





GC/67/13

13 March 2025

Governing Council Sixty-seventh Session

Lyon, 6–8 May 2025 Hybrid format

## SHOWCASE OF IARC FLAGSHIPS

1. IARC is proud to present the **IARC Flagship session**– an interactive session designed to engage members of the Governing Council by showcasing IARC's ten flagship Programmes and key achievements. This initiative aims to enhance awareness, foster dialogue, and strengthen partnerships in support of IARC's mission to advance cancer research worldwide.

2. The IARC Flagship session is a pivotal step in reinforcing the Agency's commitment to transparency, excellence, and partnership in cancer research. By bringing science to life through dynamic interactions, IARC aims to inspire and engage its Governing Council members to champion the agency's vital mission in cancer prevention and control.

3. Purpose and Objectives:

The IARC Flagship session will serve as a unique opportunity to:

- Highlight IARC's most impactful flagship Programmes and their contribution to global cancer research.
- Provide a comprehensive overview of ongoing projects, major achievements, and future directions.
- Facilitate direct interaction between Governing Council members and IARC experts.
- Strengthen the visibility of IARC's strategic priorities and scientific excellence.
- Encourage collaboration and investment from Participating States.
- 4. Format and Structure:

The session will feature dedicated interactive sessions, each representing a flagship programme. These interactive sessions will include:

- Visual displays illustrating key findings and milestones.
- Informative materials such as brochures, videos, and infographics.
- Live demonstrations of selected tools, databases, and methodologies.
- Opportunities for one-on-one discussions with IARC scientists and project leaders.

- 5. Flagship Programmes on Display:
  - → The Global Cancer Observatory (GCO)
  - → The Global Initiative for Cancer Registry Development (GICR)
  - → The Mutographs project
  - The EPIC project
  - The CanScreen5 project
  - → World Code Against Cancer Framework
  - → The IARC Monographs Programme
  - → The WHO Classification of Tumours
  - → The IARC Handbooks Programme
  - → The IARC Learning Programme
- 6. Expected Outcomes:

By participating in the IARC Flagship session, Governing Council members will gain a deeper understanding of IARC's scientific impact and strategic priorities. The event will foster stronger connections between IARC and its stakeholders, paving the way for greater support, collaborations, and resource mobilization to advance cancer research globally.

# IARC Flagship programmes: an overview

## Pillar 1: Data for action

## 1. The Global Cancer Observatory (GCO)

### **Overview and Impact**

The Global Cancer Observatory (GCO), developed, maintained and hosted by IARC, serves as an interactive web-based platform presenting global cancer statistics critical for informing cancer control planning worldwide. The GCO provides a dynamic visualization of cancer indicators, developed through our cutting-edge descriptive research programme, and serves to highlight the evolving scale, epidemiological profile, and global impact of cancer.

The GCO stands as a pivotal resource in the global fight against cancer, offering invaluable data and insights that drive evidence-based public health policies and strategies. Through its comprehensive and interactive platform, the GCO continues to empower stakeholders worldwide in their efforts to reduce the global cancer burden.

The **GLOBOCAN** project, a key component of the GCO, traces its origins to the early-1980s, when pioneering cancer epidemiologists at IARC recognized that the sheer diversity in cancer patterns around the world warranted increasingly granular levels of investigation, as population-based cancer registration expanded internationally. Over the years, the project has evolved, incorporating increasingly refined methods and comprehensive data sources to offer detailed, estimates of cancer incidence, mortality, and prevalence in 185 countries.

## **Objectives and Audience**

The GCO aims to enhance the accessibility and usability of cancer data for a wide audience, including public health professionals, researchers, policymakers, and stakeholders involved in cancer prevention and control.

## **Recent Developments**

Since the launch of the GCO in 2016, the platform has continuously expanded its scope and functionality. The Cancer Today subsite, for instance, includes GLOBOCAN estimates now for 36 cancer types. Other subsites, such as Cancer Tomorrow, Cancer Causes, and Cancer Survival, provide tools for predicting future cancer trends, estimating population attributable fractions for major risk factors, and analysing survival proportions, respectively. An interactive tool quantifying the impact of sustainable cervical cancer strategies that are specifically adapted to the unique demographic and healthcare needs of 78 transitioning countries on the road to cervical cancer elimination has recently been added.

## **Methodology and Tools**

GLOBOCAN data are derived from high-quality sources, including population-based cancer registries and national mortality statistics. The estimates are produced using a bottom-up approach, ensuring accuracy, transparency, and reproducibility is upheld. The platform is updated

biennially, with the most recent estimates published in 2022; estimates for 2024 will be released early in 2026.

