice sharing in cancer control has been central to the Congress, with a focus on implementation science. This evolving strategy has strengthened the event’s standing amongst the global cancer community and positioned it as the leading international conference in cancer control.

The Congress programme will comprise five overarching tracks, including the exciting new addition of a capacity building track, reflecting UICC’s ambition to focus on this area for its members in coming years. 80 sessions have been designed for the programme, drawn from a record 278 sessions which were submitted from 70 countries.

For a wider appeal amongst the francophone community, simultaneous translation into French will be widely available at the Congress.

The Paris week will offer delegates interactive sessions, discussions with world-leading experts, debates, roundtables, training initiatives, networking events as well as the UICC General Assembly for UICC members. This dynamic format will foster a unique learning and sharing environment for the expected 3,500 delegates. At the end of 2015, we already had 1,000 delegates registered for what promises to be the best World Cancer Congress to date.

Follow the latest news such as the Preliminary Programme, planned activities and registration offers on worldcancercongress.org.

The French League against Cancer (La Ligue) is hosting the 2016 World Cancer Congress in Paris, which has propelled their engagement with UICC to new heights. UICC has long since counted La Ligue amongst one of its most influential members, notably because of its leadership in helping increasing our presence in francophone Africa. We look forward to our partnership continuing far beyond their role as hosts of the 2016 World Cancer Congress, which we are assured will be an outstanding event.

“On behalf of the Programme Committee, we very much appreciate that there is considerable thought and effort in preparing and submitting a session for the Congress. All the merged proposals have come back as even stronger sessions which we believe will be of greater benefit to the attending audience. This process is unique to the World Cancer Congress and so it is especially commendable that those involved have shown commitment to high quality outcomes and collaboration with colleagues in cancer and NCD control internationally. The process also invites greater cooperation and improves connections and to that end may be a worthwhile exercise in and of itself. But this only works due to the goodwill and dedication of the cancer control professionals worldwide who contribute to the work of UICC. With this in mind I am keen to express my gratitude and appreciation to those who have taken on this challenge in a constructive and cooperative manner.”

Terry Slevin, Director Education and Research, Cancer Council Western Australia; 2016 Programme Committee Member
World Cancer Day

On 4 February 2015, UICC marked World Cancer Day collaboratively with its many members, partners and supporters around the world, breaking previous records and culminating in nearly 11 billion opportunities to see, hear or read about World Cancer Day across all media.

The campaign focused on taking a positive and proactive approach to the fight against cancer using the tagline ‘Not beyond us’. It explored how we can implement what we already know in the areas of prevention, early detection, treatment and care, and in turn, open up to the exciting prospect that we can impact the global cancer burden – for the better.

Through the hundreds of activities and initiatives that took place around the globe, we were able to show that there is much that can be done at an individual, community and governmental level to harness and mobilise these solutions and catalyse positive change.

Since World Cancer Day was restructured in 2012 we have seen exponential growth in the campaign’s success. We have been particularly delighted by the active participation of UICC members, partners and stakeholders, whose feedback has steered us to continue to increase public-facing exposure and engagement.

The World Cancer Day campaign model is responding to this call by rolling out a two prong strategy, building on the momentum of our existing networks whilst strengthening the foundations for individual and public level engagement.

In late 2015, the new three-year campaign was launched. For the next three years, World Cancer Day will run under the tagline ‘We can. I can.’ and shows how everyone, collectively or as individuals, can do their part to reduce the global burden of cancer.

Partners

Amgen, Bristol-Myers Squibb, Dutch Cancer Society, Eli Lilly, Roche, World Cancer Research Fund International

Since Bristol-Myers Squibb (BMS), a leading global biopharma company, became a partner of UICC in 2012, they have been very supportive of our advocacy initiatives aiming to put cancer on the global health and development agenda. BMS has also been actively supporting and engaging in our convening platforms such as the World Cancer Congress and World Cancer Day to show their commitment to making a difference in the lives of patients living with cancer. This year, BMS has committed to becoming a Visionary Partner of our World Cancer Day 2016-2018 “We can. I can.” campaign.

“World Cancer Day provides a global platform where all cancer advocates around the world unite to adhere to one great cause. This year, Friends of Cancer Patients, along with other cancer advocacy entities joined UICC’s efforts to present a collage of diverse inspirational events worldwide and help spread hope and awareness.”

Ameera Abdul Rahim Binkaram, President, Friends of Cancer Patients, UAE
10.7 billion
Opportunities to see, hear or read about World Cancer Day
8.7 billion in 2014
4.7 billion in 2013
3.8 billion in 2012

Map of events
>715 Events
117 Active countries
674 events in 2014
547 events in 2013

Membership activity on World Cancer Day
71% Active
615 Members
Total members 866

Press mentions
6,607

Total social media impressions
934'745'914

Page views
375,120

Resource downloads
40,131

Unique visitors
159,578

worldcancerday.org

2015 figures

204,582 tweets
#WorldCancerDay

21,445 tweets
#NotBeyondUs

30,396 Likes

21,265 People active

1,945,070 Impressions

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World Cancer Leaders’ Summit

250 leaders and executives from cancer organisations, UN agencies, Ministries of Health, academia and the private sector positively responded to the call for ‘Effective International Collaboration’, prompted by the 2015 World Cancer Leaders’ Summit which took place in November in Istanbul, Turkey.

A UICC Partners’ Day also complemented this year’s Summit, opening up the dialogue on ways to improve collaboration through public–private partnerships with a series of interactive sessions run by UICC partners and members.

The Summit Day emphasised the importance of building meaningful partnerships as we enter a new era of international development. The participants were engaged in robust discussions covering the building blocks that should support collaborative action around cancer and NCDs.

Plenary speaker, Gary Cohen, Executive Vice President, Global Health & Development, Becton, Dickinson & Co., outlined the shared value model which leads companies to include community needs as part of their business objectives, with the aim to create substantive impact. Sania Nishtar, Founder and President, Heartfile, and former Federal Minister of Health for Pakistan, explained why the effective management of conflict of interest is the basis for implementing great collaboration and partnership.

Other speakers highlighted successful, concerted approaches to deliver national cancer control planning, childhood cancer integration in health and primary care services and effective national NCD alliances. Case studies on managing conflict of interest and on overcoming the challenges in data sharing and in working effectively were also covered.

The day ended with Michael Hübel from the EU Commission who highlighted the EU actions to tackle cancer and to support the Members States in reducing cancer incidence by 15% by 2020.

The Summit re-confirmed the essential components of effective partnerships – openness and clarity in the role of the partners; a shared vision and ambition; rules of engagement and transparency of roles; a shared plan and commitment to action and impact.

UICC also launched its Young Leaders Programme in conjunction with the 2015 World Cancer Leaders’ Summit, awarding eight individuals with the opportunity to attend the events in Istanbul, build networks and voice their generation’s viewpoints within high-level circles.

We thank our sponsors and our Summit host, the Turkish Association for Cancer Research and Control, for their ongoing support and commitment. A special thanks also goes to our guests: Her Highness Sheikha Jawaher Bint Mohammed Al Qasimi, Wife of the Ruler of Sharjah, UAE, Founder and Patron of Friends of Cancer Patients, UAE International Ambassador of the World Cancer Declaration for UICC and International Ambassador for Childhood Cancer for UICC; Her Royal Highness Princess Dina Mired of Jordan; the Honourable Dr Mehmet Müezzinoglu, Minister of Health, Turkey, and His Excellency Abdul Rahman Bin Mohammed Al Owais, Minister of Health, United Arab Emirates.

The 2016 Summit will take place on 31 October in Paris, in conjunction with the World Cancer Congress. The event will assess the progress made against the 2025 World Cancer Declaration goals and targets and will be entitled ‘Tomorrow is now: our journey to 2025’.

Partners

World Cancer Leaders’ Summit

The Republic of Turkey Promotion Fund, the Cancer Control Department within the Turkish Ministry of Health, the Turkish Association for Cancer Research and Control, the American Cancer Society, the Canadian Partnership Against Cancer, Cancer Research UK, the Irish Cancer Society, Macmillan Cancer Support, MD Anderson Cancer Center, the National Cancer Institute US, the Prevent Cancer Foundation, the Turkish Pediatric Oncology Group, the Turkish Society of Medical Oncology, the Turkish Society of Radiation Oncology and UNICANCER

Partners’ Day

Bupa, Merck Serono, Novartis Oncology, Roche

Merck Group, a leading pharmaceutical company, became a partner of UICC in 2015 and has been very active in leveraging the different engagement opportunities throughout the year. Merck Serono chose the UICC Partners’ Day at the World Cancer Leaders’ Summit in Istanbul to host a discussion highlighting how public–private partnerships spur innovation in oncology treatment and how partnerships can combat inequalities in access, availability and affordability of cancer treatment.
The Canadian Cancer Society has been a strong and highly valued UICC member since 1964 and partner since 2010. Under the leadership of Pamela Fralick, we are pleased to work together to harness the impact of the Canadian cancer community at a global level. They have actively championed for greater equity with UICC and provided travel grants for young leaders to attend UICC’s convening events, including the World Cancer Leaders’ Summit.
Promoting greater equity
RESOURCES AND NETWORKS

UICC plays a unique role in convening influential partners to drive action in priority areas through the sharing of best practice and key resources.

NCD Alliance

UICC is a founding member of the NCD Alliance and celebrated an incredibly successful year with the team. 2015 saw the first Global NCD Alliance Forum, hosted in Sharjah, alongside the culmination of a six-year campaign to see NCDs included in the Sustainable Development Goals which were agreed at the United Nations in September and will apply from 2016-2030.

UICC continues to see the integration of NCDs as a priority in global, regional and national health and development planning and implementation. We will take a full role in working with NCD Alliance partners to press for adequate and sustainable financial and human resources for NCDs globally. This will involve working with UICC members to improve the capacity and sustainability of national and regional civil society alliances and networks in low- and middle-income countries to effectively influence cancer and other NCD prevention and control.

For more about the work of the NCD Alliance during 2015, please go to page 32 and visit www.ncdalliance.org.

International Cancer Control Partnership (ICCP)

Since 2012, the International Cancer Control Partnership (ICCP) has brought together over twenty organisations to coordinate activities and resources to enhance global cancer control. ICCP’s core initiatives include the Cancer Control Leadership Fora and the ICCP Portal, which has compiled over 200 published national NCD and cancer control plans to help facilitate global knowledge sharing across the cancer and NCD communities. Other resources available within the portal include the breast cancer knowledge summaries, WHO country cancer profiles and the 2nd edition of the Cancer Atlas in its different translations, all of which can be accessed at www.iccp-portal.org.

The Friends of Cancer Patients, based in Sharjah is a prominent UICC partner and a leading member in the United Arab Emirates as well as in the international arena. Her Highness Sheikha Jawaher Bint Mohammed Al Qasimi, Wife of the Ruler of Sharjah, Founder and Royal Patron of the Friends of Cancer Patients charity, is the prestigious International Ambassador of the World Cancer Declaration for UICC, the International Ambassador for Childhood Cancer for UICC, and a supporter of the NCD Alliance. Her Highness and the Friends of Cancer Patients hosted the first ever Global NCD Alliance Forum in November 2015 in their home Emirate of Sharjah, and Her Highness has generously extended an invitation for this important Forum to once again be held there in 2017.

The National Cancer Institute USA (NCI) has been an invaluable UICC partner and member for years, with special interest in our training and education programmes through fellowships. NCI’s Center for Global Health is invested in increasing capacity within low- and middle-income countries to improve national cancer control, and uses the World Cancer Leaders’ Summit to further engage international networks in their work.
McCabe Centre for Law and Cancer

2015 was another very successful year for the McCabe Centre for Law and Cancer. It continued to scale up its international legal training and capacity building programmes, broaden its regional networks, and expand the scope of its work on international and domestic legal issues across the spectrum of cancer prevention, treatment and care.

