

# International Agency for Research on Cancer

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**PROPOSED PROGRAMME AND BUDGET 2018–2019**

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## 1. INTRODUCTION

The Proposed Programme and Budget 2018–2019 reflects the priorities set out in the IARC Medium-Term Strategy 2016–2020 (MTS) ([GC/57/7](#)) adopted by the Governing Council (resolution [GC/57/R8](#)). As with the previous Programme and Budget, the present document is structured according to the 'IARC Project Tree' (Information Table C), a framework showing how IARC's activities at project level contribute to achieving the strategic goals defined in the MTS.

The use of a common integrated structure to present strategy, programme and budget permits a clear understanding of how IARC's strategic priorities are being addressed, of the relative balance between different areas of activity, and of the corresponding decisions in terms of resource allocation.

Based on the priority objectives set out in the IARC Project Tree the work of the Agency is centred on six core areas:

- 1 - Describe the occurrence of cancer
- 2 - Understand the causes of cancer
- 3 - Evaluate and implement cancer prevention and control strategies
- 4 - Increase the capacity for cancer research
- 5 - Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research
- 6 - Enable and support the efficient conduct and coordination of research

The details of the strategy and activities in these priority areas for each of the IARC Sections and Groups is set out in the MTS and its associated Implementation Plans, respectively. In the following sections, the main objectives of the programme are outlined for each of the six core areas, which involve projects led by different Sections and Groups. The objectives, activities and budget of each individual project were defined in Project and Budget Proposal Sheets, submitted to review by the Scientific Council, which were mapped to the Project Tree structure. Resource allocations are presented at level 2 and 3 objectives of the Project Tree, thus permitting comparisons with the previous biennial budget 2016–2017 (Information Table F).

IARC appreciates the challenges faced by individual Participating States in approving the assessed contributions comprising the regular budget. The Agency has therefore prepared the proposed Programme and Budget 2018–2019 with a view to maintaining the same level of programmatic activity as in 2016–2017, with minimal change in the number of staff. Nevertheless, in order to meet evolving needs, the proposal reflects the abolition of some Sections and Groups as well as restructuring across a number of areas. This has necessitated considerable change management within a dynamic environment of both increasing opportunities and resource constraints. The impacts of these decisions on the budget are highlighted in the current document under each of the six priority objectives of the Project Tree.

The successful implementation of the IARC MTS can be achieved only through an integrated budget which complements the regular budget with extrabudgetary funds coming from competitive grant applications and a variety of other sources. The balance between these different funding sources is described briefly below.

Over the last decade (2008–2009 onwards), staff costs - mainly statutory - have increased by close to €10 million, a 40% rise (Figure 1). Over the same period, the Governing Council has adopted an approach of zero nominal growth in assessed contributions from existing Participating States. However, to offset the major increase in staff costs, the Governing Council has agreed to increase biennial budgets through the assessed contributions from new Participating States joining IARC and, in the last three biennia, also through the use of supplementary funds from the Governing Council Special Fund (GCSF) (Figure 2).

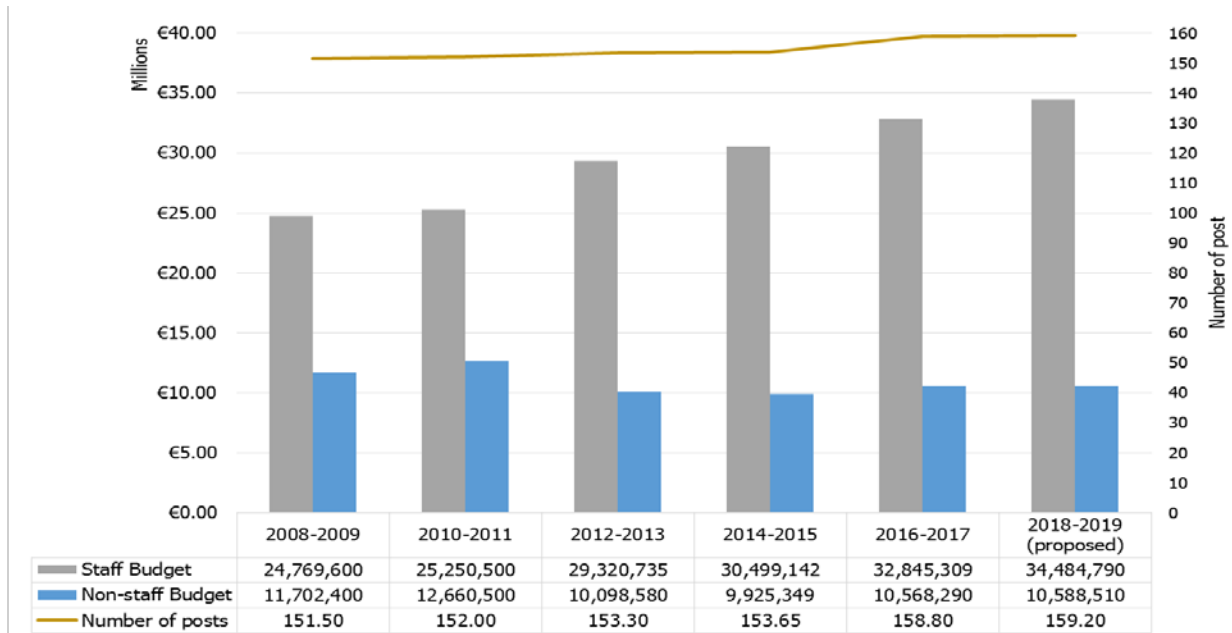


Figure 1: Staff budget, non-staff budget, and number of posts

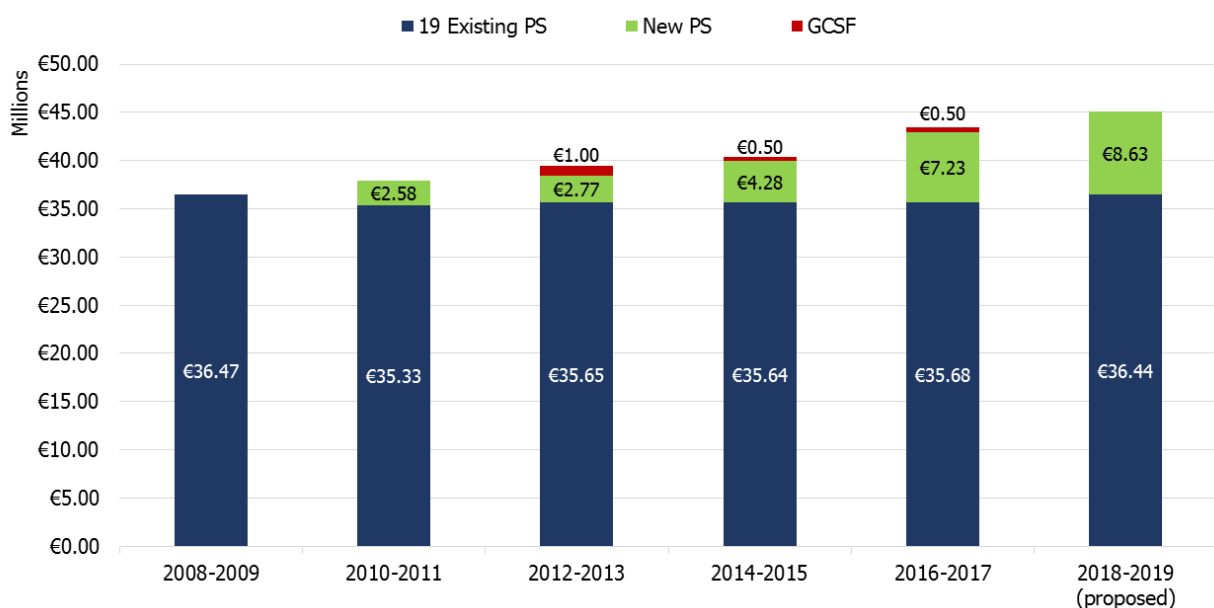


Figure 2: Approved regular budget 2008–2017 and proposed budget 2018–2019

To further offset the rising staff costs, the non-staff budget has also been reduced, remaining €2.1 million lower in absolute terms in the Proposed Programme and Budget 2018–2019 than in 2010–2011 (Figure 1). The proportion of regular budget allocated to general management and administrative services has also been decreasing since 2010. This is largely the result of a sustained and carefully balanced effort to further improve the efficiency of services, while aiming to prioritize investment in the scientific programme.

The above approach to maintaining programmatic activity consistent with successful delivery of the IARC MTS presents some risks. *First*, there is an expectation from new Participating States of an increased scope in the Agency’s programme which must be managed without an increase in resources in real-terms. Indeed, expectation is also widespread among many additional stakeholders as the global importance of cancer within the broader noncommunicable disease agenda becomes increasingly clear. *Second*, the reliance on GCSF to fund the regular budget (€1.0 million in 2012–2013 and €0.5 million in each of the two subsequent biennia) is unlikely to be sustainable, particularly given the demands over the last decade on the GCSF to fund core elements of infrastructure, including laboratory equipment, biobank facilities and computing software and hardware as well as required improvements in security measures. This approach relies on continued income to the GCSF that is not secured. Notably there is a forecasted drop in income over the next biennium because of the completion of the 10-year period of payment of arrears from the Russian Federation. The additional sum currently funded from GCSF for the 2016–2017 biennium represents an average of €20 000 per Participating State. In this light, the Secretariat proposes the 2018–2019 regular budget to be financed only by assessed contributions from Participating States.