## **Governance and Collaboration**

The continued development of the GCO is managed by the Cancer Surveillance Branch (CSU). CSU is responsible for data collection, validation, analysis, interpretation, and dissemination of core cancer indicators worldwide. The GLOBOCAN project relies heavily on the international collaboration of population-based cancer registries worldwide.

## **Global Reach and Impact**

The GCO has made significant contributions to global cancer surveillance, particularly in low- and middle-income countries (LMICs). Initiatives such as the Global Initiative for Cancer Registry Development (GICR) have improved national estimates, but as importantly, have led to more robust cancer registration systems in regions like sub-Saharan Africa, enhancing local cancer surveillance and informing national cancer control strategies.

## **Public Health and Policy Influence**

By providing detailed statistics on cancer incidence and mortality, the GCO supports public health decision-makers in prioritizing cancer prevention and control measures. The GLOBOCAN 2022 estimates, for example, revealed that there were nearly 20 million new cancer cases and 9.7 million cancer deaths globally in 2022, with lung cancer the leading cancer type worldwide, highlighting the urgent need for targeted investments in cancer prevention.

## Pillar 1: Data for action (Continued)

## 2. The Global Initiative for Cancer Registry Development (GICR)

The Global Initiative for Cancer Registry Development (GICR) is an ambitious and comprehensive programme aimed at enhancing cancer surveillance worldwide, particularly in LMICs. By fostering collaboration among a wide array of international and national agencies, the GICR aims to improve the quality, coverage, and use of cancer data to inform effective cancer control and prevention strategies. The programme prioritizes population-based cancer registries (PBCR) due to their significant role in comprehensive cancer control.

## **Governance Framework**

The GICR programme operates as a multi-partner collaborative initiative that includes organizations such as the World Health Organization (WHO), the International Association of Cancer Registries (IACR), St. Jude Children's Research Hospital (SJCRH), Bloomberg Philanthropies and Vital Strategies. This governance structure is tiered across three strategic, interconnected areas:

- Global: focuses on overall programme governance, coordination among partners to provide effective assistance, creating global good such as the GICR e-learning modules and accelerating regional capacity building through the IARC GICR Hubs and the GICR*Net*.
- Regional: involves coordinating work plans through the IARC GICR Hubs, leveraging the IARC-GICR Centres of Expertise with a focus on training and capacity building and linking to the normative work of WHO Regional Offices.
- Country: providing targeted support to countries by implementing quality improvement plans, conducting site visits and follow-ups through collaborative agreements.

An example of how the GICR is building sustainable support led within each region that are local institutions is the recent launch of three IARC-GICR Centres of Expertise in collaboration with Vital Strategies in sub-Saharan African countries. The Centre in Nairobi, Kenya, focuses on training in cancer registration, while one in South Africa based in the South Africa National Cancer Registry (SANCR) is sharing skills in data linkages and childhood cancer, and the Centre in Cote d'Ivoire at the Abidjan PBCR provides broad assistance to Francophone PBCR in Central and Western Africa.

## ChildGICR

In June 2020, IARC formed a bilateral agreement with St. Jude Children's Research Hospital to launch the **ChildGICR project**. Apply the model developed within the GICR, this extension aims to build childhood cancer surveillance capacities in LMICs through implementation, education, and research. Among the key activities to date have been virtual networking workshops with local stakeholders in Georgia, Mexico, South Africa, and Viet Nam to develop data quality improvement plans, and the formation of the GICR*Net* regional trainers specialized in childhood cancer surveillance.

## Pillar 2: Understanding the causes

#### 1. The Mutographs project

The Mutographs project, initiated in 2015 under the Cancer Grand Challenge, aims to uncover the mutational processes driving cancer by analysing genomes across various cancer types and global populations. The project has a wide-reaching impact, spanning 27 countries and involving over 8000 patients. Major objectives include cataloguing mutational signatures, investigating geographical variations in cancer incidence, and developing computational tools for global researchers.

#### **Key Achievements**

- Identifying new mutagenic exposures and that are common and potentially affecting millions of individuals across the world.
- Illustrating that non-mutagenic exposures may be driving high incidence of many cancers.
- Providing evidence that genotoxic bacteria may be important for colorectal cancer, and may be causing the increasing incidence among young adults.
- Creating a comprehensive biobank and making genomic data publicly accessible.
- Training researchers and engaging in public advocacy to inform cancer prevention policies.

