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**PROPOSED PROGRAMME AND BUDGET  
2026–2027**

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## **FOREWORD BY THE IARC DIRECTOR**

The proposed Programme and Budget for the biennium 2026–2027 constitutes a critical step in advancing the vital mission of the International Agency for Research on Cancer (IARC). This document reflects not only our strategic priorities (IARC Flagships) and achievements but also our ongoing efforts to adapt and thrive in a challenging global landscape.

The history of IARC has been one of remarkable scientific achievements, but it has also been marked by budgetary constraints that have tested our resilience. Over the years, we have made significant strides in addressing these challenges including through the adoption of the Zero Nominal Growth approach. However, as the burden of cancer continues to grow, so too does the demand for innovative research, collaboration, and action. This has necessitated a shift in how we approach budgeting and planning.

The Programme and Budget 2026–2027 introduces a new way of presenting our budgetary and scientific priorities. While it does not allow for a direct comparison with previous biennial budgets, this format provides more meaningful insights into the scope and impact of IARC's research. It reflects our commitment to transparency and accountability, translating our scientific objectives into clear, budgetary terms.

In preparing this budget, we have drawn on valuable lessons learned from previous budgeting cycles. This proposed Programme and Budget is underpinned by the results-based budgeting approach, which focuses on IARC's results including the Flagships and priority areas. It depicts the full spectrum of the ability of the Agency to deliver on specific outcomes. We have carefully analysed the most vital outcomes, highlighting what would be at stake if they are not delivered and, importantly, what actions the Governing Council can take today to ensure their achievement. This forward-looking perspective underscores our dedication to safeguarding the future of cancer research and prevention.

Over the past biennia, we have implemented measures to enhance the impact of the work of IARC on public health policy in the field of cancer prevention. We have also implemented drastic measures to increase the efficiency and maximize the impact of our resources. These include staff cost savings through organizational restructuring and rigorous human resource planning; administrative streamlining; the transition from printed publications to online formats; and improved travel and teleconferencing management. Our commitment to sustainability is further demonstrated through initiatives such as the Sustainable Financing Agenda of IARC and development of the Investment Case, which will further strengthen our resource mobilization efforts.

This document also celebrates IARC's major achievements, the Agency's convening power, and the pride we take in our contributions to global cancer research. These successes serve as a testament to the dedication of our staff and the unwavering support of our partners and stakeholders.

I am confident that this proposed Programme and Budget not only reflects IARC's strategic vision but also equips us to address the pressing challenges of the future. It is submitted for your consideration with the assurance that every effort has been made to uphold the highest standards of diligence, efficiency, and impact.

## **A WORD FROM IARC’S SCIENTISTS**

### **The Journey to Eliminate Cervical Cancer: IARC’s Pivotal Role**

Cervical cancer is one of the most preventable cancers that continues to take the lives of hundreds of thousands of women every year, especially in low- and middle-income countries (LMICs). For decades, IARC scientists have led efforts to monitor, understand and prevent this disease, laying the groundwork for its eventual elimination.

### **The Discovery That Changed Everything**

In the 1970s, cervical cancer was a fatal mystery. In 1976, a German virologist, Harald zur Hausen, discovered that the human papillomavirus (HPV) could be a key factor causing cervical cancer. But the scientific world needed more proof.

This is where IARC made a significant impact. In the 1980s, under the leadership of Dr Nubia Muñoz, a series of pivotal studies were conducted at IARC. The team identified that HPV types 16 and 18 were the primary causes of nearly 70% of cervical cancer cases. This vital evidence led to the classification of these HPV types as carcinogenic in 1995.

### **From Understanding the Problem to Finding Solutions**

Identifying the cause of cervical cancer was just the beginning. IARC then played a crucial role in establishing that HPV vaccination could stop cervical cancer before it begins.

One of IARC’s most significant contributions occurred in 2009–2018. A large HPV vaccine study conducted in India provided evidence that a single dose of HPV vaccine could effectively protect against infection. Informed by IARC’s research, the World Health Organization (WHO) updated its recommendations in 2023 to include a single-dose vaccination option. This finding was a game-changer, making the vaccine more accessible and affordable benefiting millions of girls worldwide.