To ensure achievement of the required level of programmatic activity, the Agency has financed an increasing number of staff positions from alternative sources (Figure 3). Notably an increased number of posts have been financed from Programme Support Costs (PSC) generated from overheads on research grants, from GCSF generated from sales of publications, or from unbudgeted assessments from new Participating States (UB). At the time of preparation of the proposed Programme and Budget 2018–2019, 11.8 posts are anticipated to be financed from PSC in 2018–2019, 8 posts from GCSF and 5 posts from UB (Figure 3).

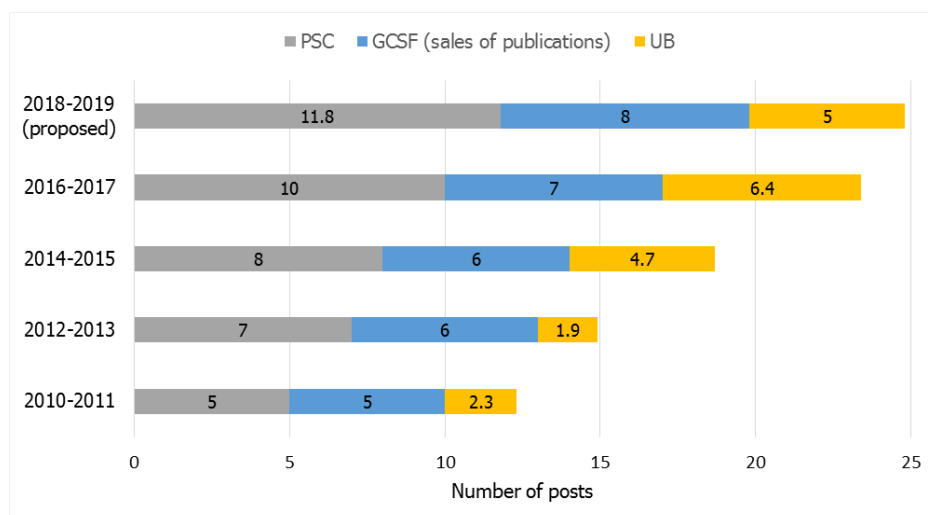


Figure 3: Number of posts funded from PSC, GCSF and UB in 2010–2019

The PSC is used for positions in the Section of Support to Research (including in finance, procurement, IT and HR). The GCSF is used mainly for positions to ensure IARC publications, including in the Monographs Section (a pathologist, project assistant, clerks for production of the WHO Classification of Tumours series) and the Communications Group (publishing assistant, editor, web design, and social media). In contrast, the UB are used to support key scientific areas, prioritized in response to Scientific Council reviews (e.g. bioinformatics). Some of the support posts financed on PSC would be reduced if the scale of activity based on voluntary contributions from research grants were to drop. However, it is noteworthy that a number of essential positions are funded outside of the regular budget including a finance assistant, a budget assistant, IT helpdesk, and central secretarial pool.

The Agency has been successful in generating voluntary contributions to complement and build upon the platform provided by the regular budget, using the former funds to support an increased number of research posts (Professional and General Service). The extrabudgetary funds already secured for the 2018–2019 period are included in the integrated budget shown in budget tables; it is a signal of the strong performance of the Agency that the extrabudgetary resources secured at the time of preparing the previous Programme and Budget 2016–2017 were €8.2 million, compared to €16.4 million at the time of the current planning for 2018–2019, i.e. an additional €8.2 million or 100% increase across the two biennia.

As a new feature in the presentation of the Proposed Programme and Budget 2018–2019, the Agency has identified a number of discrete high priority projects for which extrabudgetary resources have not yet been secured. These projects will be the focus of specific resource mobilization efforts. The projects are detailed in the Information Table G and are presented to permit individual Participating States to consider making additional voluntary or in-kind contributions targeted to these project areas.

In summary, the Secretariat will continue to use all available resource streams to deliver the Programme and thus to fulfil the MTS. In line with the principles of maintaining the same level of programmatic activity, of minimal change to staffing levels and ceasing the reliance on the GCSF, the overall level of the proposed regular budget from assessed contributions, total €45.07 million, is based on the approved budget figures for 2016–2017 supplemented with the full contribution from Morocco plus an increase of just under €0.9 million in assessed contributions from the other 24 Participating States (an increase of 2.09%). This proposed budget represents a 3.82% increase from the approved 2016–2017 biennial budget. A combination of this regular budget and anticipated voluntary contributions will enable the continued successful delivery of the IARC MTS 2016–2020.



## 2. THE IARC PROGRAMME 2018–2019

### Objective 1 - Describe the occurrence of cancer

Monitoring global cancer occurrence, provision of accurate and timely statistics at national, regional and global level, and descriptive epidemiology remain core activities. Reliable cancer statistics are an essential component of effective cancer control programming, through identifying priorities for action and subsequently providing data for monitoring and evaluation of specific interventions. Recognizing the context of cancer within the broader noncommunicable disease (NCD) agenda, the Agency is also assessing the cancer burden relative to other NCDs, with expansion into new areas of expertise, notably demography (for gains in life expectancy), and economics (in relation to costs due to lost productivity).

Research in this area focusses on novel analyses of geographical, temporal and socioeconomic cancer patterns, highlighting the changing profiles and scale of cancer burden worldwide. The Agency does not only collate and analyse cancer statistics but also works alongside colleagues in cancer registries nationally to improve the quality and coverage of cancer registration worldwide.

Improved access to these data, in the sense of shared “public goods”, has driven the development of the new IARC Global Cancer Observatory, which encompasses available data on cancer burden in adults and children as well as on cancer risk factors and their impact by country worldwide.

Another important activity under this objective is production of the ‘WHO Classification of Tumours’ series, representing the consensus on tumour classification among international experts in cancer pathology. The revisions of the so-called “Blue Books” incorporate new disease entities and represent the international reference in human tumour classification. This is an essential provision for cancer surveillance, for epidemiological research and more broadly for the effective clinical management of cancer.

The main objectives in this area from the IARC Project Tree are therefore:

- a. to improve and expand the reporting of descriptive cancer statistics;
- b. to support improved coverage and quality of cancer registration, particularly in low- and middle-income countries (LMIC);
- c. to improve tumour classification to inform cancer registration, research and treatment.

The Section of Cancer Surveillance (CSU) has a primary focus on this objective, with further contributions from the Sections of Nutrition and Metabolism (NME), Infections (INF) and Early Detection and Prevention (EDP). The Blue Books Group (BLB) within the Section of IARC Monographs (IMO) is responsible for the publications on tumour classification.

The overall resource level attributed to areas (a) and (b) above has been slightly increased from the 2016–2017 budget. However, within this largely unchanged overall budget there has been additional restructuring in response to the changing demands on CSU, notably the need to effectively manage additional personnel funded by extrabudgetary funds, for example in the context of the Global Initiative on Cancer Registration (GICR).

A significant reorganization occurred in area (c). The Molecular Pathology (MPA) Section had responsibility for the WHO Classification of Tumours project in addition to conducting a research

programme on brain cancer. With the retirement of the Section Head a decision was taken to abolish the Section to permit two major changes: first, to consolidate laboratory research into fewer Groups/Sections, and second, to integrate the WHO Classification of Tumours project with the IARC Monographs and IARC Handbooks of Cancer Prevention in one Section. In addition to placing scientific and support staff in the same IMO Section, other personnel involved in the publishing process (notably editing and layout) from both MPA and IMO have been transferred into an expanded Communications Group (COM) to achieve efficiencies and economies of scale.

This major restructuring enhances scientific synergies across these three flagship publications, supports the adoption of best practices in expert evaluation and publishing processes and will yield economies of scale. In addition, the abolition of one research Section is a necessary response to the budgetary constraints faced by the Agency, permitting the non-staff budget to be maintained across the remaining Sections and some reinvestment in specific priority areas (e.g. bioinformatics). The Agency will be comprised of eight rather than nine research Sections.

The assignment of the Head, BLB full-time to the WHO Classification of Tumours project, together with reallocation of some additional support staff, has led to an increase in resources assigned to area (c). The combination of the above-mentioned changes across Objective 1 has led to a small increase in the overall proportion of the regular budget assigned to this area from 7.30% to 7.78%.

## **Objective 2 - Understand the causes of cancer**

The causes of a significant proportion of common human cancers remain unknown. Research into preventive interventions requires an understanding of underlying etiology. Therefore a significant effort continues to be placed by the Agency on studying the interaction between environmental, lifestyle and genetic factors on the development of human cancers, drawing on unique opportunities for collaborative work worldwide.

Emphasis is placed on cancers of importance in LMICs and on interdisciplinary research. An interdisciplinary approach allows vital mechanistic insights into the biological plausibility of risk-factor/disease associations from epidemiologic studies, and the development and validation of new biomarkers for exposure assessment, susceptibility, early detection and prognosis of cancer. The knowledge gained through research on cancer causes is a foundation to investigation of strategies for cancer prevention and early detection, as addressed in Objective 3.