Together with its partners, the Centre ran a number of major training and capacity-building events – in Melbourne, Australia (with the WHO and the Secretariat to the WHO Framework Convention on Tobacco Control (WHO FCTC)); in Nairobi, Kenya (with the WHO Regional Office for Africa); in Oslo, Norway (with the Norwegian Ministry of Health and Care Services and the Norwegian Cancer Society); and in Batam, Indonesia (with the WHO’s Regional Office for South East Asia and Country Office for Indonesia).

Each McCabe event explores a wide range of legal issues relating to cancer/NCD prevention, treatment and care, across policy development, legislative and regulatory reform, and litigation. It was emphasised the importance of understanding the relationships between the diverse areas of health, trade, investment, sustainable development and human rights, and developing coherence and collaboration across government ministries and across sectors of societies. Tobacco control remained an important focus, particularly the lessons from Australia’s introduction of tobacco plain packaging laws and its defence of these laws against legal challenges in domestic and international jurisdictions. In this respect, the Centre continues to support the WHO’s Framework Convention for Tobacco Control Secretariat to advise and support countries in responding to legal threats or lawsuits from the tobacco industry.

The results of McCabe’s work can be seen in the form of new laws and regulations being enacted in countries which it is working with; in the way countries are defending litigation against their tobacco control laws; in the training participants taking on leading roles in training and law reform in their own countries and regions; and in other partners addressing legal issues in their policy and advocacy work.

The McCabe Centre is supported by the Australian Department of Foreign Affairs and Trade and Cancer Council Australia, and those who have supported the participation of additional participants (ACS CAN, Campaign for Tobacco-Free Kids, the Norwegian Ministry of Foreign Affairs, the Secretariat to the WHO FCTC, the WHO Regional Offices for Africa, the Eastern Mediterranean and the Western Pacific), and the William L Rudder Trust.

Global CMO (Chief Medical Officer) Network

UICC has been privileged to work with our partner Bupa in developing the Global CMO Network which was launched at the Clinton Global Initiative meeting in September 2014. Since then, with Bupa driving its development, the network has grown to more than 50 Chief Medical Officers from major international companies including IBM, Bayer, Citi Bank and others. These influential individuals are coming together to see how their collective experience, skills and reach can improve the way in which health is addressed in companies around the world. This is a very exciting initiative which UICC is very proud to support and promote globally.

Bupa, a UK-based health insurance company, and UICC have been working in partnership for the last three years and in 2014, engaged in an ambitious project to make a substantive contribution to the delivery of the WHO “25 by 25” target by tapping into the major opportunity workplaces represent in tackling cancer. In 2015, we scaled up the comprehensive package of practical resources for employers around the delivery of cancer initiatives as part of a broader approach to employee health and wellbeing, which included publication of a new report ‘Cancer, it’s everyone’s business’ and a series of six guides around tobacco cessation, women’s cancers, and supporting people with cancer to return to work. We also worked with Bupa to establish the Global CMO (Chief Medical Officer) Network, which brings together CMOs from major international companies to implement coordinated programmes which will improve the health of employees around the world.
TNM Classification of Malignant Tumours

The stage of cancer at diagnosis is an increasingly important component of cancer surveillance and cancer control, as well as an endpoint for the evaluation of population-based screening and early detection efforts.

Integration of staging and reporting into cancer surveillance is an important step as cancer control strategies are scaled up.

Through the support of numerous cancer experts from around the globe, UICC has been convening volunteers to achieve and publish the TNM Classification of Malignant Tumours for over 50 years, an internationally accepted standard for cancer staging.

In 2015 the 9th edition of the Manual of Clinical Oncology was published, and to acknowledge the rising need and reach of e-learning, a set of TNM training modules was launched with e-Cancer, the online oncology channel. Six modules are now available from ecancer.org, free of charge: The TNM Classification System, the TNM Classification Breast, Cervix, Prostate, Colorectal, and Lip and Oral Cavity.

In 2016 UICC will publish the 8th edition of the TNM Classification and a new TNM e-learning module on lung cancer.

UICC provides the new editions of the TNM classification free to everyone in as many languages as we can arrange. Today the classification is available in Arabic, Chinese, Czech, French, German, Italian, Japanese, Latvian, Polish, Portuguese, Russian and Turkish.

Partners

Centers for Disease Control and Prevention USA, Wiley

Journal of Global Oncology (JGO)

UICC launched the online-only Journal of Global Oncology (JGO) in partnership with the American Society of Clinical Oncology (ASCO) in 2015. This journal is open-access and is published bi-monthly.

The JGO provides a new platform for sharing innovations, best practice, and programmatic success in cancer control in settings with limited healthcare resources. This is the first peer-reviewed journal dedicated to this crucial area of cancer control and has strong ambitions to be a key tool for addressing global issues experienced across the cancer community.

Since its launch in October 2015, articles have covered the whole spectrum of cancer control, from effectiveness of prevention to side-effects of novel cancer drugs and the implementation and improving of palliative care in low-resource settings.

Together with UICC’s network of members in 154 countries, and ASCO’s 35,000 international members, the Journal has a significant potential global reach, with the two organisations working together to solicit high-quality original research, secure funding, and promote the Journal to their respective networks. Through this collaboration, ASCO and UICC will meet a growing need for high-quality clinical cancer research in LMICs by providing a peer-review platform focused on the challenges faced by researchers and care providers in these countries.

Partners

American Society of Clinical Oncology, Conquer Cancer Foundation of the American Society of Clinical Oncology, Doris Duke Charitable Foundation, Novartis Oncology

International Journal of Cancer (IJC)

The International Journal of Cancer is universally recognised as a leading publication for original papers and review articles covering the full spectrum of topics in clinical and experimental cancer research.

An official publication of UICC, the Journal concentrates on fundamental studies that improve our understanding of the mechanisms of human cancer and shed new light on effective diagnostic tools and treatments. In 2015, IJC’s impact factor increased to 5.085 and is ranked as 31 out of over 200 oncology journals by the ISI Journal Citation Report. The International Journal of Cancer publishes in 24 issues per year and is available in print through John Wiley & Sons.
CAPACITY BUILDING PROJECTS

From Roadmap 2 to Roadmap 3

In 2012, the UICC Board of Directors set out ‘Roadmap 2’, a four-year plan which aimed to improve the way UICC fulfilled its purpose statement by focusing its efforts in advocacy, convening and running capacity building projects. It was an ambitious plan, which was reviewed on a regular basis and delivered with great satisfaction during that period of time. An infographic plotting the high-level results for the period 2012-2015 is shown on page 8 of this report.

During 2015, the Board of Directors and the UICC management team defined our ambitions for 2016-2018, named ‘Roadmap 3’. We will again be active in global advocacy and convening (increasing the impact of World Cancer Day, the World Cancer Congress and the World Cancer Leaders’ Summit) but you will note a growing focus on our capacity building activities as outlined by Tezer Kutluk, our President, in the introduction to this Annual Activity Report. We will develop a wider range of capacity building initiatives which help UICC members “do a better job tomorrow, than they do today”. We will distribute more funds, arrange more fellowships and workshops, develop an online training platform and extend our growing resource base so that UICC members have access to training, funds, tools and guidelines which help them deliver the impact they wish to have locally.

UICC would like to thank Fondation Philanthropia for their very generous contribution to help UICC establish its new Capacity Building team and initiatives.

Partner of UICC since 2011, Fondation Philanthropia is connected to the leading global wealth and asset manager Lombard Odier and facilitates the implementation of its donors’ philanthropic initiatives in all areas of citizen engagement, including art and culture, social action, education, the environment and medical research. They have been a staunch supporter of UICC’s capacity building initiatives previously through the Cervical Cancer Initiative, and Global Access to Pain Relief Initiative. Fondation Philanthropia is demonstrating this sincere commitment by currently contributing to UICC’s expansion of its internal Capacity Building team so that it can enhance its members’ efficacy and impact.

“Fondation Philanthropia is delighted to work with our UICC partners to address cancer globally. Investing in the organisation’s capacity building plans means that we are impacting more cancer organisations around the world and helping them improve their skills and competencies. We represent a range of philanthropists committed to tackling the staggering burden of cancer and are convinced that new approaches should be championed, and consider capacity to be a critical component.”

Luc Giraud-Guigues, Head of Philanthropy, Fondation Philanthropia
**Childhood Cancer**

**Challenge**

Unlike many adult cancers, most paediatric cancers are not associated with modifiable risk factors and are not amenable to population-based screening and prevention programmes. Decreasing childhood cancer mortality thus requires accurate and timely diagnosis followed by effective treatment. Fortunately, such treatment exists and in high-income countries over 80% of children with malignancies are cured. The survival rate for children with cancer in many LMICs is however dramatically lower, ranging from 10% to 60% across settings. Improving care for LMIC children with cancer will require addressing several challenges: low levels of awareness and knowledge of childhood cancer among health workers; weak or non-existent referral systems for diagnosis, treatment, and care; insufficient human and infrastructural capacity; inconsistent availability of chemotherapeutic and pain relief drugs; lack of paediatric cancer registries and an absence of national childhood cancer control strategies.

**UICC’s response**

**Signs and Symptoms Campaign**

In partnership with Childhood Cancer International (CCI) and the International Society of Paediatric Oncology (SIOP), UICC released a series of videos as the second set of materials for its three-year ‘Signs and Symptoms’ Campaign. The campaign, targeted at primary and community healthcare workers, was launched to raise awareness on early warning signs of childhood cancer. Posters and pocket cards with key early warning signs of cancer were also produced and have since been translated into over 40 languages and used in various countries, including as part of national awareness campaigns.

**Key activities in 2015**

- **Launch of the Childhood Cancer Fund.** At a special event which took place in May in Geneva, the International Childhood Cancer Fund, a first of its kind initiative, was launched by Sheikha Jawaher bint Mohammed Al Qasimi, Wife of H.H. the Ruler of Sharjah, Founder and Royal Patron of the Friends of Cancer Patients Society and UICC International Ambassador for the World Cancer Declaration and Childhood Cancer.

- **Paediatric oncology staging guidelines.** UICC participated in a group of international experts and advocacy stakeholders for consensus building around key principles to guide the collection of childhood cancer stage by population-based cancer registries, and based upon these principles, which staging systems need be used by cancer registries for major childhood malignancies. The resultant paediatric cancer stage guidelines have been endorsed by the UICC TNM Staging Committee.

- **Leading up to the ten-year anniversary of My Child Matters,** the successful collaboration between UICC and Sanofi Espoir Foundation (SEF) on childhood cancer, SEF presented key results of the initiative at the World Cancer Leaders’ Summit in Istanbul, Turkey. Since 2005, 45 projects in 33 countries have received support involving the mobilisation of stakeholders from clinicians and researchers, to civil society and Ministries of Health.

- **Brocher Foundation Workshop.** This workshop focused on best practice sharing towards developing a phased model framework for childhood cancer in the Latin American region.

**Partners**

Friends of Cancer Patients, Sanofi Espoir Foundation

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Sanofi Espoir has been a partner of UICC since 2005 when we first began working together to deliver the long-standing childhood cancer initiative called ‘My Child Matters’. Sanofi Espoir is the corporate foundation of the pharmaceutical company Sanofi, and has a long history of commitment to improving maternal and neonatal health.
Cervical Cancer Initiative (CCI)

Challenge
Every year, more than 500,000 women worldwide are diagnosed with cervical cancer and approximately 266,000 succumb to the disease. In 2012, 87% of all deaths attributed to cervical cancer occurred in less developed countries.