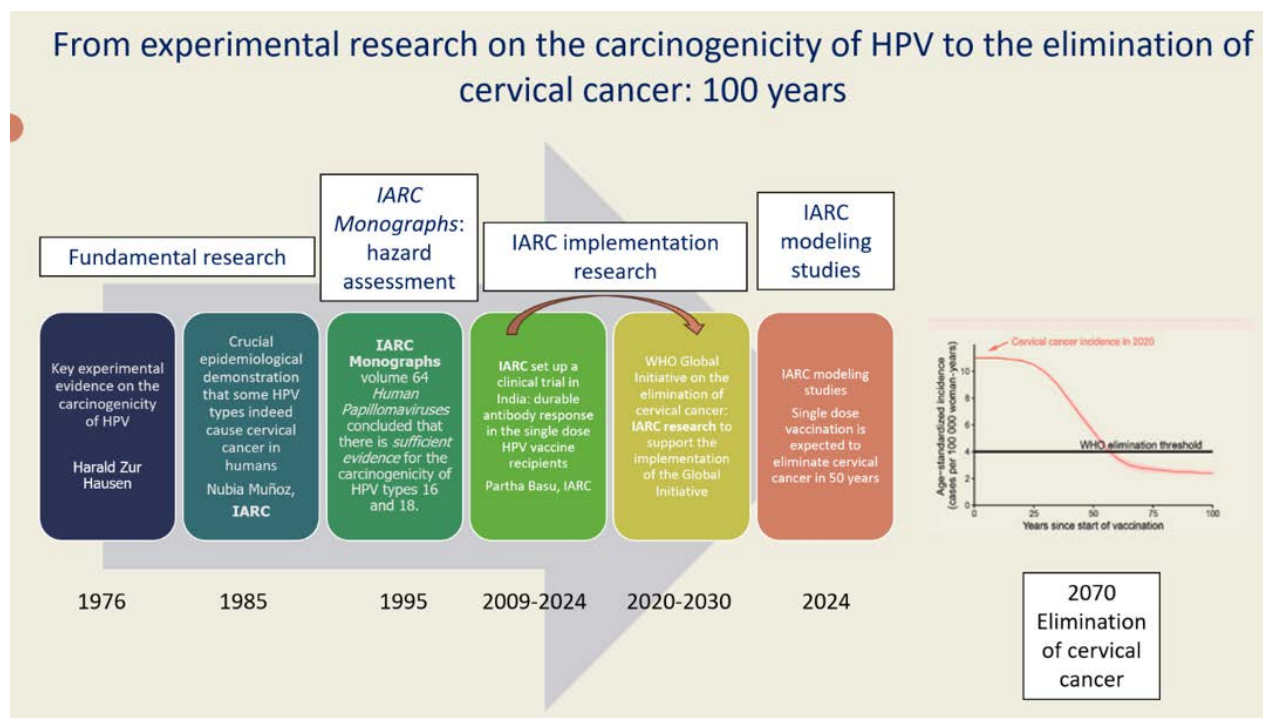
### **A Global Plan to End Cervical Cancer**

Building on decades of research, WHO launched the Cervical Cancer Elimination Initiative (CCEI) in 2020. This global strategy aims to ensure that by 2030:

- 90% of girls are vaccinated against HPV by age 15 years,
- 70% of women are screened for cervical cancer by ages 35 and 45 years,
- 90% of women with precancerous or cancerous lesions receive treatment.

IARC’s work underpins this entire plan, from the data used to set these targets to the tools needed to achieve them.

### Overview of IARC contributions to cervical cancer elimination

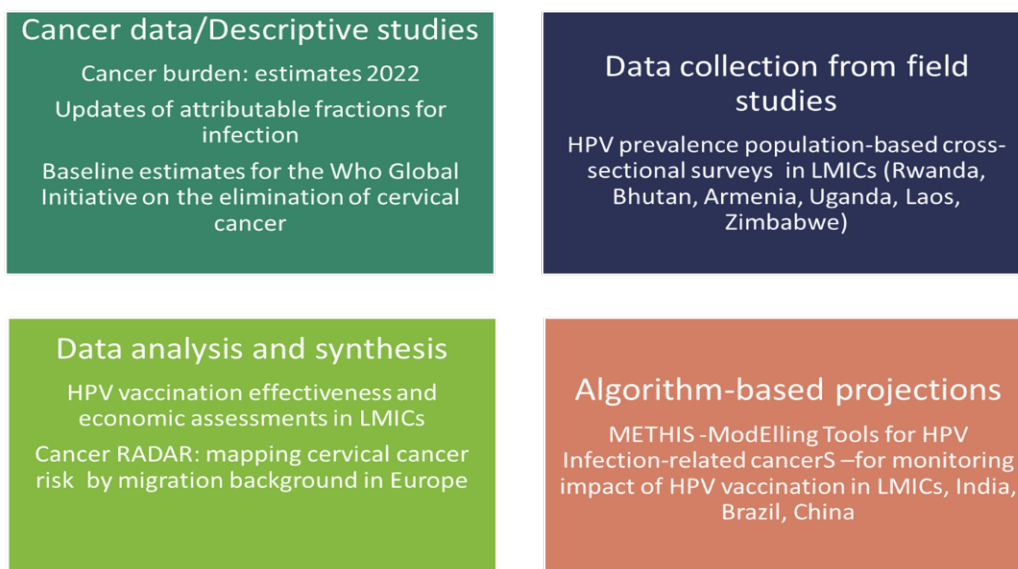


### A Future Without Cervical Cancer

Thanks to the efforts of IARC and its partners, cervical cancer no longer leads to inevitable death. Vaccines, effective screening methods, and better treatment options are now within reach for millions of women.

IARC's work is not over yet. The Agency continues to support countries in implementing these life-saving strategies, ensuring that most vulnerable communities have access to the tools needed to eliminate cervical cancer. This is more than a story of science—it's a story of hope. With IARC's critical contributions the world is much closer to eliminating its first ever cancer.

Today, the main activities of IARC in this field can be represented below in four categories:



### Current scientific activities of IARC on cervical cancer elimination

## 1. Introduction

The growing cancer burden is a major public health challenge with nearly 20 million new cases and 10 million deaths in 2022 alone. IARC predicts global cancer cases to rise up to 35 million by 2050, largely affecting low- and middle-income countries (LMICs). Despite considerable progress, intensified action is needed now to prevent cancer before it begins.

The 2026–2027 biennium is the first to align with IARC’s new Medium-Term Strategy (MTS) for 2026–2030, which is currently under preparation, to be endorsed by the IARC Governing Council in May 2026. The Programme and Budget (PB) for 2026–2027 is designed to support an improved approach towards IARC’s mission of advancing global cancer prevention research and reflects the structure of the new Programme Tree proposed in the MTS 2026–2030.

