

# World Cancer Declaration 2025–2035



*The **World Cancer Declaration 2025–2035** calls upon governments and policymakers to take decisive action to reduce the global cancer burden, promote equitable access to prevention, diagnosis, treatment, and care, and fully integrate cancer control into global health and sustainable development agendas.*

The first World Cancer Declaration was launched under the leadership of UICC at the World Cancer Congress in Washington, 2006. It was further refined and adopted at the World Cancer Leaders' Summits in Geneva, 2008, and again in 2013 to align with the WHO Global Action Plan for the Prevention and Control of Non-Communicable Diseases (2013–2020).

This new Declaration covers a ten-year horizon (2025–2035) and has been developed through multiple rounds of consultation with UICC members, partners, and the UICC Board of Directors. It focuses on actions that can drive measurable progress in cancer control globally over the next decade, drawing on evidence from published studies, international initiatives, and expert guidance.

Like its predecessor, the World Cancer Declaration provides governments, UN agencies, civil society, and the private sector with a shared vision and common framework to address the global cancer burden and advance progress toward equitable and resilient health systems.

## 5x5x5 by 2035 framework

Built around a “5 × 5 × 5 by 2035” model, the Declaration sets out five global targets, five action domains, and five core principles to guide national adaptation. Recognising the diversity of health systems and resources worldwide, these are voluntary, adaptable commitments intended to inspire country-specific strategies that reflect local needs and capacities.

**By 2035, the UICC community will work together to achieve:**

### Five global targets

#### 1. 25% reduction in global cancer mortality

Achieve a one-quarter reduction in global cancer mortality through integrated policies that strengthen prevention, early detection, and equitable access to high-quality treatment and palliative care. This target aligns with global commitments under the **UN Sustainable Development Goals (SDG 3.4)** to reduce premature mortality from non-communicable diseases and reaffirms cancer as a priority within the global health and development agenda.

#### 2. 30% reduction in exposure to major cancer risk factors

Reduce population exposure to the leading preventable causes of cancer – including tobacco use, alcohol consumption, air pollution, HPV and Hepatitis B infections, unhealthy diets, and physical inactivity – through evidence-based public health policies and the implementation of WHO technical guidance and global best practices.

### **3. 60% of cancers are diagnosed at an early stage**

Increase the proportion of cancers diagnosed at an early or more treatable stage — with a focus on those cancers for which evidence-based early detection and screening programmes exist, such as breast, cervical, colorectal, liver, and oral cancers. Strengthening early detection systems will also enhance diagnostic capacity, public awareness, and health system readiness for other cancers, driving broader improvements in timely cancer diagnosis and care.

### **4. 80% of facilities providing cancer care have essential medicines, diagnostics, and technologies available**

Ensure that cancer treatment facilities have consistent access to essential cancer medicines, diagnostics, and technologies, enabling safe, effective, and affordable care across the cancer continuum and reducing disparities in access between and within countries.

### **5. 50% of countries include essential cancer services in Universal Health Coverage (UHC) packages**

Support countries to progressively integrate essential cancer services into their UHC benefit packages by 2035. This includes the phased inclusion of prevention, early detection, treatment, rehabilitation, and palliative care services. Integration should be designed to reduce financial hardship for individuals and families affected by cancer, ensuring that access to quality care does not lead to catastrophic health spending or impoverishment.

Together, these five global targets define a shared vision for measurable progress in cancer control by 2035. Achieving them will require coordinated action across health systems, guided by equity, evidence, and sustainability. To this end, the Declaration identifies five key areas that represent the major mechanisms through which these targets can be achieved.

## **Five areas for action**

Coordinated investment in the following five areas can strengthen cancer care delivery across disease types and at every level of the health system.

### **1. Planning and implementation**

Develop and implement comprehensive national cancer control plans that are current, evidence-based, and fully costed, with clear budgets, timelines, and monitoring and evaluation frameworks.

### **2. Cancer information systems**

Establish and strengthen robust, population-based cancer data systems to track cancer incidence, mortality, stage at diagnosis, treatment outcomes, and key risk factors. Reliable, high-quality data provide the foundation for informed decision-making, resource allocation, and performance monitoring.

### **3. Research and innovation**

Increase investment in cancer research and innovation to accelerate the development and equitable uptake of prevention, early detection, and treatment solutions. Strengthening research capacity, including implementation and health systems research, will drive locally relevant, evidence-based policies and programmes.

### **4. Education and training**

Scale up education, training, and continuous professional development to build and sustain a skilled cancer workforce. Investing in capacity-building ensures quality of care, fosters leadership, and supports the long-term resilience of cancer control systems.

### **5. People-centred care**

Actively engage individuals and communities — especially those with lived experience of cancer — in the design, implementation, and evaluation of cancer control efforts. Embedding people-centred approaches promotes trust, improves service uptake, and ensures that cancer care is equitable, respectful, and responsive to the needs of all populations.

The successful achievement of the World Cancer Declaration's targets and action domains depends not only on what we do, but on how we do it. The following five core principles reflect the values that unite the UICC community and should guide all efforts to advance cancer control —

ensuring that action is equitable, evidence-based, collaborative, sustainable, and accountable.

## Five core principles

These principles underline the core values of the UICC community and should guide the work of UICC and its members in achieving the global targets:

### 1. Equity

Ensure that cancer programmes and services are accessible to all populations, regardless of socioeconomic, geographic or other disparities.

### 2. Collaboration

Promote transparent, accountable partnerships across sectors—including government, civil society, and the private sector—ensuring due diligence and alignment with public health goals.

### 3. Evidence

Ground policies and interventions in robust scientific research and data.

### 4. Sustainability

Develop long-term, scalable solutions across the continuum of prevention, early detection, treatment, palliative and supportive care and survivorship.

### 5. Accountability

Secure political will and establish mechanisms for monitoring and accountability.

The World Cancer Declaration 2025–2035 represents a renewed global commitment to reduce the burden of cancer and close the care gap. Guided by equity, collaboration, evidence, sustainability, and accountability, and through coordinated action across countries and sectors, we can accelerate progress toward a future where every person, everywhere, has access to quality cancer prevention, treatment, and care.



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