UICC’s Response
In 2012, UICC launched its Cervical Cancer Initiative (CCI) with a focus on both country-level technical assistance and support for global advocacy to increase awareness and funding for cervical cancer prevention in low-resource settings. Country-level work began first with a pilot project in El Salvador in collaboration with local UICC member organisation, ASAPRECAN, the Ministry of Health, International Planned Parenthood Federation and Basic Health International.

In partnership with the Pan American Health Organization (PAHO), Centers for Disease Control and Prevention (CDC), PATH and others, UICC extended its work in Central America by providing support to the governments of Honduras, Nicaragua and Belize in generating or updating national guidelines in line with the new WHO prevention recommendations, healthcare provider training on the guidelines, support for south-south exchange and capacity building workshops for UICC members. A policy roundtable with representation across the region will close off this work, to share learning and develop an action plan to increase multi-sectoral support for national cervical cancer prevention and control programmes.

Keys activities in 2015
- National Cervical Cancer Guidelines were updated in El Salvador, Guatemala and Honduras
- The project led to screening of over 14,000 women through mobile clinics in El Salvador and over 200 health-care providers were trained in VIA, cryotherapy and HPV DNA testing.
- 3 specialised capacity building workshops for pathologists and nurses and 50 community-based information and education workshops were run
- 7 fellowships awarded to technical personnel to increase capacity in screening and treatment

Partners
American Society for Clinical Pathology, Dutch Cancer Society

Global Access to Pain Relief Initiative (GAPRI)

Challenge
80% of patients with terminal cancer are estimated to experience moderate to severe pain due to inequitable access to medicines. There are unacceptable disparities in the worldwide use of opioids for the treatment of pain: 93% of the world’s morphine supply is consumed in high-income countries while 70% of deaths from cancer occur in LMICs.

UICC’s Response
Working with its members and civil society partners, UICC garnered widespread support for the landmark Palliative Care Resolution adopted at the May 2014 World Health Assembly. Efforts since have focused on mobilising support at a national level to respond to the issue.

UICC is collaborating with the United Nations Office on Drugs and Crime (UNODC), the World Health Organization (WHO), and the International Narcotics Control Board (INCB) to improve knowledge of the problem and coordinate collaboration to implement solutions. 2016 will see a UN General Assembly Special Session on this topic, which represents a real opportunity to bring fresh momentum and investment for actions at national level. Meanwhile UICC presses for action to be taken in specific countries, including Ghana, which UNODC and WHO have identified as a priority.

Additionally, the joint GAPRI and American Cancer Society programme, ‘Treat the Pain’ has contributed to the availability of 2.8 million days of pain treatment in Nigeria, Kenya and Uganda.

“Cancer control is now a key priority in the health agenda in Honduras. This commitment would not have been possible without the support of UICC.”
Jacqueline Figeroa, Ministry of Health Honduras
Education and Training

Challenge
The global deficit of healthcare workers is at least 2.4 million, with low- and middle-income countries suffering the largest gap in workforce shortages whilst also facing the largest growing burden of cancer.

UICC’s Response
UICC has more than 50 years of experience in providing training and capacity building across the field of cancer control.

In 2015 UICC launched a new initiative: the SPARC MBC Challenge (Seeding Progress and Resources for the Cancer Community: Metastatic Breast Cancer Challenge). This SPARC initiative, which is supported by Pfizer, aims to empower advocacy groups, hospital networks, support groups and other organisations to address the unique challenges facing women with metastatic breast cancer worldwide. In total, 20 organisations from 18 countries were selected to receive grants and to develop their capacity to deliver their projects effectively.

UICC also continued to award fellowships and workshops across the world to promote greater equity in cancer care and increase the transfer of knowledge to those who need it most. Over the course of the last three years, more than 700 professionals from 70 countries have been trained. The fellowship offer has also been strengthened and diversified by implementing new initiatives with partners such as the International Agency for Research on Cancer (IARC), Chinese Anti-Cancer Association (CACA) and World Cancer Research Fund International (WCRF International).

Additionally, with the support of members and partners, the Master Courses offer has been further enhanced so that World Cancer Congress participants may benefit from highly specialised training in areas of high impact.

Partners
American Cancer Society, American Society of Clinical Oncology, Cancer Council Australia, Cancer Society of Finland, Danish Cancer Society, French League Against Cancer, Israel Cancer Society, National Cancer Institute USA, Pfizer, Swedish Cancer Society, Swiss League Against Cancer, UICC Japan.

The Cancer Society of Finland is one of UICC’s longest standing UICC members, having joined in 1962, and will be celebrating its own 80 year anniversary in 2016. The Society has a vested interest in access to treatment across the spectrum of care. Their unique operating model brings together scientists, clinicians, decision-makers, financial experts, volunteer helpers, and patients from twelve regional cancer societies and four patient organisations in Finland. Cancer Society of Finland has been a champion for UICC in the Nordic region and provided funding towards our ICRETT Fellowships.

The American Cancer Society (ACS) is a decades-long member of UICC and has an impressive track record of working in partnership with UICC on a range of global initiatives, including cervical cancer and pain relief. In addition to our mutual advocacy work specific to cancer, ACS has been a strong supporter of the NCD Alliance and is active on World Cancer Day across the United States. ACS is unceasingly committed to UICC’s convening events, to showcase best practices of global cancer control, and we look forward to their presence in Paris at the 2016 Congress.
The Global Initiative for Cancer Registry Development (GICR)

Challenge
Having an accurate picture of a country’s cancer burden is critical for effectively planning and implementing cancer prevention and control. Currently, some high-income countries benefit from cancer registries covering over 80% of the population, yet only one in five low- and middle-income countries have the necessary data to inform policy and reduce the burden and suffering due to cancer. The Global Initiative for Cancer Registry Development (GICR) is a coordinated, multi-partner approach to deliver the required change and make cancer data count and is driven by our partner, the International Agency for Cancer Research (IARC).

UICC’s Response
Launched in 2011, GICR now has six regional hubs or networks in place with associated agreements with local partners. With the financial support from the Dutch Cancer Society, UICC was able to take a lead in establishment of the Latin America network, supporting early training and recruitment.

UICC’s efforts have focused on supporting the GICR training of the Latin American and African Cancer Registry Networks and the Izmir and Mumbai hubs, with a total of 9 workshops and 7 fellowships over the last four years. 2015 saw the development of links between GICR and the TNM staging to create an essential stage initiative. In addition, UICC is supporting IARC for timely delivery of volume 3 of the International Incidence of Childhood Cancer Report in 2016.

Two investments on helping countries getting started have proven to be successful:

Paediatric cancer registry – as an entry point
Collaboration with the Dana Farber Cancer Institute (DFCI) led to the persuasion of Ministry representatives of Guatemala to take a first step in investing in cancer registration by initiating a paediatric cancer registry.

Investing in skills and leadership - Zambia
Zambia has been struggling to maintain a cancer registry and generate data for shaping national cancer plans with varying levels of ministry support in the past decade. While the need was recognised, the registry team was struggling with a data back log and no clear plan for establishing a population-based cancer registry in the Greater Lusaka district. UICC and the US National Cancer Institute’s Center for Global Health teamed up to provide a three-year fellowship in 2014 which would identify and support a cancer registrar, with conditions for the Ministry to continue financing the role after this time. Supported by the African Cancer Registry Network with training, mentorship and annual audits, 2015 saw the development of a plan for routine data-collection, training of key personnel and sharing of the first formal registry report with the Ministry of Health. The national Ministry of Health has already formally appointed the registrar to lead the Cancer Registry of Zambia with a commitment to making the Lusaka registry population-based with a minimum of 70% completion by the end of 2016.

Partners
Dutch Cancer Society, Friends of Cancer Patients, National Cancer Institute US

International Agency for Research on Cancer

“The fact that we had a reliable source of funds for establishing the Latin American hub over three years and continuing UICC support and drive behind it, meant that the IARC team was able to persist when times were hard, address a complex web of issues and get to where we are today - really understanding the status of each country in the region, having a great team in place delivering an ambitious three-year plan – thank you for your trust.”

Freddie Bray, Head of Cancer Information, International Agency for Research on Cancer (IARC)
Delivering a challenging and impactful global agenda
2015 has been a very successful year for UICC’s advocacy work. By far the biggest milestone was the adoption of the 2030 Sustainable Development agenda at the UN General Assembly which included non-communicable diseases in the global health and development agenda for the first time. This is the culmination of a six-year NCD Alliance campaign that UICC has helped drive from the start, and which formed the cornerstone of our CEO, Cary Adams’ role as Chair of the Alliance over the last three years.

Another advocacy focus in 2015 was to raise the profile of cancer health systems in alignment with the Global Action Plan for the Prevention and Control of NCDs (2013-2020), and particularly the target of 80% availability of essential medicines and technologies by 2025. UICC endeavoured to ensure that national cancer control plans articulate the multidisciplinary approach to treatment that is essential to achieving improved outcomes for cancer patients.

Building on the palliative care resolution of 2014, a 2015 World Health Assembly side event was held in partnership with WHO and supported by UICC board members. The discussions focused on the critical importance of surgery and radiotherapy as well as medicines for the treatment of cancer, with clear links to the resolution on strengthening access to essential surgical care and anaesthesia being debated at the Assembly in May.

Key activities in 2015:

**Updating of the WHO Model Lists of Essential Medicines (EML) for adults and children**

UICC was invited by WHO to convene a group of experts to review the list of cancer medicines included in the adult and children model EML lists. What followed was a global effort which engaged over 90 oncologists from around the world in a series of consultations in collaboration with UICC members, the Dana Farber Cancer Institute, the American Society of Clinical Oncology, the European Society for Medical Oncology and the International Society of Paediatric Oncology. The proposal was adopted and the WHO EML was updated to include 16 new cancer medicines - the largest single package increase since the list began in 1977.

These additions now take the total cancer medicines to 46 and introduced a disease-based decision-making framework. Similarly, the addition of 7 new medicines on the children’s EML means that 11 regimens for childhood cancers are now considered essential for all countries. The full list can be found at [www.who.int/medicines/publications/essentialmedicines/en](http://www.who.int/medicines/publications/essentialmedicines/en).

**The Lancet Oncology Commission on Global Cancer Surgery**

2015 welcomed the release of a Lancet/Lancet Oncology commission report which emphasised the investment case for multidisciplinary care and underlined the need for delivery of safe, affordable and timely cancer surgery, which is required in 80% of all cancer cases. A copy can be downloaded from Lancet Oncology [www.thelancet.com/journals/lanonc/article/PIIS1470-2045(15)00223-5/abstract](http://www.thelancet.com/journals/lanonc/article/PIIS1470-2045(15)00223-5/abstract).

**The Lancet Oncology Commission on Expanding Access to Radiotherapy**

Under the leadership of UICC Immediate-past President Mary Gospodarowicz, the Global Task Force on Radiotherapy in Cancer Control (GTFRCC) launched a landmark publication which demonstrated the significant returns on investment in radiotherapy worldwide. This was also published as a Lancet/Lancet Oncology commission report in November 2015. A copy can be downloaded from Lancet Oncology [www.thelancet.com/journals/lanonc/article/PIIS1470-2045(15)00222-3/abstract](http://www.thelancet.com/journals/lanonc/article/PIIS1470-2045(15)00222-3/abstract).
Launch of two key prevention initiatives

Cancer prevention remains important for UICC. In 2015 UICC was involved in the launch of two initiatives. In November, Cervical Cancer Action hosted a high-level conference in London called ‘Investing in Cervical Cancer Prevention 2015–2020’. The conference brought together key partners to take stock of recent global progress in cervical cancer prevention, spur expanded action and investment, and establish a consensus vision for what is required to meet our global goals and safeguard our commitments to the health of women and adolescent girls.