#### **Global Collaboration**

The project involves a vast network of over 46 medical centres across five continents, including key institutions like the Wellcome Sanger Institute, University of California, San Diego, and IARC. This collaboration bridges high-income countries (HICs) with LMICs, ensuring an inclusive focus on cancer burdens across diverse populations.

#### Methodology

Mutographs employs a rigorous methodological process involving sample collection, wholegenome sequencing, advanced computational analysis, and in vitro and animal studies. The project also emphasizes open data sharing, ensuring that all findings are accessible to the wider scientific community.

#### Impact on Public Health

The project's findings have significant implications for public health policies. By identifying mutagenic exposures and understanding the role of chronic inflammation and tissue damage in cancer progression, Mutographs informs global cancer prevention strategies and screening protocols.

The Mutographs project has made groundbreaking contributions to cancer research, reshaping scientific understanding of cancer causation, and providing invaluable resources and tools for future research and public health initiatives.

## Pillar 2: Understanding the causes (Continued)

## 2. EPIC

The European Prospective Investigation into Cancer and Nutrition (EPIC) is a large-scale study designed to explore the complex interactions between diet, nutrition, lifestyle factors, and their effects on cancer risk and other chronic diseases. Initiated in the 1990s and coordinated by IARC, the project spans 9 European countries and includes over 490 000 participants.

EPIC has significantly advanced scientific research and public health by providing a vast dataset for studying cancer risk, mortality and chronic diseases. The project's findings have influenced public health policies, nutrition guidelines, and consumer behaviours, making it a cornerstone of cancer prevention research in Europe.

## Objectives

EPIC aims to identify risk and protective factors for cancer, providing evidence-based recommendations to guide cancer prevention strategies. The study targets researchers, public health professionals, and policymakers.

#### **Key Milestones**

- EPIC began with the creation of biobanks, harmonization of data, and standardized dietary and lifestyle questionnaires.
- As of 2016, over 74 000 participants have been diagnosed with cancer, contributing to significant research on various cancer types.
- Integration of genome-wide association studies (GWAS), metabolomics and proteomics has expanded molecular research within EPIC.

## **Research Methodology**

EPIC employs a prospective design, collecting data before disease onset. Participants with diverse dietary and disease patterns were recruited from 1993 to 1999, with biological samples stored in IARC's biobank for future studies.

## **Findings and Impact**

EPIC's research has resulted in over 3000 scientific papers, uncovering key findings such as:

- Links between diet, lifestyle, and cancer risk.
- Impact of dietary components like dietary fiber, alcohol intake, fat, and fruits and vegetables on cancer and chronic diseases.
- Support to the development of public health policies and guidelines, including the Nutri-Score food labelling system.

## Governance and Collaboration

EPIC (<u>https://epic.iarc.who.int/</u>) is coordinated by the Nutrition and Metabolism Branch (NME) at IARC, in collaboration with scientists at Imperial College London, UK. The study involves a comprehensive network of European countries, each contributing to research on diet, cancer, and chronic diseases. The EPIC-Europe Steering Committee oversees project activities, supported by specialized Working Groups.

## Pillar 3: From understanding to prevention

## 1. The CanScreen5 project

The CanScreen5 project is a global initiative led by IARC to enhance the quality and impact of cancer screening programmes. This project supports programme managers and health professionals in evaluating, benchmarking, and improving cancer screening efforts worldwide. CanScreen5 has now successfully collected data from 114 countries, covering breast, cervical, and colorectal cancer screenings disseminated through the project website <a href="https://canscreen5.iarc.fr">https://canscreen5.iarc.fr</a>.

## **Data Collection and Validation**

Data for the CanScreen5 project is mainly sourced from the Ministries of Health in participating countries. To ensure accuracy and reliability, this information undergoes a peer-review process by the **Scientific Committee** and is validated by data providers. The collected data highlights substantial heterogeneity in programme organization and performance, with screening coverage and outcomes differing widely among countries.

## **International Collaboration**

CanScreen5 collaborates with key partners, including the American Cancer Society (ACS), the Centre for Global Health Inequalities Research (CHAIN, Norway), the Union for International Cancer Control (UICC), the Sabin Vaccine Institute and WHO Regional offices among others. Data collection in Europe is supported by a grant from the European Commission.