The new IARC Programme Tree aligns its objectives with the MTS priorities. It includes all Programmes and Projects, forming the basis for the proposed PB 2026–2027.

The topmost level Objective in the new Programme Tree, or the *Level 1 Objective*, reflects IARC’s Mission:

***“To put an end to cancer before it begins”***

The *Level 2 Objectives* reflect the six strategic pillars that define the high-level **priority objectives**:

- 1 - Data for Action
- 2 - Understanding the causes
- 3 - Prevention for Impact
- 4 - Knowledge Mobilization and Sharing
- 5 - Research infrastructure
- 6 - Leadership, governance, and Services to Science

*Level 3* of the new Programme Tree represents the *Programmes* of IARC that underpin the Level 1 and Level 2 Objectives. These Programmes provide a clearer description of IARC’s work over the period of the next five years.

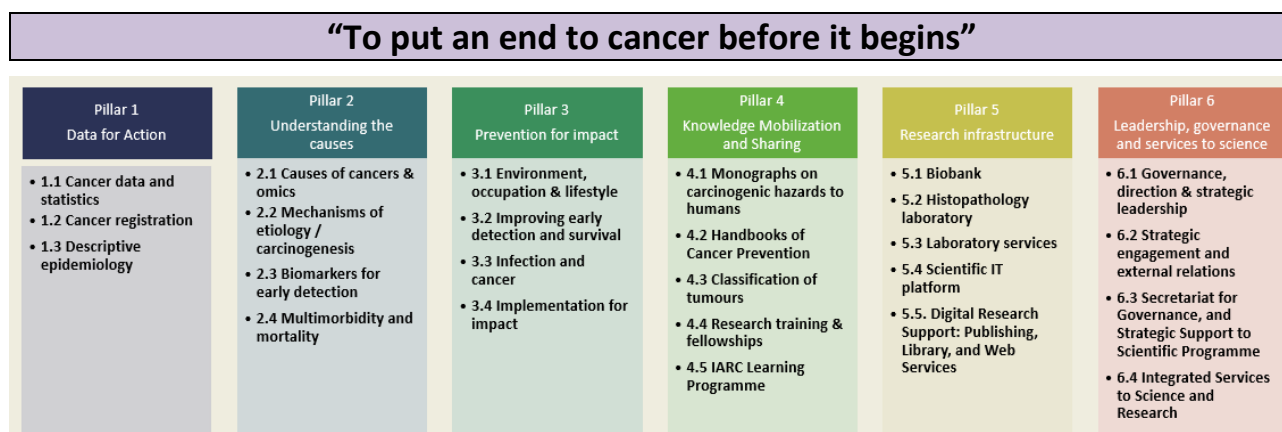


Figure 1: IARC Programme Tree: Level 1, IARC’s Mission; Level 2, Pillars; Level 3, Programmes

## **2. IARC Programme Tree and linkage to the proposed MTS 2026–2030**

The **six objectives of the IARC Programme Tree** are listed below depicting the value chain of IARC as envisioned in the proposed MTS 2026–2030, following from the previous MTS 2021–2025. IARC’s work in cancer research and prevention is driven by four interconnected priorities that together form a continuum of impact. These pillars guide IARC’s mission to reduce the global burden of cancer through evidence, understanding, action, and collaboration. The two additional pillars provide the framework for research infrastructures and the leadership and enabling functions. The description of each of these six pillars is as follows:

### **2.1 Pillar 1 – From Data to Action: Understanding the Cancer Landscape**

The journey of cancer prevention begins with robust data. IARC provides a global map of cancer burden, identifying who develops cancer, where, and when, thus highlighting disparities and trends. This foundational data serves as the starting point for action, offering indispensable insights for decision-making and resource allocation. Through cutting-edge epidemiological studies and cancer registries, the data serves as a catalyst to addressing urgent needs worldwide.

### **2.2 Pillar 2 – Understanding the Causes: Uncovering Why Cancer Occurs**

With the “who, where, and when” established, IARC turns to the “why”. By investigating environmental, occupational, lifestyle, genetic, and infectious risk factors, the root causes of cancer are uncovered. This understanding is critical for identifying populations at risk and for shaping interventions tailored to specific contexts. From pinpointing carcinogenic exposures to unravelling the role of genetics, IARC’s research lays the groundwork for targeted prevention strategies.

### **2.3 Pillar 3 – Prevention for Impact: Finding Solutions That Work**

Understanding the causes leads the IARC scientists towards preventive actions. IARC focuses on identifying and validating prevention strategies that are both effective and scalable. Whether through vaccination programmes, early detection, or reducing exposure to risk factors, IARC ensures that prevention strategies are evidence-based and context-specific. IARC’s goal is clear: to implement interventions that save lives and reduce suffering globally.

### **2.4 Pillar 4 – Knowledge Mobilization and Sharing: Turning Science into Global Action**

Once the data is collected, the causes understood, and prevention strategies identified, the final step is ensuring that this knowledge reaches those who need it most. IARC is committed to sharing its findings with policy-makers, public health practitioners, and the scientific community. Through collaboration, training programmes, and open-access resources, it is ensured that IARC’s research informs policies and actions worldwide, maximizing its impact and fostering a global culture of cancer prevention.