In addition to original research in this area, the Agency conducts international expert evaluations of the published scientific evidence on the carcinogenicity of potential risk factors. The IARC Monographs programme is widely regarded as the international reference in cancer hazard identification, used extensively by national and international risk assessment agencies to develop policies for cancer prevention by reducing exposure to known and suspected carcinogens. Dissemination of findings will be further enhanced with the development of a user-friendly and searchable internet database of Monographs, interlinked with other databases hosted at IARC (e.g. WHO 'Blue Books', Global Cancer Observatory, Handbooks of Cancer Prevention) and externally (e.g. ICD-11, PubChem).

Major contributions to Objective 2 are made by INF, NME, IMO, Environment and Radiation (ENV), Genetics (GEN) and Mechanisms of Carcinogenesis (MCA) Sections, with further contributions from CSU. Specifically, CSU collaborates with different Sections to combine information on risk factors and cancer burden in order to provide global, regional or national estimates of the Population Attributable Fraction of cancers associated with a specific exposure. Such estimates are a further valuable support to cancer control planning worldwide.

The aims of the three broad categories of projects in this area are therefore:

- a. to elucidate the contribution of different risk factors to cancer causation, through the conduct of epidemiologic studies;
- b. to characterize the cellular and molecular changes induced by cancer risk factors, elucidating the underlying mechanisms of carcinogenesis and providing biomarkers for application to epidemiologic studies;
- c. to provide authoritative, independent evaluations of the carcinogenic potential of environmental, lifestyle, and occupational factors of public health importance.

This area continues to represent a major focus for IARC with 26.34% of the overall budget, including a majority of the laboratory-based research. Within this overall figure there are, however, noteworthy trends and changes. The allocation to Objective 2 has decreased from 30.38% in 2014–2015 to the current level for 2018–2019, representing a reduction of around €1.3 million in absolute terms over three successive budget periods. This reflects the change in balance between the continued need for research on causes, under Objective 2, and for research more immediately relevant to policy application, conducted under Objectives 1 and 3.

In this context there has been recognition by IARC's governing bodies of the importance of providing regular budget support to the Monographs (area (c) above) in order to reduce the risks related to heavy reliance on extrabudgetary resources. The modest increase in personnel assigned to the Monographs in the 2016–2017 regular budget has been complemented in the current proposed budget 2018–2019 by an additional €123 000 in non-pay budget. Without these changes to area (c) the decrease in the overall budget assignment to Objective 2 would have been greater.

The interdisciplinary work on cancer causation increasingly draws on large complex datasets with demands in terms of both biostatistics and bioinformatics. Bioinformatics has been highlighted by the Scientific Council, successive Peer Review Panels and by the Governing Council in May 2016 as an area where the Agency needs to ensure sufficient resources for its evolving programme, both in personnel and high performance computing (HPC) and data storage capacity. The Agency has made additional resources available in a combination of ways. First, a reduction in secretarial support to the MCA Section and discontinuation of the MPA Section has permitted creation of a new support post in bioinformatics (MCA) and a new computational biologist scientist post (Biomarkers Group, BMA). Second, additional required posts in bioinformatics have been funded through use of UB. Third, existing staff have changed duties to encompass bioinformatics activities. Fourth, a full review of computing needs has led to a proposal to the Governing Council for use of GCSF to finance the expanded HPC and data storage requirements.

Thus the above changes in bioinformatics capacity have been achieved within the overall stable level of staffing on the regular budget, by restructuring, reassignments and strategic investment of alternative funding sources.

### **Objective 3 - Evaluate and implement cancer prevention and control strategies**

The focus on “cancer research for cancer prevention” runs throughout all the Agency’s research areas, but is most directly evidenced by studies evaluating interventions for prevention and early detection of cancers, and research on their effective implementation. Indeed the Agency has major opportunities to work in close cooperation with national programmes in order to assess the factors which help or hinder the implementation of cancer control measures and to evaluate their impact on cancer burden. Thus research has been extended to encompass a broader commitment to studies at a programmatic level within the context of health service provision.

Research on preventive interventions includes strategies for prevention and early detection of cancers with a high burden in LMICs, from trials of vaccines against hepatitis B virus (HBV) or human papillomavirus (HPV), or on the eradication of *Helicobacter pylori* (*H. pylori*), through to studies evaluating simple and affordable screening methods and new technologies for cervical, breast, colorectal and oral cancer.

Implementation research involves the study of operational, cultural and socioeconomic factors affecting the successful implementation and scale-up of interventions for prevention and early detection of cancer in routine health services at national or regional level. The work on prevention has also expanded to consider the factors, both pre- and post-diagnosis which influence prognosis and quality of life. Work with national centres permits patterns of care to be evaluated, providing the evidence-base for implementation of improvements in clinical management of cancer. It is notable that laboratory methods are also providing new avenues for early detection and studies of prognosis, for example with respect to tumour DNA detected in blood.

In addition to original research on cancer prevention the Agency coordinates international expert evaluations of the published scientific evidence on the effectiveness of primary and secondary cancer prevention interventions. These evaluations are primarily published in the IARC Handbooks of Cancer Prevention, in an approach complementary to that of the IARC Monographs. The number of areas able to be evaluated by the Handbooks series will be largely dependent on the success of additional resource mobilization efforts.

Major contributions to Objective 3 are made by EDP, INF, ENV, the Gambia Hepatitis Intervention Study (GHIS) and IMO, with further contributions from CSU and NME.

This area includes three broad categories of projects which aim:

- a. to enhance understanding of interventions for cancer prevention and control;
- b. to enhance the implementation of cancer prevention and control programmes;
- c. to provide expert evaluations of the available evidence-base in order to recommend prevention strategies.

The 2016–2017 budget saw a significant increase of nearly €2 million assigned to Objective 3 compared to 2014–2015, resulting in an allocation of 10.18% of the overall budget compared to 5.61%. The proposed 2018–2019 budget maintains a similar overall level of allocation but with some important underlying changes in distribution.

The fieldwork for the long-term GHIS project will be completed by the end of 2018. Therefore, given budgetary constraints and competing demands, a decision has been taken to cut the regular budget support to the GHIS project during the biennium, resulting in a reduction of €169 600 to this project's budget in 2018–2019 compared to 2016–2017. This reduction enables the maintenance of key positions in other areas of the Agency's Programme under Objective 3. Nevertheless, given the valuable research platform of the GHIS in The Gambia, co-located with the Medical Research Council UK Gambia Unit, extrabudgetary resources will be sought for new research projects in the hope of maintaining the IARC staff and infrastructure in this unique field setting.

The opportunities for research on prevention and implementation continue to grow. In order to support these initiatives and to add value to extrabudgetary resources, the Agency has used UB to support two scientist positions and a new database manager post in EDP over the 2018–2019 biennium, studying the prevention of gastric, cervical and breast cancers.

In order to permit the relaunch of the Handbooks of Cancer Prevention, additional time has been allocated from existing scientific and support staff in IMO, combined with an allocation of a scientist position financed from the UB. The non-staff budget for the Handbooks has also been increased on the regular budget by €95 800, enabled by changes to the GHIS project mentioned above.

The evaluation of cancer prevention initiatives in one region highlights opportunities and the potential added-value in transferring these experiences to other regions of the world. Two examples are the European Code against Cancer (ECAC) and the Implementation of Cancer Screening in the European Union. The ECAC was developed under the leadership of the Agency. There are opportunities to build on and modify this Code and the underlying methodology for other regions of the world, if additional resources can be identified. A modest resource has been assigned in the 2018–2019 proposed budget to facilitate this initiative. Following the studies of the implementation of cancer screening in Europe the Agency has identified a number of quality indicators which could be applied in other geographic regions to track progress on screening programmes. A proposed Cancer Screening in Five Continents project will be the subject of resource mobilization efforts, permitting periodic evaluation of population based cancer screening programmes in different countries using a basic set of process and outcome measures in a harmonized manner.

#### **Objective 4 - Increase the capacity for cancer research**

The development of capacity for cancer research is one of the statutory roles of IARC and thus remains a key element of its mission. However, the contributions under this broad objective cover three main and rather distinct components.

The first component is *focused on people* with the aim of developing knowledge and skills in cancer research with emphasis on countries where capacity remains limited. The education and training programme is restricted to core areas of IARC expertise and is integrated with the scientific activities, meaning much of the training is delivered in the context of collaborative research projects. More structured training is provided through the fellowships and courses programmes hosted at IARC (including the IARC Summer School) and training courses associated with specific projects. The Agency has worked with international partners to create and develop the Biobank and Cohort Building Network in low-income countries, providing training in biobanking and the associated legal and ethical considerations. In order to improve access to learning materials the Agency places increasing effort into producing e-Learning materials and translations into different languages beyond the two official IARC languages.

The second component is *focused on methods*, notably the development of research capacity and tools for epidemiology and laboratory research, such as new or improved methodologies in biostatistics, bioinformatics, exposure assessment and biomarkers. Increased emphasis on statistical methods and modelling, for example of the burden of cancer linked to certain exposures or the impact of different preventive interventions, permit the benefits of investments to be more easily considered at national or international level. The wider range of methodological developments are closely aligned to ongoing research on causes and prevention of cancer and frequently find application to projects assigned to Objectives 2 and 3 of the Project Tree, often preceded by pilot studies.