In April 2015 UICC established the Global Taskforce for Tobacco Free Portfolios (GTF.TFP) advisory group under the patronage of HRH Princess Dina Mired of Jordan. This Task Force aims to lead a global coalition of individuals and organisations to encourage, in the first instance, pension and superannuation funds to divest from tobacco stock in all countries. The initiative is run by Bronwyn King who is based in Melbourne, Australia. The GTF.TFP will report on progress at the 2016 World Cancer Congress in Paris.

Partners

American Cancer Society, Bayer, Canadian Cancer Society, Livestrong Foundation, National Cancer Institute US, Norwegian Cancer Society, Novartis, Swiss Cancer league, World Cancer Research Fund International

Varian Medical Systems, a leading manufacturer of radiotherapy machines, and UICC have been working in partnership for many years with the common objective of bringing radiotherapy to the attention of policy makers, UICC members and the whole cancer community given the important role it plays as a life saving cancer treatment and palliation too, particularly in low- and middle-income countries.
NCD Alliance

2015 was a year of unprecedented success for NCDs at global, regional and national levels, with the NCD Alliance and its federations leading the civil society response.

Following several years of concerted advocacy, the 2030 Agenda for Sustainable Development was adopted in September by governments in New York, and includes a dedicated target on NCDs. This reinforces NCDs as a sustainable development priority for all countries. Indeed, three of the nine health targets focus on NCD-related issues, which signals an evolution in global health priorities from those outlined in the Millennium Development Goals. Next steps will be to ensure that these global priorities are integrated into national development plans and that national responses are appropriately financed and monitored to ensure countries meet their commitments.

In November 2015, 200 representatives from NCD civil society came together for the first Global NCD Alliance Forum in Sharjah, UAE. The Forum was hosted by the NCD Alliance and Friends of Cancer Patients (a UICC member). The Forum was held under the patronage of Her Highness Sheikha Jawaher Bint Mohammed Al-Qassimi, Wife of the Ruler of Sharjah, Founder and Patron of the Friends of Cancer Patients Charity (FoCP), International Ambassador of the World Cancer Declaration for Union for International Cancer Control (UICC) and International Ambassador for Childhood Cancer for UICC.

In preparation of the Forum, the NCD Alliance worked in partnership with Regional Offices of the World Health Organization to host a series of five regional civil society meetings, and conducted a comprehensive situational analysis of national and regional NCD Alliances. The Forum provided a platform for knowledge exchange, capacity building, and priority setting, catalysed the formation of new alliances and culminated in the adoption of the Sharjah Declaration - a global expression of NCD civil society’s commitment to engage in advocacy and accountability to advance the NCD response.

A new NCD Alliance Strategic Plan 2016-2020 was developed following a comprehensive external review inviting views and opinions from those close to the Alliance in recent years. Based around four pillars of advocacy, accountability, capacity development and knowledge exchange, this plan fully reflects the increasing focus on translating global policy into national action; the realisation of internationally agreed goals and targets; engagement of actors beyond the traditional NCD space for a fully collaborative and integrated response; and the dissemination of best practice.

In September 2015, UICC handed over the Chair of the NCD Alliance to Jose Castro of the International Union Against Tuberculosis and Lung Disease. UICC remains committed to the Alliance for the next phase of its development and will continue to play an active role in all its work, including integrating NCDs into the 2016 World Cancer Congress programme.
UICC concluded the 2015 financial year in a positive position. All costs were covered by income received during the year and we closed the year with a surplus. This surplus will finance our business plan.

During the last few years we have made significant efforts in diversifying our sources of income. In 2015 the membership dues, the contributions from partners for restricted activities and operations, the income for Congress and events, as well as royalties and publications continued to be our main income streams. All these sources strengthened, providing a solid and secure base to fund all our planned activities and our core operations.

We managed and controlled our costs in line with budgets throughout the year. Our main operational expense continued to be staff costs.

The team worked hard throughout the year to successfully deliver the 2015 business plan and complete all the planned activities in accordance with the requirements of the Board of Directors.

UICC continued to act as fiscal agent for the NCD Alliance. We are pleased to see that the Alliance has improved financially and we are committed to continue as the fiscal agent.
**Balance sheet at 31 December 2015 in US Dollars**

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current accounts</td>
<td>5,075,594</td>
<td>6,161,827</td>
</tr>
<tr>
<td>Deposits &amp; short term investments</td>
<td>5,556,766</td>
<td>2,944,103</td>
</tr>
<tr>
<td>Other receivables</td>
<td>130,733</td>
<td>640,276</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>21,953</td>
<td>67,762</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT ASSETS</strong></td>
<td><strong>10,785,046</strong></td>
<td><strong>9,813,968</strong></td>
</tr>
<tr>
<td>Fixed assets, net</td>
<td>13,307</td>
<td>42,092</td>
</tr>
<tr>
<td><strong>TOTAL NON-CURRENT ASSETS</strong></td>
<td><strong>13,307</strong></td>
<td><strong>42,092</strong></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>10,798,353</strong></td>
<td><strong>9,856,060</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable</td>
<td>75,368</td>
<td>113,166</td>
</tr>
<tr>
<td>Accrued expenses</td>
<td>100,534</td>
<td>119,527</td>
</tr>
<tr>
<td>Deferred income</td>
<td>582,285</td>
<td>644,032</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>153,092</td>
<td>226,963</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT LIABILITIES</strong></td>
<td><strong>911,279</strong></td>
<td><strong>1,103,688</strong></td>
</tr>
<tr>
<td>Trust Funds - restricted for activities</td>
<td>7,284,796</td>
<td>6,597,499</td>
</tr>
<tr>
<td>Fund balance - unrestricted</td>
<td>2,102,279</td>
<td>1,654,873</td>
</tr>
<tr>
<td>Statutory reserve - unrestricted</td>
<td>500,000</td>
<td>500,000</td>
</tr>
<tr>
<td><strong>TOTAL FUND BALANCES</strong></td>
<td><strong>9,887,075</strong></td>
<td><strong>8,752,372</strong></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>10,798,353</strong></td>
<td><strong>9,856,060</strong></td>
</tr>
</tbody>
</table>

**2015 Income and expenditure**

- **INCOME**
  - Contributions & Grants: 37%
  - NCD Alliance: 22%
  - Members & Champions partners: 20%
  - Publications: 10%
  - UICC Congresses: 8%
  - Other: 3%

- **EXPENDITURE**
  - Projects & Activities: 40%
  - Operating Costs: 29%
  - NCD Alliance: 17%
  - UICC Congresses: 14%
06    FINANCIAL PERFORMANCE

Income and expenditure at
31 December 2015 in US Dollars

<table>
<thead>
<tr>
<th></th>
<th>UNRESTRICTED</th>
<th>RESTRICTED</th>
<th>TOTAL</th>
<th>UNRESTRICTED</th>
<th>RESTRICTED</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INCOME</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions and Grants</td>
<td>4,479,672</td>
<td>4,479,672</td>
<td>3,865,251</td>
<td>3,865,251</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership Dues and Contributions</td>
<td>1,067,095</td>
<td>1,067,095</td>
<td>1,138,815</td>
<td>1,138,815</td>
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<td></td>
</tr>
<tr>
<td>Champion Partners</td>
<td>1,272,370</td>
<td>1,272,370</td>
<td>1,024,607</td>
<td>1,024,607</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Publications</td>
<td>1,099,670</td>
<td>1,169,670</td>
<td>1,148,712</td>
<td>1,148,712</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UICC Congresses</td>
<td>965,952</td>
<td>965,952</td>
<td>2,785,375</td>
<td>2,785,375</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NCD Alliance</td>
<td>2,643,419</td>
<td>2,643,419</td>
<td>1,438,065</td>
<td>1,438,065</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations and legacies</td>
<td>140,865</td>
<td>48,199</td>
<td>1,067,065</td>
<td>1,067,065</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>234,468</td>
<td>204,706</td>
<td>211,415</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td>3,814,468</td>
<td>8,170,323</td>
<td>11,984,790</td>
<td>3,565,039</td>
<td>8,095,400</td>
<td>11,660,439</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>UNRESTRICTED</th>
<th>RESTRICTED</th>
<th>TOTAL</th>
<th>UNRESTRICTED</th>
<th>RESTRICTED</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPENDITURE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Projects and Initiatives</td>
<td>170,571</td>
<td>4,144,777</td>
<td>4,315,348</td>
<td>127,000</td>
<td>3,671,609</td>
<td>3,798,609</td>
</tr>
<tr>
<td>UICC Congresses</td>
<td>1,494,735</td>
<td>1,494,735</td>
<td>2,054,035</td>
<td>2,054,035</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating Costs</td>
<td>3,132,175</td>
<td>3,309,711</td>
<td>3,309,711</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NCD Alliance</td>
<td>1,843,512</td>
<td>1,067,065</td>
<td>1,067,065</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL EXPENDITURE</strong></td>
<td>3,302,746</td>
<td>7,483,024</td>
<td>10,785,771</td>
<td>3,436,711</td>
<td>6,792,709</td>
<td>10,229,420</td>
</tr>
</tbody>
</table>

|                      |                |            |            | 1,302,691    | 1,431,019  |
| Revenues over (under) expenditure | 511,722    | 687,297    | 1,199,019  | 128,328  |

|                      | 2,154,873    | 6,597,499  | 8,752,372  | 2,574,045    | 5,294,808  | 7,868,853  |
| FUND BALANCES, beginning of year |            |            |            |            |

|                      | 511,722    | 687,297    | 1,199,019  | 128,328    | 1,302,691  | 1,431,019  |
| Revenues over (under) expenditure |            |            |            |            |

|                      | (64,317)   | 0          | (64,317)   | (547,500)  | 0          | (547,500)  |
| Currency exchange fluctuation |            |            |            |            |

|                      | 2,602,279  | 7,284,796  | 9,887,075  | 2,154,873  | 6,597,499  | 8,752,372  |
| FUND BALANCES, end of year |            |            |            |            |

These figures, as presented, represent a summary of the financial statements of UICC. A complete set of the audited financial statements for 2015, including accompanying notes, may be obtained upon request by contacting taylor@uicc.org.
Report of the statutory auditor

to the Board of Directors of
Union for international Cancer Control (UICC)
Geneva

Report of the statutory auditor on the financial statements

As statutory auditor, we have audited the financial statements of Union for international Cancer Control (UICC), which comprise the balance sheet, statement of revenues and expenses, cash flow statement, statement of changes in fund balances and notes (pages 1 to 11), for the year ended 31 December 2015. As permitted by Swiss GAAP FER 21 the information in the performance report (pages 12 to 15) is not required to be subject to audit.

Board of Directors’s responsibility

The Board of Directors is responsible for the preparation and fair presentation of the financial statements in accordance with the requirements of Swiss GAAP FER 21, Swiss law and the articles of Association. This responsibility includes designing, implementing and maintaining an internal control system relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. The Board of Directors is further responsible for selecting and applying appropriate accounting policies and making accounting estimates that are reasonable in the circumstances.

Auditor’s responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Swiss law and Swiss Auditing Standards. Those standards require that we plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers the internal control system relevant to the entity’s preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control system. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of accounting estimates made, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements for the year ended 31 December 2015 give a true and fair view of the financial position, the results of operations and the cash flows in accordance with Swiss GAAP FER 21 and comply with Swiss law and the articles of Association.
**Report on other legal requirements**

We confirm that we meet the legal requirements on licensing according to the Auditor Oversight Act (AOA) and independence (article 83b paragraph 3 CC in connection with article 728 CO) and that there are no circumstances incompatible with our independence.