## **2.5 Pillar 5 – Research Infrastructures**

Pillar 5 covers the entire spectrum of IARC’s research infrastructure, which supports all four scientific Pillars in a cross-cutting manner – this includes the budgets for the Biobank, Histopathology laboratory, the IARC Laboratory services, the IARC Scientific IT Platform and IARC Publishing, Library, and Web Services.

## **2.6 Pillar 6 – Leadership, Governance and Services to Science & Research**

Pillar 6 covers the IARC Strategic Leadership and Governance, as well as the Services to Science and Research, covering the entire framework of administrative, legal and financial support to the scientific programmes.

For more information on the programmes under each of these pillars and the related projects, please refer to [Annex 1](#) of this document.

# **3. Programme Budget 2026–2027**

## **3.1 Methodology**

In defining its 2026–2027 biennial budget, IARC is adopting the results-based budgeting (RBB) approach. This changed approach aligns financial resources with the goals of the proposed MTS 2026–2030 and the strategic priorities of the Agency, including the 10 IARC Flagships.

The traditional resource-based model of IARC’s budgeting relied on assured resources (mainly the Regular Budget or Assessed Contributions) and past spending patterns, somewhat limiting the strategic thinking. This issue was highlighted during the 2023 Governing Council when the 2024–2025 budget followed the traditional approach. The new results-based budgeting allows IARC to focus on outcomes and impacts rather than financial constraints, encouraging IARC scientists to think creatively about their goals.

The proposed 2026–2027 programme budget results from a collaborative priority-setting process led by the Director who worked in close consultation with the scientific branch heads and their teams. Through this bottom-up planning exercise, they together identified key programmes and projects aligned with the MTS 2026–2030, applied these priorities to a results framework, and costed the inputs for the budget.

## **3.2 Budget presentation**

With the shift to results-based budgeting for 2026–2027, the budget presentation format has also changed. Previously, budget documents focused on Regular Budget resources and plans. The new format provides a holistic view of work plans, regardless of funding status, allowing the Agency to see how the budget is funded from various sources, i.e. from regular or extra-budgetary funds. This

approach covers core funding, anticipated grants, and other funding avenues, offering a clearer view of IARC’s financial landscape.

This shift reveals a funding gap — a critical element reflecting aspirations or initiatives that might remain unfulfilled due to lack of funding. Highlighting this gap conveys what can be achieved with adequate resources to meet strategic goals. This format improves transparency and aids informed discussions on resource allocation.

### 3.3 Budget overview

The total proposed programme budget of IARC for the biennium 2026–2027 amounts to €114.5 million (see Figure 2). For details of each of the Pillars, please refer to [Budget Tables](#) in Annex 2.

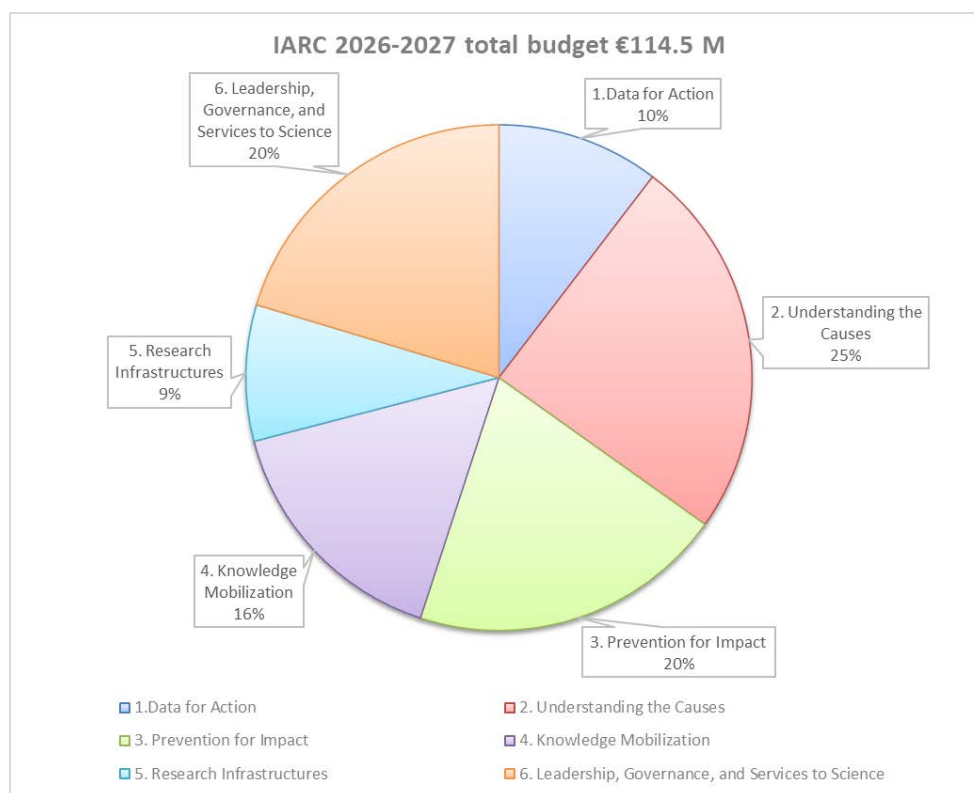
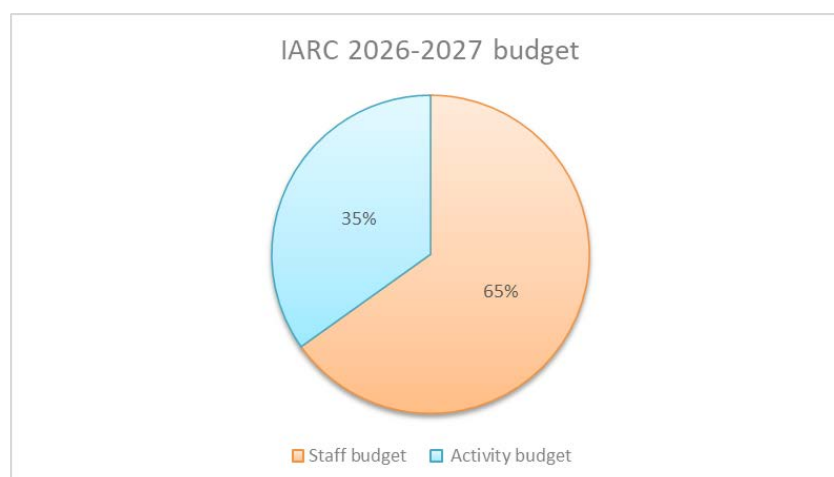