The third component under this objective is the provision of *infrastructure for research*. This comprises support in information technology, laboratory services and platforms (genetics, histology) and biobanking facilities.

The overall coordination of the formal training activities of the Agency is provided by the Education and Training Group (ETR) within the Director's Office. Training courses associated with specific projects are delivered by those Sections involved, with examples from EDP, CSU, NME, LSB and GEN. Several different Sections are involved in methods development including INF, ENV, NME, MCA, and GEN, while the infrastructure for research is provided mainly through the Laboratory Services and Biobank Group (LSB) and the Section of Support to Research (SSR). In addition, strategic research investment is managed through the Director's Office (DIR).

The main objectives in this area are therefore:

- a. to increase human resources for cancer research;
- b. to develop new methodologies for cancer research;
- c. to provide the resources and infrastructure to support and enhance research.

Overall, the resources assigned to this area have seen an increase to 25.58% of the proposed budget for 2018–2019, from 23.68% in 2016–2017. This increase partly reflects changes in emphasis for some of the existing research Sections. Most notably the NME Section has been restructured following the arrival of a new Section Head, with the Dietary Exposure Assessment Group (DEX) being abolished and the creation of a new Nutritional Methodology and Biostatistics Group (NMB). Through these changes NME has focused additional resources into methodologies which fall under area (b) mentioned above. In addition, GEN has assigned more staff resources

to maintaining some of the exceptional epidemiological cohort studies available to IARC (e.g. in Russian Federation and Iran) as well as a new initiative to create a European Cohort Consortium.

In relation to area (a), the Agency faces a reduction in activity, nearly halving the number of available IARC Fellowships (from an average of 18 two-year awards per biennium to just 10) because of changes in eligibility for extrabudgetary funding from the European Commission. In order to maintain an effective programme while pursuing alternative funding, the Agency will henceforth restrict the award of IARC Fellowships to candidates from LMICs and has assigned an additional €80 000 in the 2018–2019 budget to the Fellowship Programme to partially mitigate the above changes and allow the award of one additional Fellowship, bringing the total to 11 two-year Postdoctoral Fellowships funded on the regular budget over the biennium.

### **Objective 5 - Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research**

This area comprises the activities relating to the definition and implementation of the scientific strategy and programme, supporting the fulfilment of the Agency's objectives and its leadership in promoting and shaping cancer prevention and control internationally.

The Director is responsible for defining the vision, setting the strategy, and overseeing the implementation of the Agency's research programme, being supported in these functions by the Senior Leadership Team (SLT), and at an operational level by the Heads and senior staff in each of the Sections and Groups.

This area also includes the support to the governance structures of IARC, the management of strategic partnerships and of communications, as well as the oversight of compliance with ethical and professional standards in the Agency's activities and research. Success depends on the development and maintenance of key strategic partnerships with WHO, other UN agencies, regional cancer networks, national cancer organizations, non-governmental organizations, etc.

Dissemination of IARC's research is a foundation to translating the scientific findings into cancer control measures and also falls under this objective.

Activities in this area are coordinated primarily by the Director's Office (DIR) and its Communications Group (COM) with contributions from the Section of Support to Research (SSR) and all scientific Sections.

The main objectives in this area are therefore:

- a. to define the vision and implement the scientific strategy for the Agency, providing the framework for the fulfilment of its objectives;
- b. to oversee the strategic direction of the Agency and the implementation of its programme;
- c. to create and maintain key strategic partnerships with national, regional and international organizations;
- d. effectively communicate and disseminate the work of the Agency.

The Agency is rightly subject to scrutiny of its policies and procedures, particularly when performing evaluation of carcinogenic agents, preventive interventions, or classification of

tumours, for example. There is need for standard, streamlined approaches to assessing perceived or real conflicts of interest among all the scientists IARC calls upon as experts as well as the potential donors to its work. The new WHO Framework for Engagement with Non-State Actors and the WHO Ethics and Compliance Office provide important points of reference for the Agency in this context. Efficient and transparent ethical evaluation of all IARC projects remains an essential foundation to all research conducted by Agency scientists. In order to be able to coordinate these areas in an efficient and effective manner and to be able to liaise with colleagues at WHO, the Agency has decided to add one junior professional post to the Director's Office in the role of Ethics and Compliance Officer. This investment explains the overall increase in total posts by 0.4 in the 2018–2019 budget compared to the previous biennium.

IARC can add value to its research outputs by increasing the dissemination of its findings. During the 2014–2015 biennium the Agency allocated resources for the first time to a Press Officer. In the 2018–2019 biennium the need for an additional post, focused on social media and other multimedia communication formats, has been identified as a priority. In order to maintain the current staffing quota on the regular budget and to avoid reducing scientific staff, this general service staff position is to be financed from the Programme Support Cost account rather than the regular budget.

In addition to the above-mentioned areas, which concern predominantly internal functions, the Agency is also able to shape the international cancer research agenda externally. This latter role is achieved in a number of different ways. First, senior IARC scientists are frequently invited to participate in national and international fora, committees, working and advisory groups to advise on cancer research and cancer control agendas. These contributions are not easily attributed a given amount of person-time and are therefore encompassed within the resource allocation to Objectives 1 to 4 inclusive. It is intended, however, to present these contributions as a part of the Medium-Term Strategy Evaluation Framework. Second, there are specific initiatives taken at an Agency level to shape the international agenda. Specific examples include the Cancer Prevention Europe (CPE) initiative, cooperation with WHO to promote cancer control among Member States and the contribution to the United Nations Inter-Agency Task Force (IATF) on NCDs. In the case of CPE, the Agency has assembled a consortium of a number of leading European cancer research centres to define the scope of cancer prevention, identify the major contributors and advocate for the topic at a European level. This initiative may serve as a model for other regions. In relation to WHO Member States, the Agency is working, for example, with colleagues at WHO towards a cancer resolution at the World Health Assembly 2017. IARC is also an active member of two of the three multi-agency joint projects emerging from the IATF, in close collaboration with WHO and other UN partners.

In terms of budget allocation, Objective 5 represents almost the same proportion of the proposed budget 2018–2019 as in the previous biennium (10.65% compared to 10.27%). The increase is related to the additional P2 position of Ethics and Compliance Officer in the Director's Office.



## **Objective 6 - Enable and support the efficient conduct and coordination of research**

This objective groups the broad range of activities of IARC's general management and administrative support structures, which enable the efficient implementation of the scientific programmes, operational effectiveness and optimal management of the Agency's human, material and financial resources. It comprises activities such as finance, human resources, information technology, and general administrative support, including premises security. Sound financial management ensures that expenditures are properly authorized, processed and recorded, that assets are safeguarded and liabilities correctly quantified, and that financial reporting is accurate and timely.

Activities in this area are undertaken by the Section of Support to Research (SSR) in close collaboration with all the scientific Sections and Groups.

This area includes projects whose primary objectives are:

- a. to ensure the Agency is directed and managed according to highest sector standards;
- b. invest strategically towards increasing IARC's capacity.

The regular budget allocated to this area will be further reduced in biennium 2018–2019. This is the result of a sustained effort by SSR to improve the efficiency of services by streamlining processes, renegotiating major external contracts, and increasing the effectiveness of general management and administrative services staff, while further reducing administrative costs by introducing additional cost-efficiency measures. In global terms this resulted in a decrease of the administrative budget as a fraction of the total regular budget to 19.69% in 2018–2019 from 20.17% in 2016–2017.

A novel Business Intelligence tool, aligned with evolving business needs and trends, will provide senior management with transparent, up to date, and accurate information in support of the decision-making process. IARC has reviewed its investments in Enterprise Resource Planning (ERP) solutions over the past 8 years and validated its plan for future IT investments to further automate essential administrative processes.

IARC volunteered to take part in the Project Management Institute (PMI) Project Management Excellence initiative led by WHO and supported by the Bill and Melinda Gates Foundation. Against a set of standard operational efficiency and effectiveness indicators, this initiative resulted in a favourable self-assessment for IARC in 2016, which will be used as a benchmark for further improvements in future biennia.

Consistent with the goals of improved compliance and achievement of general management and administrative excellence, IARC has set out to close all pending audit recommendations from previous years. This is a major achievement, reflecting the full commitment of IARC senior management.

The Nouveau Centre building project is on track with the construction and fitting works scheduled from 2018 to 2021.

### 3. PROPOSED BUDGET 2018–2019

The proposed budget 2018–2019 is the second biennial budget within the MTS 2016–2020. It is developed in euros in accordance with Article III.3.1 of the IARC Financial Regulations. The presentation of the proposed budget follows the structure set out in the IARC Project Tree according to the six main Level 2 objectives with further details at the Level 3 objectives in some tables.

#### 3.1 Explanation of the proposed regular budget

##### 3.1.1 Overall regular budget and distribution

The regular budget proposed for 2018–2019 biennium is **€45 073 300**. The distribution of the proposed budget reflects the prioritization of resources across the six main objectives of the Project Tree as described in section 2 of this document. The table below compares the distribution of the proposed regular budget with the previous approved biennial budget.