In accordance with article 83b paragraph 3 CC in connection with article 728a paragraph 1 item 3 CO and Swiss Auditing Standard 890, we confirm that an internal control system exists which has been designed for the preparation of financial statements according to the instructions of the Board of Directors.

We recommend that the financial statements submitted to you be approved.

PricewaterhouseCoopers SA

Nicolas Biderbost
Audit expert
Auditor in charge

Manuela Lacombe
Audit expert

Geneva, 12 May 2016

Enclosure:
- Financial statements (balance sheet, statement of revenues and expenses, cash flow statement, statement of changes in fund balances and notes)
- Performance report
The Board of Directors governs UICC in accordance with the mandate given to it by the General Assembly of UICC members. It is empowered to provide leadership and strategic direction for all UICC activities. The Board is elected every two years by the General Assembly and the current Board has been in office since December 2014, when elections took place in Melbourne, Australia.

The Board is composed of 17 outstanding and committed individuals, representing all spectrums of cancer control. All Board members serve in their own personal capacity and not as representatives of their respective organisations or countries.

In the last few years, the Board of Directors has spent time developing a new purpose statement and a long term vision for UICC which has inspired the creation of the current business plan which runs from 2016 to 2020. To complement this ambition, the Board has also reviewed and renewed the UICC Governance Framework to ensure that the way in which we operate supports the delivery of our long term goals.

In 2015 the Board of Directors met three times (February, May and November). During the meetings and in between meetings their personal engagement is to be commended and UICC and its members take this opportunity to express our gratitude to all Board members for their on-going commitment and hard work.
07  BOARD OF DIRECTORS

President
Tezer Kutluk (Turkey)

President-Elect
Sanchia Aranda (Australia)

Immediate Past President
Mary Gospodarowicz (Canada)

BOARD MEMBERS

Benjamin O. Anderson
(United States)
Heather Bryant
(Canada)
Maira Caleffi
(Brazil)
Anil D’Cruz
(India)
Jeff Dunn
(Australia)

Serigne Gueye
(Senegal)
Xishan Hao
(China)
Jamal Khader
(Jordan)
Harpal Kumar
(United Kingdom)
Gilbert Lenoir
(France)

Tetsuo Noda
(Japan)
Anne-Lise Ryel
(Norway)
Saunthari Somasundaram
(Malaysia)
Richard Sullivan
(United Kingdom)
In 2015, the UICC team of 35 enthusiastic and talented individuals worked together towards achieving the goals set out in the business plan, under the leadership of the organisation’s Chief Executive Officer, Cary Adams.

In May, Cary was awarded ‘CEO of the year’ at the Associations World Congress, and accepted the award noting that: “it truly represented the efforts of an amazing team backed by a great Board of Directors.”

The UICC team in Geneva will be expanding in the next couple of years as we establish a new Capacity Building team, which will be responsible for working with UICC members and partners to deliver an increasing suite of products and services which help our members improve the way they operate in their own country. Capacity building will also feature in our World Cancer Congress in Paris as a new programme track, and UICC will integrate a call to action for capacity building in its advocacy agenda.
CAPACITY BUILDING

Jean-Etienne Brodier  Riccardo Lampariello  Rasika Upilekar  Wiebke Rösler  Marina Teahon  Sally Amelia Donaldson

MEMBERSHIPS AND PARTNERSHIPS

Isabel Mestres  Muriel Auclaire  Lorenzo Boffi  Natacha Debbané  Teresa Gmur  Karine Hentsch

FINANCE AND ADMINISTRATION

Jeannette Nyandwi  Marion Ovide  Philomène Taylor

NCD ALLIANCE SUPPORT  MCCABE CENTRE FOR LAW AND CANCER

Tiphaine Lagarde  Alena Matzke  Jonathan Liberman (based in Melbourne, Australia)

UICC AMBASSADORS

Her Highness Sheikha Jawaher Bint Mohammed Al Qasimi, Wife of the Ruler of Sharjah, Founder and Royal Patron of the Friends of Cancer Patients charity - World Cancer Declaration Ambassador and International Ambassador for Childhood Cancer

Her Royal Highness Princess Dina Mired of Jordan - World Cancer Declaration Ambassador
UICC thanks the organisations highlighted in blue that made voluntary contributions above and beyond their statutory membership dues, and those which kindly supported the membership of other members.
AFGHANISTAN
Afghan Society Against Cancer

ALGERIA
Association d'Aide aux Enfants Cancéreux
Association d'Aide aux Enfants Cancéreux - Béchar
Association des Médecins Libéraux d'Annaba
El Adwa
EL BADR
El-AMEL Association
ENNOUR for Helping Cancer Patients - Sétif
Errahma
Nassima
Nour Doha
Waha

ANGUILLA
Anguilla Family Planning Association

ANTIGUA AND BARBUDA
Antigua Planned Parenthood Association
Caribbean Family Planning Affiliation, Ltd.

ARGENTINA
Asociación Leucemia Mieloide de Argentina (ALMA)
Fundación para la Salud del Adolescente
Fundación SALES
Instituto Oncológico Henry Moore
Liga Argentina de Lucha Contra el Cáncer (LALCEC)
Linfomas Argentina
Sociedad Latinoamericana y del Caribe de Oncología Médica (SLACOM)
Unión Antitabáquica Argentina (UATA)

ARUBA
Foundation for Promotion of Responsible Parenthood

AUSTRALIA
Adelaide Hills PCSG
Adelaide Mitcham PCSG
Albany PCSG
Albury Wodonga PCSG
Alice Springs PCSG
Anastasia Greek Cancer Support Group
Ararat & District Prostate Cancer Support Group
Armidale PCSG
Australian Cancer Council
Australian Catholic University, Exercise Lifestyle Clinic
Bairnsdale Prostate & Partners Support Group
Ballarat Prostate Cancer Support Group
Barossa Prostate Cancer Support Group
Bass Coast Prostate Cancer Support Group
Bathurst Prostate Cancer Support Group
Bayside Kingston PCSG
Bendigo & Districts Prostate Cancer Support Group
Biloela PCSG
Blackwood Districts PCSG
Box Hill PCSG
Bream Cancer Network Australia
Brisbane Prostate Cancer Support Network
Broken Hill Prostate Cancer Support Group
Bunbury District Prostate Cancer Support Group
Bundaberg & District Prostate Cancer Support Group
Busselton PCA&SG
Cancer Australia
Cancer Council ACT
Cancer Council Australia
Cancer Council Northern Territory
Cancer Council NSW
Cancer Council Queensland
Cancer Council South Australia
Cancer Council Tasmania
Cancer Council Victoria
Cancer Council Western Australia
Cancer Nurses Society of Australia
Capricorn Coast Prostate Support & Awareness Group
Carlin - Younger Men PCSG
Central Australia Support Group Leaders Teleconference Group
Central Coast Carers Group
Central Coast PCSG
Central Coast Pre Op Support Group
Central Gold Coast PCSG
Cessnock Prostate Cancer Support Group
Chinese Cancer Society of Victoria Cancer Support Group
Citiplace Advanced PCSG
Clarence Valley Prostate Cancer Support Group
Clayton Greek Cancer Support Group
Clinical Oncology Society of Australia (COSA)
Coffs Harbour PCSG
Collie PCSG
Concord PCSG
Cootamundra PCSG
Cure Brain Cancer Foundation
Darwin Prostate Support Awareness Group - Prosper
Denmark PCSG
Devonport PCSG
Diamond Valley PCSG
Dubbo PCSG
Dural PCSG
Eastern Shore PCSG
Essendon PCSG & Diamond Valley PCSG
Far North Queensland (Cairns) PCSG
Far North Queensland PCSG
Frankston & District PCSG
Fremantle PCSG
Garvan Research Foundation
Gay Melbourne Prostate Cancer Group
Gay Prostate Support Adelaide
Gay/Bisexual Prostate Cancer Support QLD
Geelong Prostate Support Group
Geraldton PCSG
Gladesville & District Prostate Cancer Support Group
Glass House Country PCSG
Glen Innes PCSG
Gloucester Prostate Cancer Support Group
Gold Coast North Prostate Cancer Support & Awareness Group
Gold Coast Prostate Cancer Partners Support Group
Goulburn & District Prostate Cancer Support Group
Granite Belt PCSG
Great Lakes Prostate Cancer Support Group
Griffith PCSG
Gymie & District PCSG
Hastings Prostate Cancer Support Network
Hervey Bay Prostate Cancer Support Group
Illawarra Prostate Cancer Support Group
Innisfail Prostate Support Group
Inverell PCSG
Ipswich Prostate Cancer Support Group
Kalamunda PCSG
Kingborough PCSG
Kingston & Robe PCSG
Kyabram & District Prostate Support Group
Latrobe Valley Prostate Support Group
Launceston Men's Cancer Support Group
Leederville Prostate Exercise Group
Leukaemia Foundation of Australia
Limestone Coast PCSG
Lockyer Valley PCSG
Lower Eyre Prostate Cancer Support Network
Lower North PCSG
Ludwig Institute for Cancer Research
Lymphoma Australia
Mackay & District Prostate Cancer Support Group
Mandurah PCSG
Maryborough Prostate Cancer Support Group
Melpark Prostate Cancer Support Group
Mens Engagement Network
Men's Prostate Group Balaklava
Monaro Prostate Cancer Support Group
Monash University Prostate Cancer Research Group
Mornington Peninsula Prostate Support Group
Movember Foundation
Mudgee Prostate Cancer Support Group
Murray Bridge PCSG
Naracoorte Mens Cancer Support Group
National Breast Cancer Foundation
Nepean/Blue Mountains PCSG Inc.
Newcastle/Hunter Mater Prostate Cancer Support Group
North Burnett PCSG
North Shore PCSG
North West QLD Prostate Cancer Support Group
Northern Beaches Prostate Cancer Support Group
Northern Rivers Day PCSG
Northern Rivers Evening PCSG
Northern Tablelands PCSG
Northern Territory Rainbow PCSG
Ocean Reef PCSG
Orange PCSG
Orbrook PCSG
Parkes Prostate Awareness and Support Group
PCS - City of Onkaparinga Group
PCSG Bellarine Peninsula
Perth Gay/Bisexual PCSG
Perth Partners Group
Perth PCSG
Perth Southsiders Prostate Cancer Support Group
Perth Western Suburbs Group
Peter MacCallum Cancer Institute
Port Pirie PCSG
Prostamates Support Group
Prostate (Cancer) Support Awareness Adelaide Group
Prostate Awareness Twin Town & Tweed Coast
Prostate Cancer Action Group (S.A.) Inc.
Prostate Cancer Foundation of Australia
Prostate Cancer Partners SG Bentleigh Bayside
Prostate Cancer Support Group ACT Region
Prostate Cancer Support Group of Younger Men
Prostate Heidelberg
Prostate Melbourne Support Group
Prostate Support Group Warrnambool QLD Advanced PCSG (Telephone Group)
Queensland and Northern NSW Support Group Leaders Teleconference Group
Reach to Recovery International
Redcliffe PCSG
Ringwood PCSG
Riverland PCSG
Rockhampton PCSG & A Group
Royal Australian and New Zealand College of Radiologists (RANZCR)
Royal Prince Alfred Hospital PCSG (Day Group)
Royal Prince Alfred Hospital PCSG (Evening Group)
Saddleworth PCSG
Shepparton & District PCSG
Shine A Light Group for Gay/Bisexual Men
Shoalhaven PCSG
South Perth PCSG
Southern Highlands PCSG
St Arnaud PCSG
St George PCSG
St Vincent's PCSG
Stay Strong Prostate Cancer Exercise Group
Sunraysia Prostate Support Group
Sunshine Coast PCSG
Swan Hill Prostate Support Group
Sydney Adventist Hospital Educational Presentations (Night)
Sydney Adventist Hospital Facilitated Group Discussion (Day)
Tamworth Prostate Cancer Support Group
Taree PCSG
Tatiara Prostate Cancer Support Group
Townsville PCSG
University of Sydney Cancer Research Network
Victoria and Tasmania Support Group Leaders Teleconference Group
Victorian Comprehensive Cancer Centre Wagga Wagga PCSG
Waiker & Eliza Hall Institute of Medical Research
Warialda Community Support Group
Waverley PCSG
Western Australia Support Group Leaders Teleconference Group
Westgate Region Prostate Cancer Support Group
Westmead PCSG
Westside Prostate Cancer Support Group
Whysalla PCSG
Wytong PCSG
Yorke Peninsula PCSG
Younger Men Central Coast PCSG
Younger Men PCSG - Leederville

