



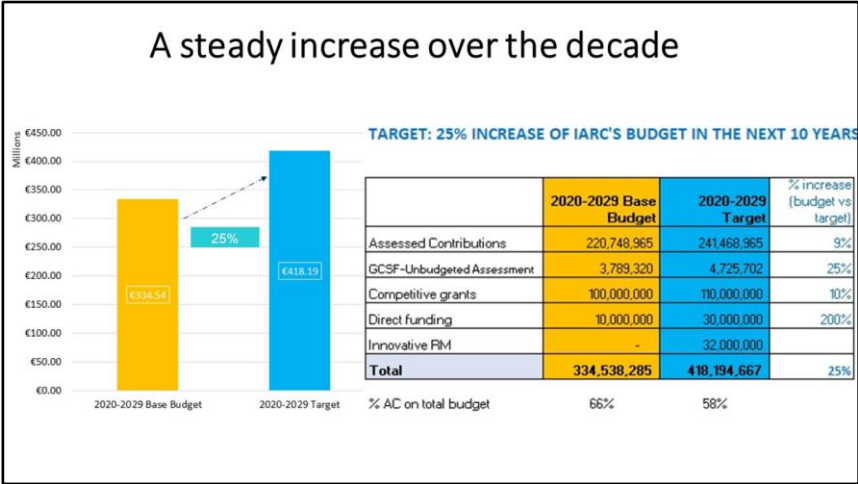
## Resource Mobilization Operational plans

International Agency for Research on Cancer  
Lyon, France



The Resource Mobilization (RM) Strategy that IARC created a few years ago remains relevant and should be extended for the next three biennium at least. It created a sound framework detailing the main priorities to increase the mobilization of resources for the Agency as well as the four enablers that facilitate this task. The diagram on the slide presents this framework in a concise and precise manner.

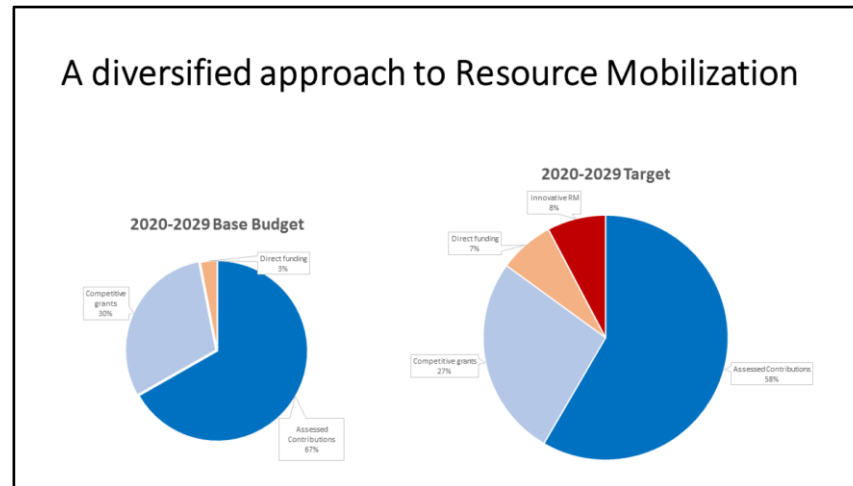
Over the last few months, the IARC Secretariat has worked on creating ambitious but realistic financial projections and an implementation plan for this strategy. We are now confident in these projections and in the income growth the Agency can achieve over the next decade.



Based on these financial projections, it is worth mentioning that:

- The base budget is the projection made based on IARC's current budget. The column "2020-2029 Target" is the actualization of this financial projection, taking into account the Nouveau Centre campaign and the focus on developing new avenues for growth (especially in innovative Resource Mobilization).
- The Agency hopes to have an increase of 25% of its income over the next decade.
- This would translate into €418 million being mobilized from 2020 to 2029 (vs €334 million as per the base budget).
- The assessed contributions and the competitive grants (the two traditional sources of income for IARC) are expected to grow at a pace of around 10% vs the base budget for the whole decade.
- The direct funding and the innovative Resource Mobilization categories see a tremendous increase. They show a six fold increase, from a mere €10 million for the whole 2020–2029 decade, as per the base budget, to more than €60 million for the 2020–2029 target financial projections.

## A diversified approach to Resource Mobilization



We are expecting a more diversified approach to Resource Mobilization.

One of the objectives of IARC will be to open new areas for growth, to approach new donors, to find innovative ways to mobilize new sources of funding. That is why IARC is now starting to diversify its base of supporters.