Level 2 Objectives	2016–2017		2018–2019	
	(in euros)	%	(in euros)	%
1. Describe the occurrence of cancer	3 170 478	7.30	3 507 393	7.78
2. Understand the causes of cancer	12 325 676	28.39	11 871 734	26.34
3. Evaluate and implement cancer prevention and control strategies	4 420 264	10.18	4 487 103	9.96
4. Increase the capacity for cancer research	10 281 347	23.68	11 531 303	25.58
5. Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research	4 458 253	10.27	4 800 745	10.65
6. Enable and support the efficient conduct and coordination of research	8 757 581	20.17	8 875 022	19.69
<b>Total</b>	<b>43 413 599</b>	<b>100.00</b>	<b>45 073 300</b>	<b>100.00</b>

Further information of the proposed budget can be found in Summary Tables A, B, C, D, and E.

##### 3.1.2 Staff and non-staff budget distribution

The non-staff budget for 2018–2019 is kept at the same level as in the 2016–2017 budget and the majority is designated for staff costs as shown in the below table. More details of the distribution at objective level are available in Summary Table C.

Budget category	2016–2017		2018–2019	
	(in euros)	%	(in euros)	%
Staff budget	32 845 309	75.66	34 484 790	76.51
Non-staff budget	10 568 290	24.34	10 588 510	23.49
<b>Total</b>	<b>43 413 599</b>	<b>100.00</b>	<b>45 073 300</b>	<b>100.00</b>

Overall, the total number of posts to be funded from the regular budget increases by 0.40 as compared to 2017. The staff budget reflects statutory staff cost increase, net changes in distribution and level of posts resulting from various reorganizations within the Agency during 2016–2017 and foreseen for 2018–2019, including investments in the bioinformatics area.

Staff category	2016	2017	2018	2019
Professional (P)	72.50	73.10	74.00	74.00
General Service (GS)	85.78	85.70	85.20	85.20
<b>Total number of posts</b>	<b>158.28</b>	<b>158.80</b>	<b>159.20</b>	<b>159.20</b>
% Distribution of P:GS	46:54	46:54	46:54	46:54

Summary Table D provides further details on post distribution.

### 3.1.3 Cost increase

The proposed budget is 3.82% higher than the 2016–2017 approved budget, 2.71% representing a portion of the statutory staff cost increases and 1.11% due to programmatic changes, as summarized below.

For more details, please refer to Summary Tables F and G.

Cost component	Due to programmatic changes (in euros)	Due to statutory cost changes (in euros)	Total changes (in euros)
Staff cost increase	462 330	1 177 151	1 639 481
Non-staff cost increase	20 220	0	20 220
<b>Total cost increase</b>	<b>482 550</b>	<b>1 177 151</b>	<b>1 659 701</b>
Total % increase	1.11%	2.71%	3.82%

While non-staff cost remains stable, the staff cost increases foreseen over the next biennium is €1.64 million, €1.18 million due to statutory cost increase and €0.46 million due to programmatic changes.

- *Statutory cost increase:* The statutory staff cost increase is largely the result of annual step increases for all staff categories and cost adjustments for General Service staff. No cost adjustment for international staff is anticipated and therefore no provision is included in the budget.
- *Programmatic changes:* The staff cost increase due to programmatic changes reflects the net effect of internal reorganizations resulting from the abolishment and creation of new posts, and revision in grade of existing posts.

To reduce staff cost pressure, the Agency applies a lower TQ rate at 9% instead of 10% to the standard staff cost. The TQ fund was established for financing short term employee benefits and

since 2010, the TQ account has been funded by a budgetary provision set at the rate of 10% of professional staff salary and post adjustment, collected through the payroll.

Implementation of the new compensation package for international staff as recommended by the International Civil Servants Commission (ICSC) within WHO and IARC is planned with effective date from 1 January 2017 and accordingly the new conditions of services of staff in the Professional and higher categories are reflected in this budget.

### 3.2 Financing of the regular budget

Funds from the GCSF account, totalling €2.00 million, were approved to partially finance IARC's regular budget since 2012 (i.e. €1.00 million for 2012–2013 budget, €0.50 million for 2014–2015 budget, and €0.50 million for 2016–2017 budget). To phase out this reliance on the GCSF, the 2018–2019 regular budget is proposed to be solely funded from assessed contributions from Participating States as presented in the table below. This includes the contribution from Morocco joining IARC in 2015 and starting to pay its full assessed contributions towards the 2018–2019 Programme Budget, in accordance with Governing Council Resolution GC/57/R1.

Funding Source	2016–2017 (in euros)	2018–2019 (in euros)	% Change
Assessed contributions (excl. Morocco)	42 913 599	43 811 248	2.09%
Assessed contributions from Morocco	0	1 262 052	2.94%
<b>Total assessed contributions</b>	<b>42 913 599</b>	<b>45 073 300</b>	<b>5.03%</b>
GCSF	500 000	0	
<b>Total regular budget</b>	<b>43 413 599</b>	<b>45 073 300</b>	<b>3.82%</b>

The proposed budget represents an overall increase of €1.66 million or 3.82% from the previous biennium to enable the Agency to cover programmatic changes and increased statutory staff costs. This is largely made possible by Morocco's full contributions of approximately €1.26 million, together with an increase of just under €0.90 million of the assessed contributions from the remaining 24 Participating States, in large part to cover the proposed absence of GCSF financing.

#### *Assessments on Participating States:*

The assessments on Participating States are based on the method approved by the Governing Council under Resolution GC/15/R9, which references group classification of countries to the WHO scale of assessment that is in turn based on the United Nations scale of assessment.

In December 2015, the United Nations General Assembly adopted a new scale of assessment for the three-year period 2016–2018 (United Nations General Assembly Resolution 70/245), leading to the revision of the WHO scale of assessments which was approved by the World Health Assembly in May 2016 (Resolution WHA69.14). This WHO revised scale of assessment is the basis for group classification and assessment on IARC Participating States in the proposed 2018–2019 budget.

Summary Tables H and I provide the details of year-on-year financing and assessments of contribution for each Participating State. The impact of the proposed budget on each individual Participating State as compared to the approved 2016–2017 budget varies between 0.83% and 5.89%, with exceptions on three Participating States, as summarized below.

<b>% Change</b>	<b>Amount change* (in euros)</b>	<b>Participating States (excluding Morocco)</b>
0.83%	10 405	Group 5: Ireland, Qatar
2.18%	24 681	Group 4: Austria, Belgium, Denmark, India, Netherlands, Norway, Sweden, Switzerland, Turkey
3.16%	54 866	Group 3: Australia, Brazil, Canada, Russian Federation, Spain
4.47%	99 325	Group 2: France, Germany, United Kingdom
5.89%	188 248	Group 1: Japan, United States of America
-15.56%	(232 502)	Finland – changed from Group 4 to 5
-19.38%	(430 948)	Italy – changed from Group 2 to 3
19.92%	297 773	Republic of Korea – changed from Group 4 to 3

\*Amount increase/(decrease) is for the biennium budget.

The revision of the WHO scale of assessment as mentioned above results in Finland, Italy, and Republic of Korea changing grouping according to IARC's assessment method. For reference to group classification and comparison with three previous biennium budgets, please refer to Information Table D. To this effect, Finland and Italy will be paying less as they will move from Group 4 to 5 and from Group 2 to 3, respectively. Republic of Korea will move back to Group 3 where it was in the 2012–2013 biennium and prior budget periods, resulting in an increase in its assessment. The reduction of assessments to Finland and Italy have to be absorbed by all other Participating States, including Republic of Korea, accordingly.

Should the WHO scale of assessment have remained unchanged, the impact of the proposed budget increase and an absence of GCSF financing would have been distributed across all Participating States more consistently between 0.83% and 3.39%. Information Table E comparing the assessments on Participating States based on the current and revised scales is provided in the Annex for illustration purpose.

### 3.3 Extrabudgetary resources

*Secured extrabudgetary resources:*

IARC programme and budget planning follows the integrated budget approach by considering all funding sources from both regular and extrabudgetary resources for implementing the proposed programme. Extrabudgetary resources include the secured voluntary designated contributions at the time of budget preparation (September 2016) and resources from the PSC account and the GCSF account.

The estimated extrabudgetary resources are expected to increase significantly in the proposed budget 2018–2019, as shown below. More details are available in Summary Tables B and E.

Level 2 Objectives	2016–2017 (in euros)	%	2018–2019 (in euros)	%
1. Describe the occurrence of cancer	1 320 347	16.03	1 548 154	9.45
2. Understand the causes of cancer	1 293 487	15.70	5 878 621	35.86
3. Evaluate and implement cancer prevention and control strategies	1 339 895	16.27	3 823 810	23.33
4. Increase the capacity for cancer research	1 782 432	21.64	1 503 440	9.17
5. Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research	327 789	3.98	998 669	6.09
6. Enable and support the efficient conduct and coordination of research	2 172 736	26.38	2 638 350	16.10
<b>Total</b>	<b>8 236 686</b>	<b>100.00</b>	<b>16 391 044</b>	<b>100.00</b>

This increase in availability of extrabudgetary resources reflects the on-going success of the Agency's scientists in obtaining competitive research funding and growing direct contributions, notably the multi-year grants supporting Objectives 2, 3 and 4, while several investments from PSC and GCSF accounts are distributed across other objectives.