AZERBAIJAN
National Oncology Centre of Azerbaijan Republic

BAHAMAS
Bahamas Family Planning Association

BAHRAIN
Bahrain Cancer Society

BANGLADESH
Bangladesh Cancer Society

EMINENCE

BARBADOS
Barbados Family Planning Association
The Myeloma, Lymphoma and Leukaemia Foundation of Barbados

BELARUS
Belarusian Society of Oncologists

BELGIUM
European CanCer Organisation (ECCO)
European Cancer Patient Coalition
European Organisation for Research and Treatment of Cancer (EORTC)
European Society for Radiotherapy & Oncology (ESTRO)
Patient Organisation Hodgkin and Non-Hodgkin Diseases
The Anticancer Fund

BELIZE
Belize Family Life Association

BENIN
Association Franco Béninoise de Lutte Contre le Cancer
Association pour la Lutte Contre le Cancer au Bénin
Initiative des Jeunes pour le Développement
SOS Cancer

BERMUDA
Bermuda Cancer and Health Centre
Teen Services

BOLIVIA, PLURINATIONAL STATE OF
Asociación de Lucha Contra la Leucemia Paolo Belli - Instituto de Oncohematología
Centro de Investigación, Educación y Servicios (CIES)
Fundación Boliviana Contra el Cáncer

BOTSWANA
Cancer Association of Botswana
05 OUR MEMBERS

BRAZIL
ABRALE Brazilian Lymphoma and Leukaemia Association
Amigos na Luta Contra o Câncer
Associação Amor a Vida
Associação Brasileira de Apoio aos Pacientes de Câncer (ABRAPAC)
Associação Brasileira de Portadores de Câncer AMUCC
Associação Brasiliense de Apoio ao Paciente com Câncer - ABAC-Luz
Associação Capanense de Apoio e Prevenção ao Câncer da Mulher - ACPM
Associação Cascavel Rosa
Associação Cearense das Mastectomizadas - Toque de Vida
Associação das Amigas da Mama - AAMA
Associação das Mulheres Iguatenses
Associação de Apoio a Mulher Portadora de Neoplasia - AAMN
Associação de Apoio de pessoas com Câncer
Associação de Combate ao Câncer da Grande Dourados - ACCGD
Associação de Combate ao Câncer do Brasil Central - ACCBC
Associação de Mulheres Atuantes de Paraíso do Tocantins - AMAP
Associação de Mulheres Mastectomizadas de Brasília
Associação do Câncer Amor Próprio - Uma Luta pela Vida - AMOR PRÓPRIO
Associação dos Amigos da Mama de Niterói (ADAMA)
Associação dos Amigos da Oncologia (AMO)
Associação dos Amigos de Prevenção do Câncer - GAMA
Associação dos Amigos do CRIO - ASSOCRIO
Associação de Educação e Saúde da Mama Jesuína Estrela (AMAJES)
Associação Feminina de Educação e Combate ao Câncer - AFECC
Associação Laço Rosa - pela cura do câncer de mama - Fundação Laço Rosa
Associação Limeirense de Combate ao Câncer (ALICC)
Associação Mário Penna
Associação Metropolitana de Pacientes Oncológicos - APPO
Associação Rosa Viva - ROSAIVA
Bem-Estar Familiar no Brasil (BEMFAM)
Centro de Integração Amigas da Mama - CIAM
Elas Por Elas Vozes e Ações das Mulheres
Federação Brasileira de Instituições Filantrópicas de Apoio à Saúde da Mama (FEMAMA)
Federação Latinoamericana de Mastologia (FLAM)
Fundação Antonio Prudente - A.C. Camargo Cancer Center
Fundação do Câncer, Brazil
Fundação Maria Carvalho Santos - FMCS
Grupo Beltrones de Prevenção ao Câncer
Grupo de Mama Renascer - GRUMARE
Grupo para Motivação e Auto-Ajuuda Renovadora - Grupo AMAR
Grupo Rosa e Amor
Hospital de Caridade de Itui
INCA Instituto Nacional de Câncer
Instituto Avon
Instituto Brasileiro de Controle do Câncer
Instituto da Mama do Rio Grande do Sul - IMAMA
Instituto de Desenvolvimento e Valorização Humana
Instituto do Câncer do Ceará - ICC
Instituto Humanista de Desenvolvimento Social - HUMSOL
Instituto Oncoguia
Liga Mossoroense de Estudos e Combate ao Câncer - Grupo Toque de Mama
Liga NorteRioGrandense Contra o Câncer - Grupo Despertar
Núcleo Assistencial para Pessoas com Câncer - NASPEC
Rede Feminina de Combate ao Câncer de Blumenau - RFCC
Rede Feminina de Combate ao Câncer de Brasília (RFCC- DF)
Rede Feminina de Combate ao Câncer de Bucupi - RFCC
Rede Feminina de Combate ao Câncer de Gaspar
Rede Feminina de Combate ao Câncer de Itajai - RFCC
Rede Feminina de Combate ao Câncer de Jaraguá do Sul - RFCC - JS
Rede Feminina de Combate ao Câncer de Maravilha - R.F.C.C.-Maravilha
Rede Feminina de Combate ao Câncer de Ponta Porã - RFCCPPP
Rede Feminina de Combate ao Câncer de São Bento do Sul
Rede Feminina de Combate ao Câncer de União da Vitória- RFCC - UV
Rede Feminina de Combate ao Câncer de Xaxim
Rede Feminina de Combate ao Câncer em Alagoas - RFCC
Rede Feminina Regional de Combate ao Câncer de Xanxerê - R.F.C.C.- Santa Catarina
Santa Casa de Misericórdia da Bahia
União e Apoio no Combate ao Câncer de Mama - UNACCAM
BULGARIA
Bulgarian Lymphoma Patients’ Association
Bulgarian National Association of Oncology (BNAO)

BURKINA FASO
Centre Hospitalier Universitaire Yalgado Ouedraogo (CHU-YO)
Espoir Cancer Féminin
Kimi
Solidarité contre le cancer

BURUNDI
Alliance Burundaise Contre le Cancer (ABCC)

CAMEROON
Association des Volontaires pour la Santé Familiale
Cameroon Laboratory & Medicine Foundation Health Centre
Solidarité Chimiothérapie - SOCHIMIO
Synergies Africaines Contre le Sida et les Souffrances

CANADA
Alberta Cancer Foundation
Alberta Health Services - Cancer Care
British Columbia Cancer Agency
Canadian Association of Gastroenterology (CAG)
Canadian Association of Nurses in Oncology (CANON)
Canadian Association of Radiation Oncology (CARO - ACRO)
Canadian Cancer Action Network
Canadian Cancer Society
Canadian Federation for Sexual Health
Canadian Institutes of Health Research
Canadian Organization of Medical Physicists (COMP)
Canadian Partnership Against Cancer (CPAC)
Cancer Care Ontario
CancerLink Inc
Centre for Chronic Disease Prevention
Centre Hospitalier de l’Université de Montréal
Department of Oncology, Faculty of Medicine, McGill University
Direction québécoise du cancer (DQC), Ministère de la Santé et des Services Sociaux
Fondation Québécoise du Cancer
International Society of Nurses in Cancer Care (ISNCC)
Lymphoma Coalition
Lymphoma Foundation Canada

Princess Margaret Cancer Centre
The Cedars Cancer Institute at the McGill University Health Centre

CHAD
Association Tchadienne des Femmes Vivants avec le Cancer
Association Tchadienne Contre le Cancer
Association DONAMA
CHILE
Asociación Chilena de Protección de la Familia
Corporación Nacional Maxi-Vida
Fundación Chilena para el Desarrollo de la Oncología

CHINA
Chinese Anti-Cancer Association (CACA)
Chinese Medical Association
Tianjin Medical University Cancer Institute & Hospital
Sun Yat-sen University Cancer Center
Beijing New Guideline Medical Technology Development co., ltd
Shanghai Roots & Shoots
Beijing New Sunshine Charity Foundation
Xinhua Translational Institute for Cancer Pain, Shanghai

COLOMBIA
Fundación Esperanza Viva
Instituto Nacional de Cancerología - Colombia
Liga Colombiana Contra el Cáncer
Registro Poblacional de Cáncer de Cali de la Universidad del Valle
Funcancer
Colombian Leukemia and Lymphoma Foundation
Asociación Pro-Bienestar de la Familia Colombiana
Instituto de Cancerología S.A.

COMOROS
Union Comorienne Contre le Cancer

CONGO
Union Congolaise contre le Cancer
Fondation Calissa ikama
Accompagnez la vie
Association des Infirmiers du Congo
Bénévoles pour le Bien être Familial

DEMOCRATIC REPUBLIC OF CONGO
Agir Ensemble
Ligue Congolaise contre le Cancer

COSTA RICA
Asociación Demográfica Costarricense
Fundación Dra. Anna Gabriela Ross

CÔTE D’IVOIRE
CHU de Treichville - Service de Pédiatrie
Ligue Ivorienne Contre le Cancer
Aidons les Personnes Atteintes ou Affectées par le Cancer
Association Ivorienne de Lutte Contre le Cancer
SOS Cancers
Association Imagine le Monde
Association Ivorienne des Soins Palliatifs
Association de Soins Palliatifs de Côte d’Ivoire

CROATIA
Association of Patients with Leukemia and Lymphoma
Croatian League Against Cancer

CUBA
Instituto Nacional de Oncología y Radiobiología
Sección Independiente de Control del Cáncer
Sociedad Científica Cubana para el Desarrollo de la Familia
Sociedad Cubana de Oncología, Radioterapia y Medicina Nuclear

CURAÇAO
Foundation for the Promotion of Responsible Parenthood

CYPRUS
Cyprus Anti-Cancer Society
Cyprus Association of Cancer Patients & Friends

CZECH REPUBLIC
League Against Cancer Prague
Lymphom Help

DENMARK
Danish Cancer Society

DJIBOUTI
Association pour le Développement du Millénaire

DOMINICA
Dominica Planned Parenthood Association
Dominica Cancer Society

DOMINICAN REPUBLIC
Liga Dominicana Contra el Cáncer
Patronato Cibaerío Contra el Cáncer
Asociación Dominicana Pro-Bienestar de la Familia
Un Paso Max

ECUADOR
Fundación Jóvenes contra el Cáncer
Sociedad de Lucha contra el Cáncer (SOLCA)
Asociación Ecuatoriana de Ayuda a Pacientes con cáncer “Esperanza y Vida”
Centro Ecuatoriano para la Promoción y Acción de la Mujer

EGYPT
Arab Medical Association Against Cancer (AMMAAC)
Fakkous Center for Cancer and Allied Diseases
National Cancer Institute - Cairo
Association d’aides aux Malades du Cancer dans l’Oasis de Dakhla
Association Médicale Franco-Egyptienne
Can Survive Egypt
Egyptian Society for Promotion Of Women’s Health