The main implications of this strategy will be the following:

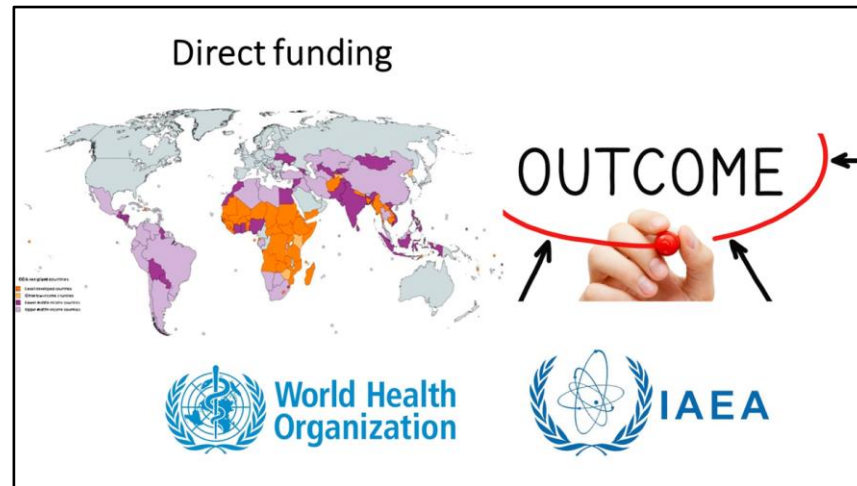
- While the assessed contributions represent 66% or two thirds of the total income in the base budget, their share decreases to 55% only for the last biennium of the 2020–2029 target projections
- The absolute value of assessed contributions is actually increasing but their share decreases (the same goes for income coming from competitive grants, their share decreasing from 30% in the base budget to 23% for the last biennium). This is because new sources of funding are providing additional resources to the organization.
- It is expected that direct funding and innovative resource mobilization will be around 15% of the total income for the decade 2020-2029 and will correspond as much as 22% of all income for the last biennium.



**Assessed contributions.** The assessed contributions represent the membership fees paid by Participating States on an annual basis, based on the budget approved by the Governing Council. The assessed contributions represent the main source of funding for IARC, around two-thirds of the total budget with the base budget as a reference. They constitute the Agency's regular budget that is critical to run the core activities. The Governing Council has voted a zero-growth of overall assessed contributions of existing Participating States while agreeing to the Agency's growing the regular budget through an increase of the number of Participating States.

- As part of the financial projections, the Secretariat is aiming at **one new Participating State (PS) per biennium** (one in 2020/2021, one in 2023, one in 2025, one in 2027 and one in 2029).
  - **The People's Republic of China** (Group 1 country) submitted its application to become an IARC Participating State to WHO Director-General in March 2020. China's admission as a new PS would bring approximately €3.38 million per biennium to the IARC budget (when it pays its full contribution). More importantly, China has the largest cancer population in the world and will bring much value to the Agency's scientific mission.
  - For the remaining, on the conservative side, it was anticipated that these new PS would be Group 5 countries, hence providing a contribution of around €1.2 million per biennium.

- To achieve such results (one new PS per biennium), the Secretariat has worked on a **decentralized strategy, including clear prioritization of countries**. Convincing countries to become IARC PS cannot be the responsibility of the IARC Director only. Most of the IARC senior staff often travel to different countries and can take the opportunity to arrange meetings with high-level officials of different governments; responsibility to attract potential new PS is thus distributed among IARC senior staff.
- The list of potential new PS was also prioritized. The Agency will focus its efforts on a limited number of countries. For each country, a thorough analysis will be done to create a robust investment case and to identify relevant high level contact points within the government. **The support from existing PS in convincing their peers to join forces with us will certainly be of great help**. The priority list includes: Israel, Luxembourg, Mexico, New Zealand, Portugal, Saudi Arabia and South Africa. The Secretariat will update this priority list based on the negative or positive answers IARC will receive to its requests.
- Last but not least, IARC Secretariat has worked on the creation of a renewed investment case for the Agency, compiling all the competitive advantages and the unique selling point that IARC has to offer. This new investment case, in addition to the fact that IARC should soon be recognized as an Oversea Development Assistance (ODA) compliant organization (see below on direct funding for more details), should help in convincing new target countries to become IARC PS.



### Direct funding as a flexible source of funds

This source of income corresponds to **voluntary contributions made by an entity (public or private) to the Agency budget**. It is the consequence of a direct relationship between the donor and the recipient (vs a call for proposal in the competitive grant category). It requires the establishment of a trusted and generally long-term relationship between the donor and the grantee. While more flexible or even unrestricted contributions are preferred, it is worth noting that direct funding is generally allocated to a specific project.