Figure 2: Total Proposed Budget for IARC – Biennium 2026–2027

The €114.5 million reflect the full scope of IARC’s work based on detailed planning and costing, representing the Agency’s aspirations and capacity to deliver results. While the structure of the four scientific pillars (1 to 4) remains mostly unchanged, revisions are proposed to Pillars 5 and 6 in accordance with the proposed MTS 2026–2030. Pillar 5 now covers IARC’s research infrastructure, providing a transparent view of IARC’s cross-cutting scientific infrastructures. Pillar 6 encompasses the enabling functions, offering a clearer overview of the support provided by IARC’s leadership and administrative services. The budget for these services amounts to 20% of the total IARC budget. The proposed budget is split into a staff budget of €74.6 million (65%) and an activity budget of €39.9 million (35%).



*Figure 3: Staff and activity budget for IARC – Biennium 2026–2027*

IARC's human resources are its main assets, forming the largest portion of the budget. The Activity budget covers essential non-staff (goods and services) needed for implementing the IARC Programme. Details for both Staff and Activity budgets are available in the [Budget Tables](#) in Annex 2.

#### **4. Proposed Strategic Investments in the IARC budget: the IARC Flagships**

The **IARC Flagships** are designed to address critical priorities in cancer prevention and control, with the potential to improve global health. These Flagships can help address the global cancer burden through IARC's cutting-edge research, robust data collection, and capacity-building initiatives. They can provide critical resources to researchers and policy-makers, thus shaping global strategies to prevent, diagnose, and treat cancer. They can also offer evidence-based solutions and foster international collaboration to tackle one of the world's leading causes of mortality.

A total of **10 IARC Flagships** have been defined by the Secretariat according to their unique value proposition and impact in the field of cancer prevention research. In addition to high visibility, they are a financing priority for IARC, aimed at accelerating a reduction in the cancer burden, thus ensuring the long-term impact of IARC's work.

IARC Flagships	
Unique value proposition	Flagship
Global database on cancer	<ul style="list-style-type: none"> <li>Global Cancer Observatory</li> <li>CanScreen5</li> </ul>
Large-scale epidemiology and laboratory research on the causes of cancer	<ul style="list-style-type: none"> <li>Mutographs</li> <li>EPIC</li> </ul>
Cancer encyclopaedias	<ul style="list-style-type: none"> <li>Classification of tumours</li> <li><i>Monographs</i></li> <li>Handbooks of cancer prevention</li> </ul>
Training, capacity-building, and empowering cancer research ecosystems	<ul style="list-style-type: none"> <li>GICR</li> <li>Summer school</li> <li>Codes against cancer</li> </ul>

Figure 4: Unique Value Proposition of the 10 IARC Flagships as identified in the proposed MTS 2026–2030

#### 4.1 Importance of IARC Flagships for Ensuring Long-Term Impact

In preparation for the next MTS 2026–2030, the IARC Secretariat has highlighted a part of IARC's research through the 10 Flagships, each of which is designed to address specific gaps in cancer knowledge and control. Some examples along with potential consequences of absence of these Flagships are presented below:

- a) **The Global Cancer Observatory (GCO)** is a vital tool for tracking cancer incidence, mortality, and survival trends, enabling countries to develop targeted interventions based on accurate data. Without this tool, countries would lack access to standardized, reliable data essential for understanding cancer patterns and prioritizing resources. This would impede evidence-based decision-making, especially in LMICs where data gaps are most striking. The absence of robust cancer surveillance systems could delay interventions, allowing preventable cases to escalate unchecked.
- b) **The IARC Monographs** and the **IARC Handbooks of Cancer Prevention** provide authoritative evaluations of carcinogens and prevention strategies, guiding policies that save millions of lives. The loss of such resources would deprive policy-makers and public health officials of critical guidance on environmental and lifestyle carcinogens, potentially leading to weaker regulations and increased exposure to harmful agents.
- c) Programmes like **Mutographs** and **EPIC** enhance the understanding of cancer etiology, offering insights into modifiable risk factors and novel prevention strategies. Stopping these research initiatives would hinder the identification of carcinogens, thus limiting IARC's ability to design effective prevention strategies.
- d) Programmes such as the **Global Initiative for Cancer Registry Development (GICR)** and the **Summer School** empower low- and middle-income countries (LMICs) to develop their research infrastructure and human resources, promoting global equity and

inclusiveness in cancer control. These initiatives support sustainable progress in cancer research and prevention worldwide. Any threats to these programmes could severely affect LMICs, hindering their ability to establish and maintain cancer registries and research infrastructure and worsening the global health disparities.