## Training and Capacity Building

Prior to data collection, CanScreen5 conducts hybrid training sessions, combining webinars and in-person workshops, to enhance the capabilities of screening programme managers to be able to monitor and improve quality of screening programs. These sessions are held periodically across different regions, each involving 15-20 participants per session. Training materials are made freely available on the IARC Learning platform (https://learning.iarc.fr/edp/courses/pgm-cancer-screening).

## **Impact and Future Directions**

By providing validated performance indicators and supporting programme managers to take action based on such indicators, the project seeks to improve outcomes and impact of screening programmes globally. Future directions include inclusion of new countries, updating existing data, providing technical guidance on improving screening information systems to enhance evaluation mechanisms, identify the specific essential and desirable elements currently missing for each cancer programme.

CanScreen5 aims to enhance the effectiveness and impact of cancer screening programmes worldwide. Moving forward, the project seeks to:

- Expand data collection efforts and include new cancer sites (lung, gastric, prostate).
- Provide technical guidance to improve screening information systems especially in the LMICs.
- Strengthen organisation of existing cancer screening programmes.
- Foster international collaborations to drive sustainable improvements in screening.

## Pillar 3: From understanding to prevention (Continued)

## 2. World Code Against Cancer Framework

#### Overview

The World Code Against Cancer Framework (WCACF) is an multistakeholder initiative led by IARC to promote cancer prevention globally by developing Codes Against Cancer to targeted to regions of the world. These Regional Codes provide evidence-based recommendations designed to reduce cancer incidence and mortality through primary and secondary prevention. Specifically, they propose actions and proven effective interventions on lifestyle determinants, environment and occupation, cancer-causing infections and screening.

The WCACF aims to transfer the latest evidence from etiological cancer research and preventive interventions into actionable information on primary and secondary prevention of cancer at three levels: recommendations to the public, recommendations to policymakers, and knowledge dissemination resources to health professionals and cancer prevention advocates. The WCACF was inspired by the European Code Against Cancer (ECAC), first published in 1987 and updated in subsequent editions (the 5<sup>th</sup> to be launched in 2025). The success of the ECAC led IARC to expand the initiative globally, addressing regional differences in cancer patterns, risk factors, and healthcare systems' infrastructure. The first regional adaptation outside the EU was the 1<sup>st</sup> edition of the Latin America and the Caribbean Code Against Cancer (LAC Code), launched in 2023.

#### Objectives

Serve as an umbrella strategy (the WCACF) to develop or update independent Regional Codes Against Cancer:

- 1. Provide simultaneously (the Regional Codes): lay educational guidance for the public on primary and secondary prevention of cancer
- 2. a policy instrument for policy-makers on primary and secondary prevention of cancer
- 3. knowledge dissemination resources for health professionals and cancer prevention advocates

## **Target Audience**

The Regional Codes are intended for:

- Specific set of recommendations for the public
- Specific and complementary set of recommendations for policymakers
- Additional knowledge translation materials for front-line healthcare professionals and cancer advocates
- Peer-reviewed publications for the scientific community

## **Methodology and Tools**

The methodology includes:

- Expert scientific assessment and revision of the literature on lifestyle determinants, environmental and occupational determinants, cancer-causing infections and related interventions, and cancer screening.
- Targeted systematic evidence reviews as requested by the experts.
- Advise on communication from health literacy and behavioural change experts.
- Public engagement through testing the draft recommendations while they are being developed.
- Stakeholder engagement in all stages of the process (planning, development, dissemination and evaluation of impact of Regional Codes).
- Innovative dissemination strategies.
- Evaluation of impact.

Recommendations are developed by regional expert working groups, reviewed by a regional Scientific Committee, and supported by a regional Advocacy Group; all under the coordination and supervision of the IARC Secretariat.

#### Impact and Global Reach

The WCACF aims to influence the general population and public health policies and guidelines by providing region-specific recommendations tailored to local conditions. It supports governments in integrating cancer prevention strategies into national health policies and aligns efforts with the 2017 World Health Assembly resolution on cancer prevention and control.

#### **Governance Framework**

The WCACF governance involves collaboration among international organizations, regional bodies, expert committees, and public health institutions. Multidisciplinary advisory panels guide the development and periodic revision of recommendations.

## Pillar 4: Knowledge Mobilization

## 1. The IARC Monographs Programme

The *IARC Monographs* Programme is dedicated to identifying and evaluating carcinogenic hazards to humans. It conducts rigorous, systematic reviews of specific agents including chemicals, complex mixtures, occupational exposures, physical agents, biological agents, and nutritional and lifestyle factors. The evaluations support the development of public health policies and regulatory decisions to reduce exposure to potential carcinogens. The *IARC Monographs* Programme remains a cornerstone in global cancer prevention, providing critical data that shapes public health policies and regulatory standards worldwide.