- The projections of the Secretariat estimate that income from direct funding will have a three-fold increase during the 2020–2029 decade (€30 million vs €10 million in the base budget). It is worth mentioning that while direct funding represents only 3% of IARC total base budget now (and 22% for the last biennium), they represent 75% of WHO's.
- Cancer will soon become the number one killer in many countries. The **burden of cancer reflects the inequalities of our world**: 70% of cancer-related deaths happen now in low- and middle-income countries (LMICs). The cost of treatment, the loss of productivity, and the number of premature deaths imply that the economic weight of cancer is by far the highest, compared to other diseases. Ensuring that most cancers can be prevented is the only way for

LMICs to avoid bankruptcy due to cancer. **Cancer thus has an impact on more than just the SDG target 3.4** on noncommunicable diseases. **It has an impact on at least four other SDGs:** 1 (no poverty), 8 (economic growth), 10 (reduced inequalities) and 17 (partnerships).

- The **focus on LMICs**, the clear definition of the outcomes that can be achieved, the autonomous and independence (the Agency's intrinsic values), the reliability and trust of the United Nations system make IARC projects different and very attractive to potential donors.
- IARC should **look beyond its traditional donors** that are mostly part of the medical research ecosystem. Other public or private donors, outside of the cancer-related environment, might be interested in the work done by the Agency as long as they can understand the effect this work will have on the final beneficiaries (especially in LMICs). IARC has to build **long-term relationships with these new donors**, understand their needs and expectations and make itself more visible with this specific target audience.
- As briefly mentioned above, IARC should in principle soon be recognized as an **ODA-eligible international organization**. The Secretariat is now in discussion with the OECD to define more precisely the ratio that can be attributed to ODA for regular budget contributions (most probably defined at 50%). This would mean that **around half of the membership fees from PS will be considered as ODA-compliant** and could thus come from PS Ministries of External Affairs, for example. This could help in getting new countries to become PS but it could also open new avenues for collaboration with existing PS on voluntary contributions. For example, the Medical Research Council of the United Kingdom has made a generous contribution of GBP 1 million in early 2020 for three IARC projects in Africa.
- The Secretariat is currently working on the creation of a **portfolio of around 15 ODA-compliant projects**. Existing PS might be interested in investing in these projects through their development aid budget. The Secretariat will also approach large philanthropic foundations with these proposals





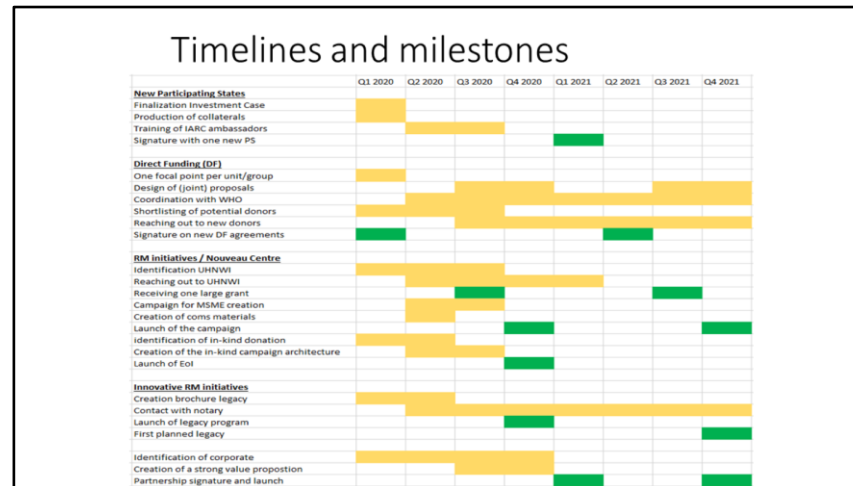
**Innovative Resource Mobilization.** This category of income encompasses two main types of activities: the Nouveau Centre campaign and the resource mobilization activities targeting new donors for the Agency, namely private individuals and corporate donors.

- This is without any doubt one of the possible avenues for growth for the Agency. The Secretariat has estimated that the total amount mobilized from this category could amount to 8% of the overall budget for the 2020–2029 decade. The first three years (2020–2022) will be critical as they should allow mobilizing a substantial amount of funding for the Nouveau Centre.
- All the activities in this category and all discussions with potential donors will be carried out within the WHO Framework of Engagement with Non-State Actors (FENSA).
- For the **Nouveau Centre campaign**, please refer to Document GC/62/8 for a detailed explanation about the target audiences and the medium used to reach them.