In essence, without these IARC Flagships, global cancer research would fragment, innovation would slow down, and the capacity to address one of the most pressing public health challenges in current times would diminish. This would mean slower discoveries, weaker prevention measures, and many more avoidable cancer cases and deaths, underlining the vital need for continued investments now.

## 5. Financing of the IARC Budget

IARC’s new financing approach aims at fully funding a realistic programme budget aligned with its programmatic priorities. The Governing Council’s approval of the programme budget in its entirety facilitates the subsequent mapping of available funding through Assessed Contributions (regular budget) and Voluntary Contributions (extra-budgetary funds). The figure below shows the budget distribution into Regular and Extra-budgetary envelopes, proposed to be funded from Assessed Contributions (AC) and Voluntary Contributions (VC) for 2026–2027.

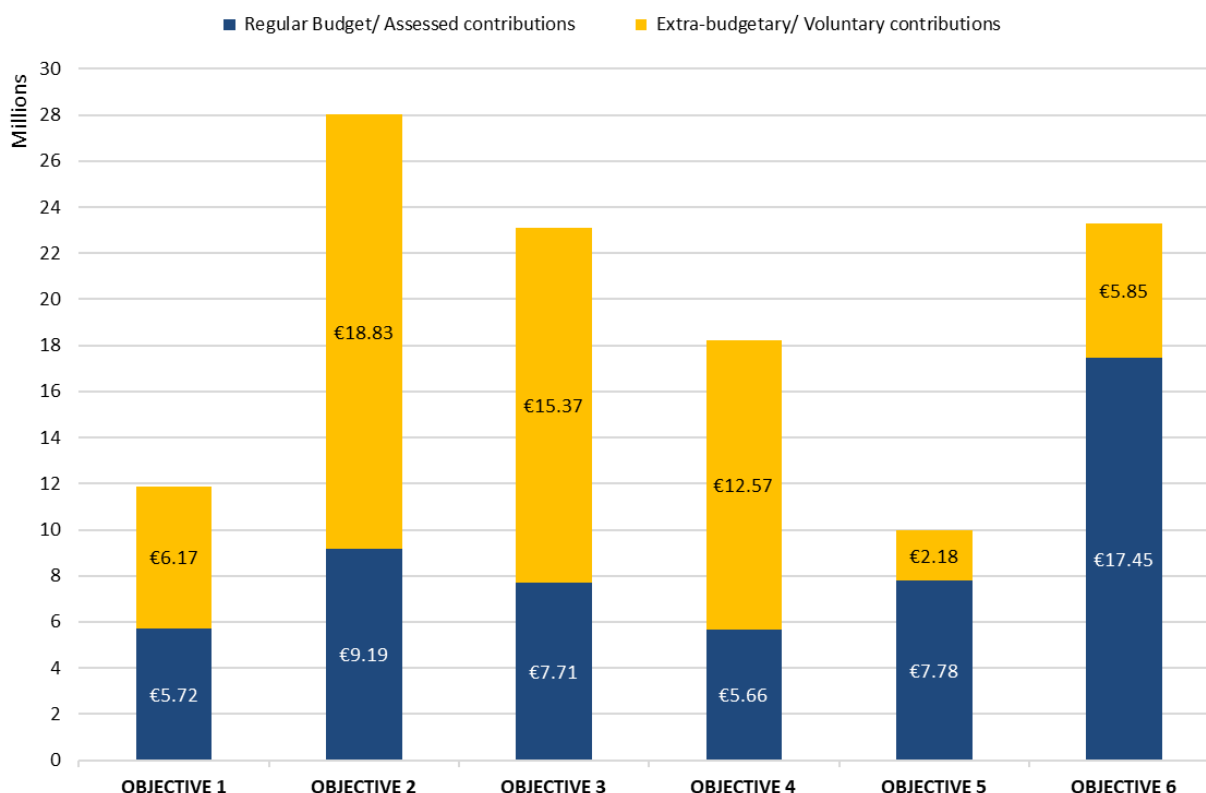


Figure 5: IARC budget 2026–2027, and the distribution of proposed funding between RB/AC & EB/VC

## 5.1 The different sources of financing of the IARC programme budget

### 5.1.1 Assessed Contributions/Regular Budget

The assessed contributions (AC) from IARC Participating States remain the primary and most reliable source of funding for IARC’s programme budget. They fund the Agency’s core programmes that are the foundation of IARC’s innovative cancer research initiatives. They are also proposed to fund parts of the IARC Flagships. The AC funds provide financial stability and flexibility to the Director to fund programmes that do not attract sufficient donor interest, allowing independent and effective implementation of the full programme budget.

The Director proposes an AC of €53.5 million for the biennium 2026–2027. This includes full assessed contributions from IARC’s new Participating States, Egypt and the Kingdom of Saudi Arabia, who will contribute for the first time to the full biennial budget. For the other 27 Participating States, this means an increase of €1.9 million over the total assessed contribution for 2024–2025. The proposed AC accounts for the Agency’s most **urgent** and **indispensable** funding needs, not to accelerate, but to maintain the current level of research activities and the core ability of the Agency to shape the future of cancer prevention. It accounts for only the basic infrastructural and core staffing requirements, for which grant funding is not an option.