## **Objectives and Target Audience**

The primary objective is to assess carcinogenic hazards to humans and provide scientifically robust evaluations that inform public health policies and regulatory decisions globally. This programme is invaluable to policymakers, regulatory agencies, public health officials, researchers, and industry professionals.

## **History and Evolution**

Since its inception in 1971, the *IARC Monographs* Programme has published 135 volumes and evaluated more than 1050 agents, with over 550 classified as *carcinogenic*, *probably carcinogenic*, or *possibly carcinogenic* to humans. The methodology has evolved to include advances in scientific methodologies, with the 2019 update introducing key characteristics of carcinogens to integrate mechanistic evidence more comprehensively.

## **Methodology and Tools**

The comprehensive evaluation process involves international Working Groups of expert scientists who systematically review publicly available evidence across multiple streams: studies of cancer in humans, studies of cancer in experimental animals, and mechanistic evidence. The process is transparent and includes strict management of conflicts of interest. The evaluations are classified into four categories based on the strength of evidence for carcinogenicity: Group 1 (*carcinogenic to humans*), Group 2A (*probably carcinogenic to humans*), Group 2B (*possibly carcinogenic to humans*), and Group 3 (*not classifiable as to its carcinogenicity to humans*).

## **Global Reach and Impact**

The *IARC Monographs* have influenced cancer prevention policies and research priorities globally. They have been cited extensively in US regulations and EU legislation, affecting industries, environmental standards, and public health initiatives. Recent evaluations, such as those for occupational exposure as a firefighter and opium consumption, have led to significant policy actions and awareness campaigns.

## **Collaborative Network**

The *IARC Monographs* Programme collaborates with the global cancer research community, contributing to significant projects and maintaining strong connections with agencies like the United States National Toxicology Program and the European Chemicals Agency.

## **Future Directions**

The *IARC Monographs* Programme continues to prioritize evaluating emerging carcinogenic hazards, enhancing its digital presence, and taking a leading role in refining methodologies for evidence evaluation. Future efforts include developing the IARC-MonDO database to provide easy access to *Monographs* content and integrating early-career and visiting scientists from LMICs into the programme.

## Pillar 4: Knowledge Mobilization (Continued)

## 2. The WHO Classification of Tumours

The WHO Blue Books Programme, now in its sixth edition, is an essential tool in the global fight against cancer, providing standardized, evidence-based classifications that enhance diagnosis, treatment, and research worldwide. Managed by IARC since the third edition, these volumes provide a comprehensive classification of tumours based on morphological features and ancillary test results, such as immunohistochemistry and molecular genetics. This effort supports the provision accurate diagnosis of tumours including cancers for appropriate therapies, development of targeted treatments, and further research, impacting a range of professionals from pathologists to public health officials.

## **Mission and Target Audience**

The primary objective of the Blue Books Programme is to offer a standardized approach to tumour classification, assisting in the diagnosis, treatment, and research of cancer. It serves a diverse range of professionals, including pathologists, oncologists, surgeons, radiologists, molecular geneticists, cancer researchers, epidemiologists, and public health officials. The fifth edition emphasizes molecular markers and genetic mutations (which will be carried forward to the sixth edition) critical for understanding tumour behaviour and response to treatment.

## **Global Reach and Impact**

The Blue Books Programme is internationally recognized, with widespread use among professionals across continents. Initiatives like the International Collaboration for Cancer Classification and Research (IC3R) and partnerships with leading pathology organizations enhance its global impact, promoting universal standards for tumour classification. The programme also bridges the gap between High-Income Countries (HICs) and LMICs, ensuring equitable access to high-quality diagnostic tools and resources.

## **Innovations and Methodology**

The blue books use a relational database for regular updates and integrates digital technologies, such as whole slide imaging (WSI), enhancing accessibility and utility. The methodology involves a collaborative editorial process with contributions from international experts, ensuring the classifications are evidence-based and applicable in diverse healthcare settings.

## Collaborations

The programme collaborates with various international pathology organizations and public health entities, such as the Union for International Cancer Control (UICC) and the American Joint Committee on Cancer (AJCC).