- For **private individual donors**, the innovative RM team will create different programmes based on different segments of the population. The first priority will be to create a legacy programme. Many people have witnessed cancer, either as patients or as patients’ relatives and do understand the value of research and prevention, which could save their lives or that of their loved ones. They might be willing to give part of their wealth through a legacy to a cancer prevention research agency. IARC has been receiving legacies in the past, but has not yet established a structured legacy programme. The new legacy programme will increase IARC’s visibility as a possible recipient for such donations. The advantage of this programme is that it does not require excessive start-up investment. A targeted brochure distributed in notary offices can achieve the desired result.
- For its **major donor programme**, IARC will wait for the results of the Nouveau Centre campaign, especially the part focusing on UHNWI (Ultra High-Net-Worth Individuals). The network created during the Nouveau Centre campaign will form the basis of this programme. The objective will be to retain these donors and transform them into champions or advocates for the Agency. They could then become ambassadors and use their influence to convince some of their peers / people from their network to come on board as well.
- For its **corporate strategic partnership programme**, IARC has been producing content over the last few years that is

not destined only to the research community but also to the public in general. The Code Against Cancer, elaborated in collaboration with the European Commission, is the perfect example of this. The recommendations that our nutrition team has developed reflect also the same willingness to have an impact on people's behaviours through IARC research findings. However, except by posting the results of its research on the IARC website, IARC will never have the necessary budget to disseminate those findings to the wider public. What if IARC were to partner with organizations that have that outreach capacity, organizations that have budgets to reach out to the masses? What if IARC were to use the global distribution channels of these organizations, their media power and influence? Collaborating with a mobile phone company for example could help IARC mobilize resources to elaborate a new (region specific) code against cancer. It could **also help IARC disseminate widely the results** of such a code and thus achieve a greater impact by communicating to a large audience about the possible risk factors of cancer, **as well as potentially mobilizing substantial amount of resources**. The same could be said about possible partnerships with cooking recipe websites which reach out to millions of people. Creating a component on their website about nutrition and cancer could increase significantly IARC research finding reach.



A good implementation plan should come with a strong monitoring framework with clear timelines and milestones.

This is the objective of the last slide of this presentation.

Please do focus on the green boxes that represent the milestones for IARC resource mobilization plan.

IARC Secretariat believes that it has now the right strategy and the right implementation plan with clear and achievable, even though ambitious, financial targets.

On the slide with the milestone, it is worth noting that for the first two columns, IARC is on track with the implementation of the new RM strategy:

- We are now finalizing the investment case and the communication materials to convince other potential PS to come on board.
- IARC Secretariat is also very happy to share that it has signed an agreement for direct funding with UK MRC thanks to the valuable support of Dr Palmer. 3 ODA compliant projects focusing on lower-income countries in Africa. As previously mentioned, we are now building a portfolio of 10 of such projects, available for funding.
- IARC is about to sign an agreement with a UHNWI to provide a sizeable grant to the Nouveau Centre. It is unfortunately impossible to disclose the identity of this donor for the moment as the contract is not yet finalized but this should be done

in the next few months.

- Some activities have been delayed due to the Covid19 crisis (launch of the Request for Expression of Interest for the Nouveau Centre or the legacy programme) but the IARC Secretariat has used the lockdown time to prepare all the necessary communication materials to be ready for the later part of 2020.

All in all, IARC can confidently say that it is on track with the plan so far.

## Summary

- Increase of income by 25% for the next decade
- Slight increase of traditional source of funding (10% increase vs base budget for both assessed contributions and competitive grants)
- Sharp increase of new sources of funding: direct funding and innovative RM initiatives (6 fold increase vs base budget)
- Hypothesis:
  - One new Participating State per biennium
  - 2 new direct funding agreement per year, mostly focusing on LMICs
  - Successful three-pronged campaign for the Nouveau Centre
  - Start of innovative RM initiative (legacy program, strategic partnerships)
- We have a strategy, a plan and the energy to make it happen.  
What we also, and most importantly, need is: YOU

Everything is set.

Targets are achievable even in these uncertain times.

New avenues for growth are awaiting to be explored at their fullest.

Coordination with communication is now happening.

Visibility of IARC and its attractiveness will increase drastically.

So what do we need now more than ever?

Your support:

You can be the catalyst that we desperately need to make these targets a reality.

You, as Governing Council members, can help us tremendously.

You can open doors for us, for example:

With Ministry of Health of potential new Participating States;

Or with your own colleagues from your own Ministry of External Affairs or Ministry of Cooperation so we can negotiate with them some direct funding project focusing on LMICs;

Or with a private sector entity you might be in touch with and that could be interested in creating a strategic partnership with us;  
Or with a major donor who wants to leave a legacy and could be interested in our Nouveau Centre project.

Any help, any support, any connection will go a long way in ensuring we can mobilize those resources, that we can ensure the best possible working environment for our researchers so together we can build a world where fewer people develop and suffer from cancer.