The approval of this budget would signify a strong support and recognition of the efforts of IARC’s scientists who continuously and tirelessly strive to combat the rapidly growing burden of cancer. Without this, the Agency will struggle to stay afloat against the challenges of growing inflation rates and unpredictable funding opportunities. It is important to note here that this increase will mark a historic juncture for IARC, when for the first time in 18 years, the Agency would receive an increase in the contribution from its existing Participating States. The figure below provides the historic information about the amount of AC received from existing and new participating states:

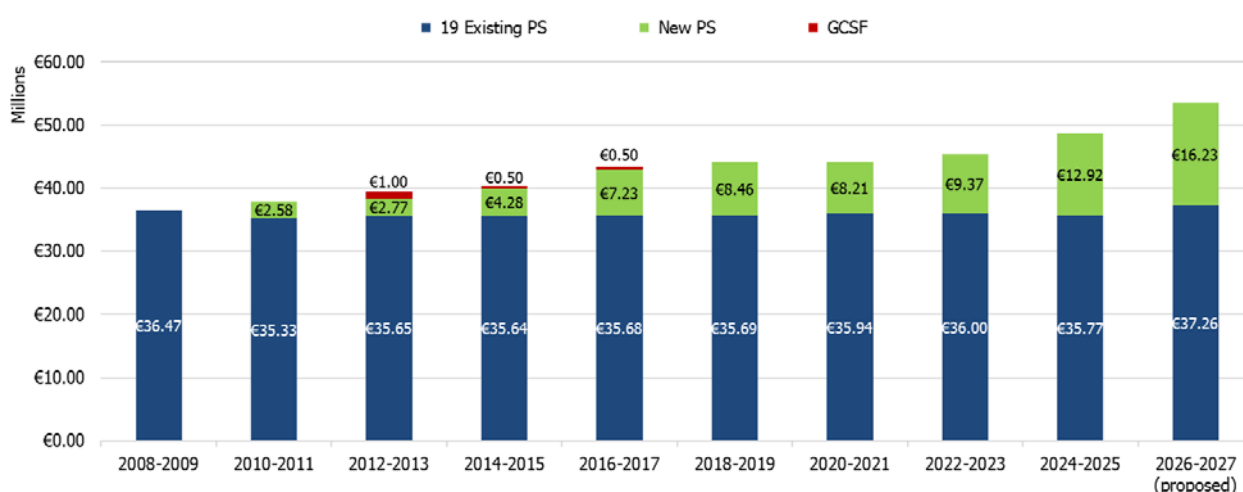


Figure 6: Source of Assessed Contributions for IARC from biennium 2008–2009 to 2024–2025 and the proposal for 2026–2027

### 5.1.2 Voluntary Contributions

Voluntary contributions or Extra-budgetary resources are the second important source of financing for IARC's budget. These funds are primarily generated by IARC's scientists through competitive research grants, as well as direct contribution grants. While IARC is actively engaged in grant applications and has been quite successful in the previous years, these grants cannot be predicted accurately, especially not in terms of which programmes or projects these might fund.

### 5.1.3 Core Voluntary Contributions Account

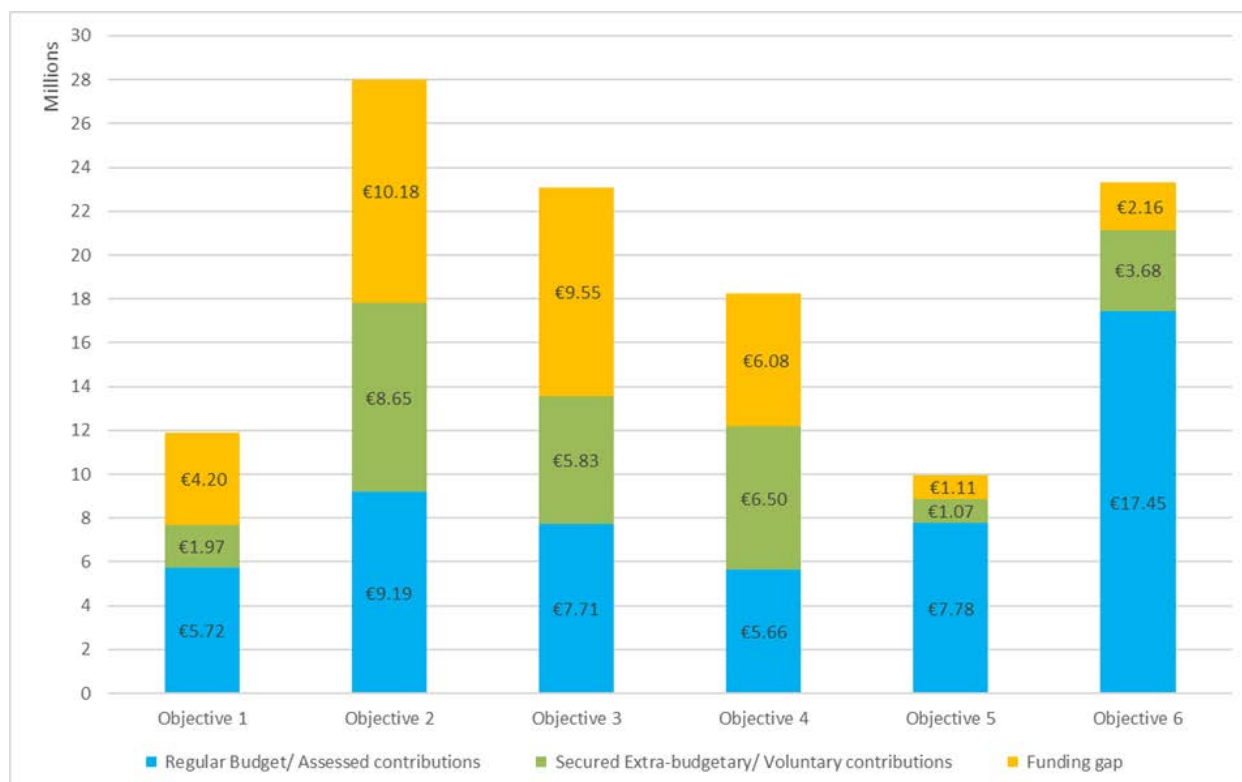
The core voluntary contributions account, comprising fully and highly flexible funds, is becoming an increasingly important component of IARC's financing model. IARC research activities are very dependent on grant funding, as the share of activities funded from assessed contributions has been steadily declining for reasons mentioned earlier. The cuts that were implemented during preparation of the programme budget 2026–2027 have further enforced this development.