## **Future Perspectives**

The continuous evolution of the Blue Books Programme is driven by scientific advancements and a commitment to global health equity. Mechanisms are in place to include experts from LMICs in the development process and to adapt classifications to their specific needs underscoring the programme's dedication to inclusivity and relevance.

## Pillar 4: Knowledge Mobilization (Continued)

## 3. The IARC Handbooks Programme

The *IARC Handbooks of Cancer Prevention* Programme, established in 1995 and relaunched in 2014, is dedicated to providing comprehensive reviews and consensus evaluations of cancer prevention interventions. The programme's primary objective is to assess the potential of various preventive measures, from lifestyle changes to community-wide interventions, in reducing cancer incidence and mortality.

## **Objectives and Audience**

The IARC Handbooks target a broad audience, including governments, health-care professionals, researchers, NGOs, and advocacy groups. Public health authorities utilize the scientific evidence presented to shape national cancer control policies and programmes. Clinicians and public health experts utilize the information for their clinical practice, while the research gaps identified guide researchers to explore new research avenues. NGOs and advocacy groups leverage this evidence to promote cancer prevention strategies and advocate for policy changes.

## **Methodology and Tools**

IARC employs a rigorous and transparent process for developing the Handbooks, engaging international expert Working Groups in synthesizing available evidence into consensus evaluations. The systematic reviews include primarily epidemiological studies and occasionally experimental studies, using clear criteria to assess cancer-preventive effects. Evaluations consider benefits, harms; aspects of cost-effectiveness, feasibility, and health equity impact may also be reviewed.

## **Global Impact and Reach**

The IARC Handbooks have a significant impact on global cancer prevention policies. National and international health agencies have used the evaluations in developing evidence-base recommendations. Recent volumes specifically targeted LMICs, enhancing representation and training capacity in these regions. The programme's work has influenced guidelines such as the WHO Framework Convention on Tobacco Control and screening recommendations for various cancers.

In collaboration with WHO and other international bodies, the IARC Handbooks bridge to both high-income countries and LMICs, contributing to global cancer prevention efforts.

## Pillar 4: Knowledge Mobilization (Continued)

## 4. The IARC Learning Programme and the Summer School

IARC offers a comprehensive Learning Programme aimed at contributing to lifelong learning of cancer researchers and health professionals globally, with a particular emphasis on LMICs. This initiative, aligning with IARC's mission to promote cancer prevention through education and capacity-building, has three main components.

#### Learning and teaching resources

The <u>IARC Learning portal</u> serves as a centralized access point for a diverse array of resources, currently organized into thematic platforms, each developed in collaboration with IARC research groups and key partners. The portal offers various types of materials, including self-paced modules, facilitated courses, lectures, webinars, manuals, guidelines, and more. In collaboration with the WHO Academy, the IARC Learning Portal is being further developed as a global single-entry point to learning and teaching resources on cancer research for cancer prevention.

#### Learning events & IARC Summer School

The IARC Summer School is a biennial program designed to enhance global cancer research by providing comprehensive education and practical training to professionals in the field.

Launched in 2005, the Summer School was initiated with two core objectives: training researchers from LMICs and providing opportunities for international collaborative studies. Over the years, the Summer School has evolved to address the changing needs of cancer research, offering invaluable opportunities for skill development, knowledge-sharing, and international collaboration. Other IARC learning events include webinar series, or courses organised in the frame of research projects (e.g. CanScreen5, CHRONOS, etc.). Over 30 learning events are organised each year, targeting over 1500 researchers and health professionals worldwide.

## Partnerships for dissemination and impact

To leverage the impact of IARC's learning events and resources, regional learning centres have been developed, starting with the IARC-NCC China Learning Centre et the IARC-Brazil Learning Centre. Beside the organisation of IARC Summer School modules in the respective regions, Learning Centres activities include: the identification of relevant academic and professional entities in related countries that have the potential to use IARC learning and teaching resources as part of their curricula; the organisation of other IARC courses, such as for example CanScreen5, and/or the development of new learning resources. The set up of other similar regional partnerships is considered.

Besides regional learning centres described above, and building on existing collaborations, the Programme identifies relevant academic and professional entities in Participating States and LMICs, which can integrate IARC learning resources into their curricula: Masters of public health, Masters of international health, Masters of oncology, continuing education learning offers for general practitioners, oncology nurse curricula, oncology speciality learning paths, etc.

#### Governance

The Learning and Capacity-Building Branch (LCB) oversees IARC Learning, coordinating educational initiatives (such as the IARC Summer School) and securing diverse funding sources.