Funds in the PSC account are collected from designated voluntary contributions and are utilized mainly in Objective 6. The Agency is increasing its investment of PSC funds and in biennium 2018–2019 plans to continue to strengthen its capacity in the areas of social media and communication (Objective 5) by adding a new LY5/Social Media post in the Communications Office. The PSC fund would also be used to support the Nouveau Centre project, preparing the move to the new building (Objective 6).

Funds from the GCSF account include 75% of the revenue from publications, which are returned to the Publications programme, supporting *inter alia* the production of the WHO Classification of Tumours Series (Objectives 1 and 5). They also include the UB allocated to supplement the limited regular budget to build up the bioinformatics area (Objectives 2 and 4).

#### *Resource gaps:*

Notwithstanding the increased success thus far in mobilizing voluntary contributions as well as raising funds through PSC and GCSF, several high value projects of the Agency still have large funding shortfalls, hindering their potential and risking their continuity. Amongst those, seven projects listed below are of highest priority for resource mobilization with a total target of **€13.72 million** for 2018–2019. Additional information in reference to these projects including project summary and expected deliverables are provided in Information Table G.

1. **Global Initiative for Cancer Registry Development (GICR)** (Objective 1). The GICR aims to contribute to the development of in-country capacity for cancer surveillance through structured support to high-quality population-based cancer registries. Coordinated by IARC, six IARC Regional Hubs serve as a first point of contact to provide technical training, consultancies through site visits, mentorship and analysis to produce scientific and policy reports. To implement these activities, a budget of €5.98 million is required for the biennium,

of which €1.64 million is being sought to support core infrastructure costs and operations of the six IARC Regional Hubs.

2. **IARC Monographs Programme** (Objective 2). In view of the worldwide impact of the Monographs and the capacity within the current team to publish the results soon after the assessments of agents and exposures that present carcinogenic hazards to humans, the programme urgently requires additional staff with expertise in quantitative exposure assessment and in scientific editing to help to shorten the time interval from the conclusion of an evaluation to the publication of the final Monograph. Additional funding of €0.42 million is required for the biennium.
3. **Multicentric study of cervical cancer screening and triage with human papillomavirus testing (ESTAMPA)** (Objective 3). ESTAMPA is an international effort in Latin America to implement organized HPV-based cervical screening and reduce cervical cancer mortality among women in the region. The budget of the study for 2016–2020 amounts to €15 million, including €2 million required for the 2018–2019 biennium. In-kind contributions are expected from local governments and universities participating in the study. The additional voluntary contributions will accelerate the evaluation of new biomarkers and approaches for cervical cancer control and consolidate the wide network of investigators in the region.
4. **Cancer Screening in Five Continents (CanScreen5)** (Objective 3). This emerging project is expected to result in country improvements in screening programme management and quality assurance, strengthening health information systems, and ultimately in supporting the collection of screening data and promoting their use, informing policy development and research in cancer prevention and early detection. This new project remains mostly unfunded. The five year project budget is estimated at €3.00 million with the estimated amount of €1.2 million required for the 2018–2019 biennium, i.e., first phase.
5. **IARC Handbooks of Cancer Prevention (HCP)** (Objective 3). Since their re-launch in 2014, Handbooks have been scheduled every 18 months on average, with very limited resources, and support from the staff of the Monographs Programme. The aim is to secure long-term funding dedicated to the Handbooks to build the sustainability of the programme to be able to publish one Handbook per year. The total cost of one Handbook is €0.52 million, hence €1.04 million funding would be required for the 2018–2019 biennium.
6. **IARC Fellowship Programme** (Objective 4). The programme has contributed to the development of human resources for cancer research worldwide. The Agency remains particularly committed to promoting the development of expertise in cancer research in LMICs by training researchers from these countries. External funding for this programme was secured through two consecutive EC MSCA FP7-COFUND grants, complemented with bilateral agreements with Cancer Council Australia and the Irish Cancer Society, which allowed the expansion of the Fellowships since 2010. Additional funding is being sought to ensure its sustainability as the Agency was informed in 2015 that it is no longer considered eligible for the EU co-funding. To be able to maintain the same number of fellowships awarded per year, a shortfall of €0.56 million needs to be met over the biennium through other funding sources.

7. **IARC “Nouveau Centre” Plus** (Objective 6). The total budget of €49.26 million has been secured for the Nouveau Centre core project to cover building costs and *partially* cover infrastructure and equipment costs. Additional funding of €7.78 million is required to cover additional costs not included in the core project budget, such as design and installation of offices, meeting rooms and public facilities; renewal of IARC’s scientific equipment; and physical move to the new premises. €5.04 million of this additional funding requirement remains unfunded and will need to be mobilized over the next five years, with the target of €2.52 million for 2018–2019.

*Overall budget inclusive of extrabudgetary resources:*

Should the resource gaps of the seven priority projects be filled, the budget for implementation of activities in the 2018–2019 biennium, combining with the proposed regular budget and extrabudgetary resources already secured, would be €75.18 million. Figure 4 provides an overview of resource distribution by six priority objectives, inclusive of the project resource gaps. It should be noted that this Figure does not include additional extrabudgetary resources required for other areas of MTS activity that would normally be anticipated to be obtained from competitive funding sources during the biennium.

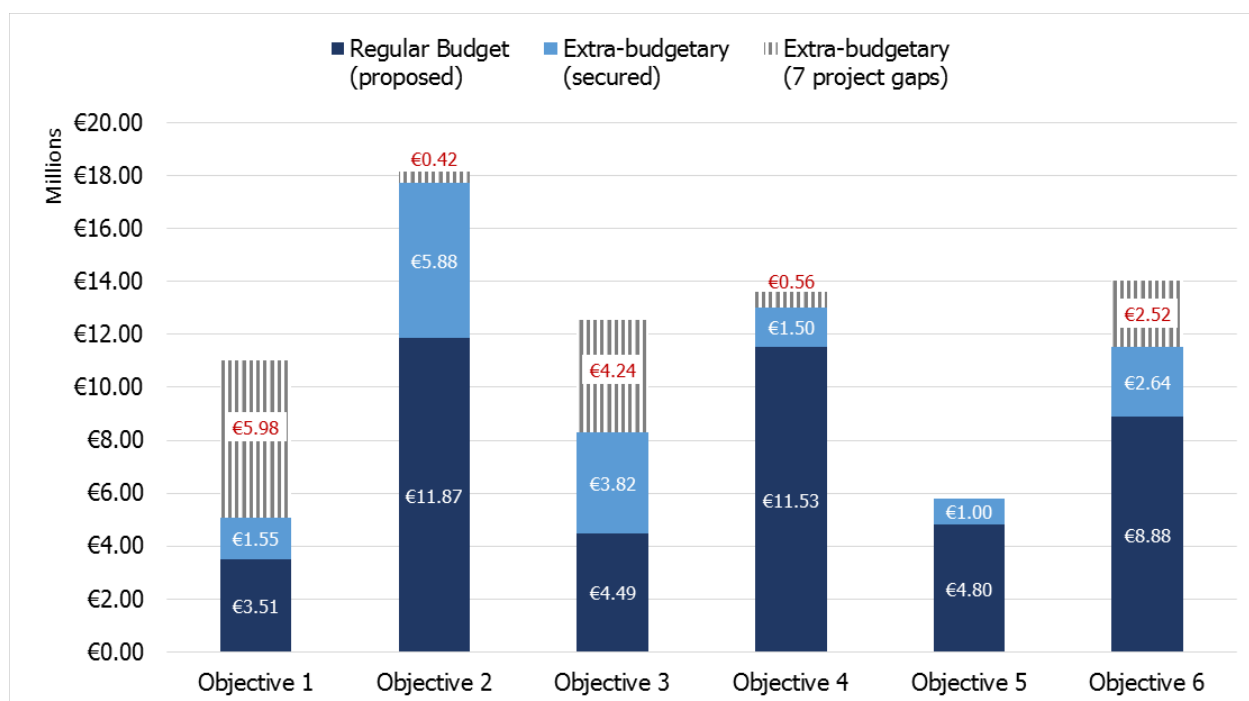


Figure 4 – Resource distribution inclusive of gaps in seven priority projects

The proposed regular budget for 2018–2019 amounting to €45.07 million is around 60% of all the above resources combined, representing the foundation needed to implement the activities necessary to deliver the MTS.



#### 4. BUDGET TABLES

The proposed 2018–2019 budget is presented in the following nine summary tables, of which six tables include the 2016–2017 approved budget for comparison purposes.

