



## **Economic and Social Council**

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**Social and human rights questions: social development**

### **Statement submitted by Society to Support Children Suffering from Cancer, a non-governmental organization in consultative status with the Economic and Social Council**

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 30 and 31 of Economic and Social Council resolution 1996/31.



## Statement

Currently, paediatric cancer rates are on the rise globally. We believe that this trend can be reversed through public-private partnership. Prevention and early detection constitute the essence of this outlook. The Society to Support Children Suffering from Cancer, as a charity-care non-governmental organization today providing comprehensive coverage to nearly 90 per cent of all paediatric cancer cases referred to public hospitals in the Islamic Republic of Iran, has inferred many causes of and possible solution pathways for paediatric cancer. On the basis of astonishing results achieved since the Society's inception (paediatric cancer mortality rates reduced from more than 80 per cent to less than 20 per cent in two decades), cultural inclination has shifted from the assumption that paediatric cancer automatically means death to the idea that it can be cured. Progress in genetic sciences means that high-risk populations can be identified. Innovative developments such as social networks can function as penetrative and reliable conduits for sharing information. We have finally reached a stage at which the infrastructure required to combat paediatric cancer is available. Now we can safely declare that, if there is a will, there is a way.

Although none can be considered to be breakthroughs in the traditional sense, the following steps can curtail the rise in paediatric cancer cases by using innovative approaches predicated on available and improving technology:

- (a) Policy prioritization: cancer prevention should become a national priority;
- (b) Food: identifying and clearly labelling cancer-causing food items (possibly with a gold ribbon as the symbol of efforts to combat cancer) and banning such items from school canteens and other State-directed public forums;
- (c) Education: developing and widely distributing related information material; training first-line health providers to identify initial signs of cancer;
- (d) Environment: reducing environmental risk factors such as air pollution elements and chemical pesticides and dioxins resulting from burning waste, bleaching paper, etc.;
- (e) Behavioural: reducing both first-hand and second-hand smoke exposure by significantly raising the price of cigarettes through taxation measures, which can fund many elements of national cancer programmes; proper diet, adequate physical activity and prevention of obesity have shown to lower cancer risks significantly; proper sun protection is a proven preventative measure;
- (f) Health advancements: rendering services that identify cancer-causing genes affordable and widely available, and correlating such services with health services to be provided free or at a discounted rate to high-risk families who adopt safe family planning protocols; diagnostic tests should be provided at a discounted rate;
- (g) Strengthening and encouraging the use of social networks as conduits to raise awareness and disseminate information.

The relative success of such proposals is predicated on the extent of public-private collaboration and commitment advanced by all parties involved, nationally and internationally. The high-level segment is the perfect forum for advancing such ideas and deciding on further steps towards their realization. The Society, as the

single largest comprehensive provider of services to paediatric cancer patients in the Middle East, is fully prepared to embark on such noble paths. With the full support of the Government, and the technical and advocacy capabilities of the United Nations and other international organizations, the improbable goal of a world with decreasing paediatric cancer may now be attainable. First, however, we must collaborate in putting these ideas to the test. Much good work has been done in this area. Let us join forces to further the effort effectively.

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