EL SALVADOR
Asociación Demográfica Salvadoreña
Asociación Salvadoreña para la Prevención del Cáncer

ESTONIA
Estonian Cancer Society

ETHIOPIA
Mathiwos Wondu Ye-Ethiopia Cancer Society

FIJI
Fiji Cancer Society
Fiji Islands Ministry of Health and Medical Services

FINLAND
Cancer Society of Finland

FRANCE
Centre d’Oncologie Léon Bérard
Centre Georges-François Leclerc
Centre Régional François Baclesse
Centre Régional Jean Perrin
Institut du Cancer de Montpellier
Gustave Roussey
Institut National du Cancer (INCA)
Institut Paoli Calmettes
Centre Antoine Lacassagne
Centre Paul Strauss
Institut Curie
Alliance des Ligue Francophones Africaines et Méditerranéennes contre le cancer (ALIAM)
France Lymphome Esopir
Fondation ARC pour la Recherche sur le Cancer
Cancérologues Sans Frontières
Pathologie Cythologie et Développement OncoMali
Groupe Franco-Africain d’Oncologie Pédiatrique
Cent Pour Sang La Vie
Association Laurette Fugain
AFROCANCER
Association Française des Infirmiers de cancérologie
Gynécologie Sans Frontières
Physicien Médical Sans Frontières
FRANCE (CONTINUED)
Institut Bergonié
Institut de Cancérologie de l’Ouest
NESSMA
Raid Evasion Run
Alliance Mondiale Contre le Cancer
Institut pour la Prévention de Cancer du Sein
SOS Don de Moelle Osseuse Moyen Orient
Centre National de Lutte contre le Cancer
UNICANCER
Seintinelles
Fondation JDB-prévention cancer
Institut Universitaire du Cancer Toulouse Oncopole
Centre Henri Becquerel
Centre de Cancérologie de Lorraine
Centre Oscar Lambret
Centre Eugène Marquis
Institut Jean Godinot

GABON
Ligue Gabonaise Contre le Cancer

GEORGIA
National (Cancer) Screening Center
National Cancer Center of Georgia

GERMANY
Deutsche Krebsgesellschaft e. V. - DKG
Deutsche Krebshilfe
Deutsches Krebsforschungszentrum (DKFZ)
Krebssallianz GmbH
Deutsche Leukaemie & Lymphom-Hilfe eV
Myeloma Euronet A.I.S.B.L.

GHANA
Breast Care International (BCI)

GREECE
Hellenic Cancer Society
Hellenic Society of Oncology
International Institute of Anticancer Research

GRENADA
Grenada Planned Parenthood Association

GUADELOUPE
Association Guadeloupenne pour le Planning Familial

GUATEMALA
Asociación de Pacientes con LMC - ASOCALEU-
Liga Nacional Contra el Cáncer Guatemala
One Voice Against Cancer
Asociación Pro-Bienestar de la Familia de Guatemala
Instancia por la salud y el desarrollo de las Mujeres ISDM
Fundación Unidos contra el Cáncer

GUINEA
Génération Sans Tabac

GUYANA
Guyana Responsible Parenthood Association

HAITI
Association pour la Promotion de la Famille Haïtienne

HONDURAS
Asociación Hondureña de Lucha contra el Cáncer
Fundación Hondureña para el Niño con Cáncer
Liga Contra el Cáncer - Honduras
Asociación Hondureña de Planificación de Familia

HONG KONG
Asian Fund for Cancer Research
The Hong Kong Anti-Cancer Society
Hong Kong Blood Cancer Foundation (HKBCF)
World Cancer Research Fund Hong Kong (WCRF HK)

HUNGARY
Hungarian League Against Cancer

INDIA
Apollo Cancer Institute, Apollo Hospitals - Hyderabad
Cancer Aid & Research Foundation
Saroj Gupta Cancer Centre & Research Institute
Cancer Patients Aid Association
Dharamshila Cancer Hospital and Research Centre
Dr. Bhubaneswar Borooah Cancer Institute
Friends of Max
Gujarat Cancer & Research Institute
Indian Cancer Society - National HQ
Institute Rotary Cancer Hospital (IRCH)
Meherbai Tata Memorial Hospital
Rajiv Gandhi Cancer Institute & Research Centre
Ruby Hall Clinic
Sir J.J Hospital
Tata Memorial Hospital
Delhi State Cancer Institute
V Care Foundation
Kidwai Memorial Institute of Oncology
Global Marwari Charitable Foundation
North East Cancer Centre and Research Institute
Priyamvada Birla Cancer Research Institute Satna
HealthCare Global Entreprises
Enhance head neck rehabilitation & enhance social initiative

INDONESIA
Indonesian Cancer Foundation
Indonesian Center for Expertise in Retinoblastoma (ICER)
Yayasan Sentuhan Kasih Anak Indonesia

IRAN
Cancer Institute, Imam Khomeini Medical Center
MAHAK “Society to Support Children Suffering from Cancer”

IRELAND
Irish Cancer Society
Lymphoma Support Ireland
National Cancer Control Programme

ISRAEL
Israel Cancer Association
Flute of Light
Hadassah

ITALY
Associazione Italiana contro le Leucemie- Linfomi e mieloma - Pazienti
Associazione Italiana di Oncologia Medica (AIOM)
Associazione Italiana Malati di Cancro Parenti e Amici (AIMAC)
Associazione Italiana per la Ricerca sul Cancro
Associazione Vittorio Tison Cultura e Solidarietà
Centro di Riferimento Oncologico
Centro di Riferimento per l’Epidemiologia e la Prevenzione Oncologica in Piemonte
European School of Oncology
Fondazione “Edo Ed Elvo Tempia Valenta” Onlus
Fondazione IRCCS “Istituto Nazionale dei Tumori”
Istituto Nazionale Tumori Regina Elena
Lega Italiana per la Lotta contro i Tumori - Roma
Solterre-Strategie di Pace Onlus

JAMAICA
Jamaica Family Planning Association

JAPAN
Aichi Cancer Center
Asia Cancer Forum
Chiba Cancer Center
Foundation for Promotion of Cancer Research
Fukuoka Foundation for Sound Health
Group Nexus Japan
Higashi Sapporo Hospital
Hokkaido Cancer Society
Japan Cancer Society
Japan Lung Cancer Society
Japan Society of Clinical Oncology
Japan Society of Gynecologic Oncology
Japanese Breast Cancer Society
**OUR MEMBERS**

Japanese Cancer Association (JCA)
Japanese Foundation for Cancer Research (JFCR)
Japanese Foundation for Multidisciplinary Cancer Treatment
Jikei University School of Medicine
Kanagawa Cancer Center
Mie University Hospital
Miyagi Cancer Center
National Cancer Research Center - Japan
Niigata Cancer Center
Osaka Medical Center for Cancer and Cardiovascular Disease
Princess Takamatsu Cancer Research Fund
Saga Medical Center Koseikan
Saga-ken Medical Centre Koseikan
Salifama Cancer Center
Sapporo Cancer Seminar Foundation
Sasaki Foundation
Shizuoka Cancer Center
Tochigi Cancer Center
Tokyo Metropolitan Komagome Hospital

**KYRGYZSTAN**
Public Foundation “Ergene”

**LATVIA**
August Kirchenstein Institute of Microbiology & Virology
Limfomas Pacientu Atbalsta

**LEBANON**
Lebanese Cancer Society

**LITHUANIA**
Kraujas
National Cancer Institute - Lithuania

**LUXEMBOURG**
Een Häerz fir Kriibskrank Kanner
Ministère de la Santé - Luxembourg
The Fondation Kriibskrank Kanner

**MACEDONIA, REPUBLIC OF**
Fondation Akbaraly
Union Malagasy Contre le Cancer

**MALAYSIA**
Breast Cancer Welfare Association
Cancer Research Malaysia
Malaysian Oncological Society
Max Family Society Malaysia
National Cancer Council (MAKNA)
National Cancer Society of Malaysia
Pink Ribbon Wellness (L) Foundation

**MALI**
Association de Lutte contre le Tabac, l’Alcool et les Stupéfiants
Association de Lutte Contre les Maladies Cancéreuses (ALMAC)
Simasoh-Nani International

**MALTA**
Action for Breast Cancer Foundation

**MARTINIQUE**
Association Martiniquaise pour l’information et l’orientation Familiales

**MAURITANIA**
Association Mauritanienne de lutte contre le cancer
Association pour la Santé Prévventive de la Femme
Association pour Mieux Vivre avec le Cancer Gynécoologie
Ligue Mauritanienne de Lutte Contre le Cancer

**MAURITIUS**
Leukaemia Foundation
Link to Life

**MEXICO**
Asociación Gerardo Alfaro A.C.
Asociación Mexicana contra el Cancer de Mama AC “Fundación Cimab”
Asociación Mexicana De Leucemia y Gist A.C.
Asociación Mexicana de Lucha Contra el Cáncer A.C.
Fundación Mexicana para la Planeación Familiar, A.C.
Fundacion Nacional de Pacientes con Linfomas no Hodgkin (FunaLinH)
Fundación Rebecca De Alba, A.C.
Instituto Nacional de Cancerología - México Sociedad Mexicana de Oncología, AC (SMeO)

**MOROCCO**
AMAL (Association des malades atteints de leucémies)
Association de Soutien des Cancéreux de l’Oriental
Association SOS Face Marrakech
Hôpital Cheikh KHALifa Ibn Zaid
Lalla Salma Foundation - Cancer Prevention and Treatment
Université Mohammed VI des sciences de la santé

**MYANMAR**
Cancer Association of Namibia
Shwe Yang Hnin Si Cancer Foundation

**NEPAL**
B.P. Koirala Memorial Cancer Hospital
Cancer Society Nepal
Nepal Cancer Relief Society (NCRS)
Tulasi Maya Memorial Cancer Relief Foundation
Children’s Cancer Foundation

**NETHERLANDS (THE)***
IKNL Integraal Kankercentrum Nederland
Childhood Cancer International (CCI)

**Dutch Cancer Society**
Erasmus MC Cancer Institute
European Waldenström Macroglobulinemia Network (EWMNetwork)
LymflikikerkankerVereniging Nederland
Wereld Kanker Onderzoek Fonds (WCRF NL)

**NEW ZEALAND**
Cancer Society of New Zealand Inc.

**Netherlands**
Leukaemia & Blood Cancer New Zealand

**NICARAGUA**
Asociación Pro-Bienestar de la Familia Nicaragüense
Fundación Alas de Vida

**NIGERIA**

**NORWAY**

**PAKISTAN**

**PERU**

**PHILIPPINES**

**PORTUGAL**

**QATAR**

**RUSSIA**

**SAUDI ARABIA**

**SLOVAKIA**

**SLOVENIA**

**SOUTH AFRICA**

**SOUTH KOREA**

**SPAIN**

**SRI LANKA**

**SWEDEN**

**SWITZERLAND**

**TAIWAN**

**TURKEY**

**UKRAINE**

**UNITED ARAB EMIRATES**

**UNITED KINGDOM**

**UNITED STATES**

**URUGUAY**

**VENEZUELA**

**VIETNAM**

**WALES**

**YEMEN**

**ZAMBIA**

**ZIMBABWE**

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**JORDAN**
King Hussein Cancer Center
King Hussein Foundation

**KAZAKHSTAN**
Almaty Oncology Centre
Kazakh Research Institute of Oncology/Radiology

**KENYA**
Aga Khan University Hospital
Childhood Cancer Initiative
Henzo Kenya
Hope Beyond Cancer Trust
Kenya Cancer Association
Kenya Hospices and Palliative Care Association (KEHPCA)
Kenya Medical Research Institute
PECA-Kenya
YOUTH AGAINST CANCER IN KENYA (YACK)