- **Table A - Proposed regular budget for the biennium 2018–2019:** Provides the overall proposed budget including the breakdown of budget at the level 2 objectives of the IARC Project Tree for the biennium.
- **Table B - Summary of biennial resources by level 2/3 objectives and sources of fund:** Includes financial resources overview with breakdown of budget at the level 2 and level 3 objectives of the IARC Project Tree inclusive of the proposed regular budget allocations and projected extrabudgetary resources (i.e. voluntary contributions, PSC account, and GCSF). The 2016–2017 figures are also provided for comparison.
- **Table C - Summary of regular budget by level 2/3 objectives and year:** Presents further details of the proposed regular budget allocations by year, broken down by staff and non-staff budget.
- **Table D - Summary of regular budget funded staff by level 2/3 objectives and staff category:** Summarizes the staff in person-years funded by regular budget, allotted to each objective at the level 2 and level 3 objectives of the IARC Project Tree in comparison with the approved figures of 2016–2017. Number of staff is grouped according to the staff categories.
- **Table E - Analysis of staffing and resources by level 2/3 objectives:** Provides details of the proposed budget and staffing for 2018–2019 at the level 2 and level 3 objectives of the IARC Project Tree.
- **Table F - Summary of budget changes from previous biennial budget:** Illustrates overall changes to the budget level for 2018–2019 from the approved budget 2016–2017.
- **Table G - Summary of regular budget by component and cause of increase/decrease:** Presents the proposed budget by component of expenditure in comparison with the approved budget 2016–2017. The increases or decreases are classified based on two main criteria, i.e. programme requirement and cost changes.
- **Table H - Summary of regular budget and proposed financing:** Provides a summary of the proposed regular budget and proposed funding sources by year, in comparison with those approved for the 2016–2017 budget.
- **Table I - Summary of proposed financing from assessments on Participating States and Governing Council Special Fund:** Provides the details of assessments on Participating States and other resources required to fund the proposed budget, including comparison with those approved for the 2016–2017 budget.

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<p align="center"><b>Summary Table A</b>  <b>PROPOSED REGULAR BUDGET FOR THE BIENNIMUM 2018-2019</b>  (expressed in euros)</p>		
LEVEL 2 OBJECTIVES	2018-2019 BUDGET	%
1. Describe the occurrence of cancer	3,507,393	7.78
2. Understand the causes of cancer	11,871,734	26.34
3. Evaluate and implement cancer prevention and control strategies	4,487,103	9.96
4. Increase the capacity for cancer research	11,531,303	25.58
5. Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research	4,800,745	10.65
6. Enable and support the efficient conduct and coordination of research	8,875,022	19.69
<b>TOTAL BUDGET</b>	<b>45,073,300</b>	<b>100.00</b>

Summary Table B SUMMARY OF BIENNIAL RESOURCES BY LEVEL 2/3 OBJECTIVES AND SOURCES OF FUND (expressed in euros)						
Level 2 Level 3	Level 2 Objectives Level 3 Objectives	Regular Budget		Extra-Budgetary Resources (see note i)		TOTAL
		2016-2017 Budget Amount	2018-2019 Budget Amount %	2016-2017 Budget Amount	2018-2019 Budget Amount	
<b>1</b>	<b>Describe the occurrence of cancer</b>					
1.1	Improve and expand reporting of descriptive cancer statistics	1,958,877	2,071,815	0	133,103	
1.2	Support improved coverage and quality of cancer registration, particularly in low and middle-income countries (LMIC)	848,717	867,061	142,000	234,706	
1.3	Improve tumour classification to inform cancer registration, research and treatment	362,884	568,517	1,178,347	1,180,345	
		3,170,478	3,507,393 7.78	1,320,347	1,548,154	
<b>2</b>	<b>Understand the causes of cancer</b>					
2.1	Identify the risk factors for human cancer through the conduct of epidemiological studies	7,056,412	7,167,595	1,131,487	3,673,386	
2.2	Elucidate mechanisms of carcinogenesis through the conduct of laboratory studies	3,575,915	2,825,402	162,000	623,636	
2.3	Provide expert evaluations of the available evidence-base to identify human carcinogens	1,693,349	1,878,737	0	1,581,599	
		12,325,676	11,871,734 26.34	1,293,487	5,878,621	
<b>3</b>	<b>Evaluate and implement cancer prevention and control strategies</b>					
3.1	Enhance understanding of interventions for cancer prevention and control	2,639,000	2,675,647	398,838	1,000,261	
3.2	Enhance the implementation of cancer prevention and control programmes	1,343,833	1,200,231	941,057	2,679,899	
3.3	Provide expert evaluations of the available evidence-base in order to recommend prevention strategies	437,431	611,225	0	143,650	
		4,420,264	4,487,103 10.18	1,339,895	3,823,810	
<b>4</b>	<b>Increase the capacity for cancer research</b>					
4.1	Increase human resources for cancer research	1,632,193	1,754,571	827,042	684,401	
4.2	Develop new methodologies for cancer research	2,880,769	3,686,713	195,438	288,701	
4.3	Provide the resources and infrastructure to support and enhance research	5,768,385	6,090,019	681,414	530,338	
		10,281,347	11,531,303 25.58	1,703,894	1,503,440	
<b>5</b>	<b>Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research</b>					
5.1	Define the vision and implement the scientific strategy of the Agency, providing the framework for the fulfilment of its objectives	1,284,291	1,359,080	0	0	
5.2	Oversee the strategic direction of the Agency and the implementation of its programme	392,191	398,701	0	0	
5.3	Create and maintain key strategic partnerships with national, regional and international organizations	424,889	617,675	0	0	
5.4	Effectively communicate and disseminate the work of the Agency	2,356,882	2,425,289	327,789	998,669	
		4,458,253	4,800,745 10.27	327,789	998,669	
<b>6</b>	<b>Enable and support the efficient conduct and coordination of research</b>					
6.1	Ensure the Agency is directed and managed according to highest sector standards	8,248,421	8,396,099	2,161,074	2,489,974	
6.2	Invest strategically towards increasing IARC's capacity	509,160	478,923	90,200	148,376	
		8,757,581	8,875,022 19.69	2,251,274	2,638,350	
		43,413,599	45,073,300 100.00	8,236,686	16,391,044	

Notes:

i. Extra-budgetary resources include Voluntary Contributions secured at the time of budget submission, funding from the Programme Support Cost Account and the Governing Council Special Fund.

Summary Table C SUMMARY OF REGULAR BUDGET BY LEVEL 2/3 OBJECTIVES AND YEAR (expressed in euros)										
Level 2 Level 3	Level 2 Objectives Level 3 Objectives	2018			2019			2018-2019		
		Staff Budget	Non-Staff Budget	Total	Staff Budget	Non-Staff Budget	Total	Staff Budget	Non-Staff Budget	Total
<b>1</b>	<b>Describe the occurrence of cancer</b>									
1.1	Improve and expand reporting of descriptive cancer statistics	933,571	90,000	1,023,571	958,244	90,000	1,048,244	1,891,815	180,000	2,071,815
1.2	Support improved coverage and quality of cancer registration, particularly in low and middle-income countries (LMIC)	333,515	95,000	428,515	343,546	95,000	438,546	677,061	190,000	867,061
1.3	Improve tumour classification to inform cancer registration, research and treatment	229,020	53,000	282,020	233,497	53,000	286,497	462,517	106,000	568,517
		1,496,106	238,000	1,734,106	1,535,287	238,000	1,773,287	3,031,393	476,000	3,507,393
<b>2</b>	<b>Understand the causes of cancer</b>									
2.1	Identify the risk factors for human cancer through the conduct of epidemiological studies	3,079,733	438,600	3,518,333	3,215,062	434,200	3,649,262	6,294,795	872,800	7,167,595
2.2	Elucidate mechanisms of carcinogenesis through the conduct of laboratory studies	1,187,019	209,700	1,396,719	1,218,983	209,700	1,428,683	2,406,002	419,400	2,825,402
2.3	Provide expert evaluations of the available evidence-base to identify human carcinogens	790,527	140,000	930,527	808,210	140,000	948,210	1,598,737	280,000	1,878,737
		5,057,279	788,300	5,845,579	5,242,255	783,900	6,026,155	10,299,534	1,572,200	11,871,734
<b>3</b>	<b>Evaluate and implement cancer prevention and control strategies</b>									
3.1	Enhance understanding of interventions for cancer prevention and control	1,161,414	269,500	1,430,914	1,059,233	185,500	1,244,733	2,220,647	455,000	2,675,647
3.2	Enhance the implementation of cancer prevention and control programmes	533,085	61,500	594,585	544,146	61,500	605,646	1,077,231	123,000	1,200,231
3.3	Provide expert evaluations of the available evidence-base in order to recommend prevention strategies	235,269	67,500	302,769	240,956	67,500	308,456	476,225	135,000	611,225
		1,929,768	398,500	2,328,268	1,844,335	314,500	2,158,835	3,774,103	713,000	4,487,103
<b>4</b>	<b>Increase the capacity for cancer research</b>									
4.1	Increase human resources for cancer research	356,286	515,000	871,286	368,285	515,000	883,285	724,571	1,030,000	1,754,571
4.2	Develop new methodologies for cancer research	1,596,495	201,900	1,798,395	1,692,018	196,300	1,888,318	3,288,513	398,200	3,686,713
4.3	Provide the resources and infrastructure to support and enhance research	1,534,489	1,473,550	3,008,039	1,582,936	1,499,044	3,081,980	3,117,425	2,972,594	6,090,019
		3,487,270	2,190,450	5,677,720	3,643,239	2,210,344	5,853,583	7,130,509	4,400,794	11,531,303
<b>5</b>	<b>Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research</b>									
5.1	Define the vision and implement the scientific strategy of the Agency, providing the framework for the fulfilment of its objectives	402,063	275,000	677,063	407,017	275,000	682,017	809,080	550,000	1,359,080
5.2	Oversee the strategic direction of the Agency and the implementation of its programme	87,994	109,500	197,494	91,707	109,500	201,207	179,701	219,000	398,701
5.3	Create and maintain key strategic partnerships with national, regional and international organizations	231,759	75,000	306,759	235,916	75,000	310,916	467,675	150,000	617,675
5.4	Effectively communicate and disseminate the work of the Agency	931,071	276,060	1,207,131	952,218	265,940	1,218,158	1,883,289	542,000	2,425,289
		1,652,887	735,560	2,388,447	1,686,858	725,440	2,412,298	3,339,745	1,461,000	4,800,745
<b>6</b>	<b>Enable and support the efficient conduct and coordination of research</b>									
6.1	Ensure the Agency is directed and managed according to highest sector standards	3,252,667	886,000	4,138,667	3,352,916	904,516	4,257,432	6,605,583	1,790,516	8,396,099
6.2	Invest strategically towards increasing IARC's capacity	149,971	87,500	237,471	153,952	87,500	241,452	303,923	175,000	478,923
		3,402,638	973,500	4,376,138	3,506,868	992,016	4,498,884	6,909,506	1,965,516	8,875,022
	<b>TOTAL</b>	17,025,948	5,324,310	22,350,258	17,458,842	5,264,200	22,723,042	34,484,790	10,588,510	45,073,300