While IARC is very grateful to its donors, some areas, including IARC's core programmes and Flagships, do not attract their interest. Therefore, in order to balance this non-flexibility of the grant funds, the Secretariat is soliciting the support of IARC Participating States to provide flexible funds through the Core Voluntary Contribution mechanism. This will allow the Secretariat to allocate resources to under-funded and sometimes unfunded priorities of the Agency.

### 5.1.4 The Financing Summary

The figure below provides an overview of the financing proposal for the programme budget 2026–2027 including the proposed Regular Budget of €53.5 million, the secured extra-budgetary grants available to the Agency at the time of preparation of this budget proposal, and the ultimate funding gap, distributed over the six Objectives or Pillars.

Figure 7: Funding of the IARC 2026–2027 budget: RB/AC, EB/VC and funding gap per scientific objective



## 6. Final remarks

### 6.1 Opportunities to support IARC Flagships – The IARC Flagship Champions

To ensure sustainability and continued impact of IARC Flagships, the Secretariat is inviting Participating States to contribute to specific Flagships that align with their strategic goals and values.

The opportunity to support one or more Flagships provides a focused mechanism to invest in programmes that are central to the fight against cancer. By directing resources to these initiatives, Participating States help reinforce IARC's ability to deliver cutting-edge research and evidence-based solutions in areas of greatest need.

To facilitate these contributions, the Core Voluntary Contribution Account is available as a flexible and transparent funding mechanism. This approach ensures that resources are allocated effectively, directly strengthening the Flagships and their capacity to generate measurable, lasting outcomes.

IARC Participating States are invited to become a **Flagship Champion** now and help put an end to cancer before it begins!

### 6.2 Areas requesting investment

IARC has so far just survived with a zero nominal growth in its budget, which effectively means a decrease in real terms. As costs increase, IARC's purchasing power diminishes each year, challenging the sustainability of current operations and jeopardizing the scope and quality of the Agency's work. This financial strain will have an impact on the following areas that are vital for global public health:

#### 1. Cancer Data Systems

Programmes like the **Global Initiative for Cancer Registry Development (GICR)**, the **Global Cancer Observatory (GCO)** and **CanScreen5** require sustained investment to improve cancer surveillance, especially in low- and middle-income countries. Scaling these programmes down would deprive policy-makers of reliable data, compromising their ability to address cancer effectively and equitably.

#### 2. The IARC Monographs Programme

The *IARC Monographs* are crucial for global cancer prevention, evaluating environmental and lifestyle carcinogens. These evaluations have directly informed national and international health policies, protecting populations from exposure to harmful substances such as asbestos, tobacco, and industrial chemicals. Reducing *Monographs* publications would delay the identification of carcinogenic risks and hinder policy changes, potentially increasing countless preventable carcinogen exposures and raising the global cancer burden.

#### 3. Communication and Dissemination of Research Findings

Insufficient funding will reduce IARC's ability to connect research with actionable policies, such as the *IARC Handbooks* Programme, hindering the translation of scientific findings into public health impact. In addition, the IARC Learning and Capacity-Building activities like the Learning Platform and the Summer School may be scaled down or even closed, significantly impacting LMICs, with already under-resourced cancer control systems.



### **A Path Forward: Why Increased Contributions Are Essential**

Increasing contributions from Participating States are essential for IARC to sustain current activities and expand into important areas like **health economics**. Investing in this research will help Participating States make cost-effective decisions, thus optimizing their cancer control budgets.

With increased funding, IARC can enhance implementation research and capacity-building to benefit the most vulnerable populations. New contributions will help IARC stay an unparalleled global leader in cancer research, prevention, and control.

### **Consequences of Inaction**

Should contributions remain stagnant, the effects will be profound and far-reaching:

- **Loss of Preventive Momentum:** Scaling back the Monographs programme may delay action on emerging carcinogens, increasing avoidable cancer cases.
- **Weakened Global Surveillance:** Gaps in cancer data collection and dissemination will undermine public health planning and accountability.
- **Missed Opportunities in Cost-Effectiveness:** Without health economics research, Participating States may face cost inefficiencies and poorer cancer control outcomes.

**Maintaining the status quo is no longer an option for IARC. Without a boost in funding for its programme budget, invaluable advancements in cancer prevention and research will be eroded. IARC Participating States need to take the decisions now. Decisions that will guarantee the ongoing protection of lives, alleviation of suffering, and groundbreaking innovation in the fight against cancer.**

**This is a pivotal moment for global cancer control, and decisions made now will shape the future of public health for the generations to come.**