**KOREA, REPUBLIC OF**
Asian Society of Gynecologic Oncology
Korean Cancer Association
Korean Society for Radiation Oncology (KOSRO)
National Cancer Center - Korea
Yonsei Cancer Center

**KOSOVO**
Kosova Task Force for Cancer Control (KTCC)

**KWAIWAIT**
Kuwait Society for Preventing Smoking and Cancer (KSSCP)
NGER
Société Nigérienne de Cancérologie
SOS Cancer Niger
SOS Tabagisme
TATALLI
Tous Unis Contre le Cancer

NIGERIA
Breast Without Spot (BWS) Initiative
Campaign for Tobacco Free Youths
CancerAware Nigeria
Care Organisation Public Enlightenment (COPE)
Ego Bekee Cancer Foundation
Nigerian Cancer Society
Partnership for Eradication of Cancer in Africa
Sebekcey Cancer Care and Support Centre
Society of Oncology and Cancer Research of Nigeria
Tobacco Control Foundation of Nigeria.
(NGA Tobacco Control Alliance)

NORWAY
Norwegian Cancer Society

OMAN
National Oncology Centre, the Royal Hospital, Muscat

PAKISTAN
Cancer Patients’ Welfare Society (CPSW) NIMRA
Children Cancer Foundation Pakistan Trust
Pakistan Atomic Energy Commission (PAEC)
Shaukat Khanum Memorial Cancer Hospital & Research Centre
The Children’s Hospital Lahore Pakistan & Paediatric Palliative Care Group

PALESTINE, STATE OF
Augusta Victoria Hospital
Palestinian Oncology Society
Patient’s Friends Society-Jerusalem

PANAMA
Asociación Nacional Contra el Cáncer
Asociación Panamérea para el Planeamiento de la Familia
Hospital del Niño de Panamá

PAPUA NEW GUINEA
Papua New Guinea Cancer Foundation
Papua New Guinea National Cancer Centre

PARAGUAY
Centro Paraguayo de Estudios de Población
Haematology and Pediatric Department, Faculty of Medical Sciences, National University of Asunción

PERU
Instituto Nacional de Enfermedades Neoplásicas (INEN)
Liga Peruana de Lucha contra el cáncer
ALIADA
Oncosalud S.A.C.
Instituto Peruano de Paternidad Responsable
Instituto de Oncología & Radioterapia de la Clínica Ricardo Palma
Luz de Esperanza

PHILIPPINES
Cancer Warriors Foundation, Inc
Philippine Cancer Society
Philippine Children’s Medical Center
The Cancer Institute Foundation, Inc.
Touched By Max

POLAND
International Hereditary Cancer Center
Polish Lymphoma Association

PORTUGAL
Instituto Português de Oncologia de Coimbra Francisco Gentil, EPE
AEOP - Portuguese Association Oncology Nurse
Associação Portuguesa Contra a Leucemia (APCL)
Associação Portuguesa de Leucemias e Linfomas (APL)
Liga Portuguesa Contra o Cancro

PUERTO RICO
Asociación Puertorriqueña Pro-Bienestar de la Familia

ROMANIA
Association P.A.V.E.L.

RUSSIAN FEDERATION
Equal Right to Life
N.N. Blokhin Russian Cancer Research Center
Petrov Research Institute of Oncology
Society for Assistance to People with Oncohematologic Disease
The National Society of Pediatric Hematologists and Oncologists

SAINT KITTS AND NEVIS
Nevis Family Planning Association
St. Kitts Family Life Services Association Ltd.

SAINT LUCIA
St. Lucia Planned Parenthood Association

SAINT VINCENT AND THE GRENADINES
St. Vincent Planned Parenthood Association

SAMOA
Samoa Cancer Society Inc.

SAUDI ARABIA
Ministry of Health - Saudi Arabia
Saudi Cancer Society
Sheikh Mohammed Hussain Al-Amoudi Center of Excellence in Breast Cancer (SMHA-CEDC)
Zahra Breast Cancer Association

SENEGAL
Association Cancer du Sein du Sénégal
Hôpital Aristide Le Dantec, CHU Dakar
Institut pour la Formation et la Recherche en Urologie et en Santé de la Famille
Ligue Sénégalaise de Lutte Contre le Cancer

SERBIA
Kosovo Association of Oncology - KAO
LIPA Lymphoma Patient Association
Serbian Society for the Fight Against Cancer

SIERRA LEONE
Crusaders Club Ministry Sierra Leone
MEPS Trust Well Woman Clinic

SINGAPORE
Leukemia & Lymphoma Foundation
National Cancer Center - Singapore

SLOVAKIA
Lymfoma Slovakia
Slovak League Against Cancer

SLOVENIA
Association of Slovenian Cancer Societies
Ljubljana Institute of Oncology
Slovenian Coalition for Public Health, Environment and Tobacco Control

SOUTH AFRICA
African Organisation for Research & Training in Cancer (AORTIC)
Campaigning for Cancer
Cancer Association of South Africa
People Living with Cancer (PLWC)
PinkDrive
WiA - Women in Action

SPAIN
Asociación Española Contra el Cáncer
AEAL, Asociación Española de Afectados por Linfoma, Meloma y Leucemia
Institut Català d’Oncologia
Société Internationale de Sénologie - SIS
Vall Hebron Institut of Oncology (VHIO)

SUDAN
The Radiation & Isotopes Centre Khartoum (RICK)
SURINAME
Stichting Lobi

SWEDEN
Blodcancerföreundet
Cancer Society in Stockholm
Swedish Cancer Society - Cancerfonden

SWITZERLAND
European Society for Medical Oncology (ESMO)
Fondation ISREC
GAVI Vaccine Alliance
Ho/Ho - Schweizerische Patientenorganisation für Lymphombetroffene
und Angehörige
International Extranodal Lymphoma Study Group (IELSG)
International Society for Geriatric Oncology (SIGO)
SIOP International Society of Pediatric Oncology
Swiss Cancer League

SYRIAN ARAB REPUBLIC
Association Médicale Franco-Syrienne

TAIWAN, PROVINCE OF CHINA
Formosa Cancer Foundation
Hope Foundation for Cancer Care

TANZANIA, UNITED REPUBLIC OF
Medical Women Association of Tanzania
Ocean Road Cancer Institute

THAILAND
Department of Pediatrics, Faculty of Medicine, Prince of Songkhla University
MaxSmiles
National Cancer Institute - Thailand
Thai Pediatric Oncology Group
The Wishing Well Foundation
Udon CML Patient Supporting Group

TOGO
Association pour la Promotion de la Santé et du Bien-Etre Social (APSBES)
Ligue Togolaise Contre le Cancer

TRINIDAD AND TOBAGO
Family Planning Association of Trinidad and Tobago

TUNISIA
Association des Malades du Cancer
Association SELIMA
Association Tunisienne Contre le Cancer
Association Tunisienne d'Assistance aux Malades du Cancer du Sein
Association Tunisienne de Soins Palliatifs - Gabès
Association Tunisienne des Sages-Femmes
Association Tunisienne des Soins Palliatifs

TURKEY
Fondation des Enfants Atteints de la Leucémie
Help Those With Cancer Association
Istanbul University Oncology Institute
KÖKDER
Ministry of Health - Turkey
New Hope in Health Organization - SUVAK
Turkish Association for Cancer Research and Control (TACRC)
Turkish Society for Radiation Oncology
Turkish Society of Lung Cancer
Turkish Society of Medical Oncology
Urooncology Society in Turkey

UGANDA
Bless a Child Foundation
Uganda Cancer Society
Uganda Women’s Cancer Support Organization (UWOCASO)

UKRAINE
Ukrainian Public Association for Patients with Chronic Lymphoproliferative Diseases

UNITED ARAB EMIRATES
Friends of Cancer Patients
Positive Cancer Foundation

UNITED KINGDOM
Cancer Research UK
European Oncology Nursing Society (EONS)
Leukaemia CARE
Lymphoma Association
Macmillan Cancer Support
World Cancer Research Fund (WCRF UK)
World Cancer Research Fund International (WCRF)
World Child Cancer

UNITED STATES
American Association for Cancer Research - AACR
American Association for Cancer Support, Inc
American Cancer Society
American Childhood Cancer Organization
American College of Surgeons
American Institute for Cancer Research
American Society for Clinical Pathology (ASCP)
American Society for Radiation Oncology (ASTRO)
American Society of Clinical Oncology (ASCO)
Basic Health International, Inc
Campaign for Tobacco-Free Kids
Cancer Africa
CancerCare
C-Change
Centers for Disease Control and Prevention (CDC)
Chicago Blood and Cancer Foundation
College of American Pathologists
Cutaneous Lymphoma Foundation
Dana Farber Cancer Institute
Dr Susan Love Research Foundation
Fred Hutchinson Cancer Research Center
Harvard Global Equity Initiative
International Cancer Expert Corps (ICEC)
International Myeloma Foundation
International Partnership for Reproductive Health
International Planned Parenthood Federation
Western Hemisphere Region
International Psycho-Oncology Society (IPOS)
International Waldenstrom’s Macroglobulinemia Foundation (IWMF)
JHPIEGO Corporation
John Wayne Cancer Foundation
Leukemia & Lymphoma Society
LIVESTRONG Foundation
Love Hope Strength Foundation
Lymphoma Research Foundation
Massey Cancer Center
Melanoma Research Foundation
Memorial Sloan Kettering Cancer Center
Missouri Cancer Registry & Research Center,
University of Missouri School of Medicine
Dept. of Health Management & Informatics
National Cancer Coalition, Inc.
National Cancer Institute - USA
National Foundation for Cancer Research
North American Association of Central Cancer Registries
Oncology Nursing Society
PATH
Patients Against Lymphoma (PAL)
Pink Ribbon Red Ribbon
Prevent Cancer Foundation
RTI International
Society of Gynecologic Oncology (SGO)
St. Baldrick’s Foundation
St. Jude Children’s Research Hospital
Susan G. Komen for the Cure
T-Cell Leukemia Lymphoma Foundation
The George Washington University Cancer Institute
The Max Foundation
The University of Texas MD Anderson Cancer Center
University of Colorado Cancer Center
University of Hawaii Cancer Center
University of Pennsylvania Radiation Oncology
UW Carbone Cancer Center

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URUGUAY
Asociación Uruguaya de Planificación Familiar (AUPF)
Comisión Honoraria de Lucha contra el Cáncer
Comisión Pro Fomento Vecinal Plaza Cuauhtémoc
Fundación Porsaleu
Grupo Linfoma Uruguay
Hospital de Clínicas “Dr. Manuel Quintela”

VENEZUELA, BOLIVARIAN REPUBLIC OF
Sociedad Anticancerosa de Venezuela
Fundación Hemato-Oncológica Guyana (Fundahog)
Asociación Venezolana de Amigos con Linfoma
Asociación de Ayuda a Pacientes Hemato-Oncológicos “ASAPHE”
Asociación Civil de Planificación Familiar

VIET NAM
Can Tho Oncology Hospital
Ho Chi Minh City Oncological Hospital
Breast Cancer Network Vietnam

VIRGIN ISLANDS, BRITISH
BVI Family Life Association

VIRGIN ISLANDS, U.S.
Virgin Islands Family Planning Association

YEMEN
National Cancer Control Foundation

ZAMBIA
Cancer Diseases Hospital
Zambian Cancer Society

ZIMBABWE
Cancer Association of Zimbabwe - Harare Branch

UICC uses ISO 3166-1 as a reference to name countries. ISO 3166-1 is part of the ISO 3166 standard published by the International Organization for Standardization (ISO), and defines codes for the names of countries, dependent territories, and special areas of geographical interest.
UICC thanks its portfolio of dedicated partners, without whom the organisation could not carry out its work.
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