Summary Table D SUMMARY OF REGULAR BUDGET FUNDED STAFF BY LEVEL 2/3 OBJECTIVES AND STAFF CATEGORY (expressed in person years)													
Level 2 Level 3	Level 2 Objectives Level 3 Objectives	2016 Staff Activity (person years)			2017 Staff Activity (person years)			2018 Staff Activity (person years)			2019 Staff Activity (person years)		
		Professional and above	General Service	Total Staff	Professional and above	General Service	Total Staff	Professional and above	General Service	Total Staff	Professional and above	General Service	Total Staff
<b>1</b>	<b>Describe the occurrence of cancer</b>												
1.1	Improve and expand reporting of descriptive cancer statistics	3.90	4.70	8.60	3.90	4.70	8.60	3.90	4.70	8.60	3.90	4.70	8.60
1.2	Support improved coverage and quality of cancer registration, particularly in low and middle-income countries (LMIC)	1.10	2.30	3.40	1.10	2.30	3.40	1.10	2.30	3.40	1.10	2.30	3.40
1.3	Improve tumour classification to inform cancer registration, research and treatment	0.40	0.40	0.80	1.00	0.40	1.40	1.00	0.60	1.60	1.00	0.60	1.60
		5.40	7.40	12.80	6.00	7.40	13.40	6.00	7.60	13.60	6.00	7.60	13.60
<b>2</b>	<b>Understand the causes of cancer</b>												
2.1	Identify the risk factors for human cancer through the conduct of epidemiological studies	14.10	14.02	28.12	14.30	14.02	28.32	14.30	13.65	27.95	14.80	13.65	28.45
2.2	Elucidate mechanisms of carcinogenesis through the conduct of laboratory studies	6.55	8.40	14.95	6.55	8.40	14.95	5.30	6.40	11.70	5.30	6.40	11.70
2.3	Provide expert evaluations of the available evidence-base to identify human carcinogens	3.80	2.50	6.30	3.80	2.50	6.30	3.80	2.50	6.30	3.80	2.50	6.30
		24.45	24.92	49.37	24.65	24.92	49.57	23.40	22.55	45.95	23.90	22.55	46.45
<b>3</b>	<b>Evaluate and implement cancer prevention and control strategies</b>												
3.1	Enhance understanding of interventions for cancer prevention and control	6.55	1.90	8.45	6.55	1.90	8.45	6.55	2.60	9.15	5.55	2.60	8.15
3.2	Enhance the implementation of cancer prevention and control programmes	3.70	1.60	5.30	3.70	1.60	5.30	3.35	0.95	4.30	3.35	0.95	4.30
3.3	Provide expert evaluations of the available evidence-base in order to recommend prevention strategies	1.20	0.50	1.70	1.20	0.50	1.70	1.20	0.90	2.10	1.20	0.90	2.10
		11.45	4.00	15.45	11.45	4.00	15.45	11.10	4.45	15.55	10.10	4.45	14.55
<b>4</b>	<b>Increase the capacity for cancer research</b>												
4.1	Increase human resources for cancer research	1.00	3.08	4.08	1.00	3.00	4.00	1.00	3.00	4.00	1.00	3.00	4.00
4.2	Develop new methodologies for cancer research	6.80	5.48	12.28	6.00	5.48	11.48	7.55	6.40	13.95	8.05	6.40	14.45
4.3	Provide the resources and infrastructure to support and enhance research	4.35	11.20	15.55	4.95	11.20	16.15	4.90	12.10	17.00	4.90	12.10	17.00
		12.15	19.76	31.91	11.95	19.68	31.63	13.45	21.50	34.95	13.95	21.50	35.45
<b>5</b>	<b>Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research</b>												
5.1	Define the vision and implement the scientific strategy of the Agency, providing the framework for the fulfilment of its objectives	1.30	1.50	2.80	1.30	1.50	2.80	1.60	1.25	2.85	1.60	1.25	2.85
5.2	Oversee the strategic direction of the Agency and the implementation of its programme	0.00	1.00	1.00	0.00	1.00	1.00	0.00	1.00	1.00	0.00	1.00	1.00
5.3	Create and maintain key strategic partnerships with national, regional and international organizations	0.65	0.30	0.95	0.65	0.30	0.95	1.35	0.50	1.85	1.35	0.50	1.85
5.4	Effectively communicate and disseminate the work of the Agency	5.00	3.00	8.00	5.00	3.00	8.00	5.00	3.00	8.00	5.00	3.00	8.00
		6.95	5.80	12.75	6.95	5.80	12.75	7.95	5.75	13.70	7.95	5.75	13.70
<b>6</b>	<b>Enable and support the efficient conduct and coordination of research</b>												
6.1	Ensure the Agency is directed and managed according to highest sector standards	11.35	23.30	34.65	11.35	23.30	34.65	11.45	22.75	34.20	11.45	22.75	34.20
6.2	Invest strategically towards increasing IARC's capacity	0.75	0.60	1.35	0.75	0.60	1.35	0.65	0.60	1.25	0.65	0.60	1.25
		12.10	23.90	36.00	12.10	23.90	36.00	12.10	23.35	35.45	12.10	23.35	35.45
<b>TOTAL</b>		72.50	85.78	158.28	73.10	85.70	158.80	74.00	85.20	159.20	74.00	85.20	159.20

Summary Table E ANALYSIS OF STAFFING AND RESOURCES BY LEVEL 2/3 OBJECTIVES (Staff activity expressed in person years and budget expressed in euros)											
Level 2 Level 3	Level 2 Objectives Level 3 Objectives	2018 STAFF ACTIVITY		2019 STAFF ACTIVITY		REGULAR BUDGETARY RESOURCES		EXTRA-BUDGETARY RESOURCES		Total	
		Professional and above	General Service	Professional and above	General Service	Staff Budget 2018-2019	Non-staff Budget 2018-2019	Staff Budget 2018-2019	Non-staff Budget 2018-2019	2018-2019	2018-2019
1	<b>Describe the occurrence of cancer</b>										
1.1	Improve and expand reporting of descriptive cancer statistics	3.90	4.70	3.90	4.70	1,891,815	180,000	133,103	-	133,103	1,548,154
1.2	Support improved coverage and quality of cancer registration, particularly in low and middle-income countries (LMIC)	1.10	2.30	1.10	2.30	677,061	190,000	113,706	121,000	234,706	2,071,815
1.3	Improve tumour classification to inform cancer registration, research and treatment	1.00	0.60	1.00	0.60	462,517	106,000	694,345	486,000	1,180,345	867,061
		6.00	7.60	6.00	7.60	3,031,393	476,000	941,154	607,000	1,548,154	3,507,393
2	<b>Understand the causes of cancer</b>										
2.1	Identify the risk factors for human cancer through the conduct of epidemiological studies	14.30	13.65	14.80	13.65	6,294,795	872,800	566,304	3,107,082	3,673,386	7,167,595
2.2	Elucidate mechanisms of carcinogenesis through the conduct of laboratory studies	5.30	6.40	5.30	6.40	2,406,002	419,400	255,186	368,450	623,636	2,825,402
2.3	Provide expert evaluations of the available evidence-base to identify human carcinogens	3.80	2.50	3.80	2.50	1,598,737	280,000	1,232,346	349,253	1,581,599	1,878,737
		23.40	22.55	23.90	22.55	10,299,534	1,572,200	2,053,836	3,824,785	5,876,621	11,871,734
3	<b>Evaluate and implement cancer prevention and control strategies</b>										
3.1	Enhance understanding of interventions for cancer prevention and control	6.55	2.60	5.55	2.60	2,220,647	455,000	687,604	312,657	1,000,261	2,675,647
3.2	Enhance the implementation of cancer prevention and control programmes	3.35	0.95	3.35	0.95	1,077,231	123,000	500,899	2,179,000	2,679,899	1,200,231
3.3	Provide expert evaluations of the available evidence-base in order to recommend prevention strategies	1.20	0.90	1.20	0.90	476,225	135,000	81,362	62,288	143,650	611,225
		11.10	4.45	10.10	4.45	3,774,103	713,000	1,269,865	2,553,945	3,823,810	4,487,103
4	<b>Increase the capacity for cancer research</b>										
4.1	Increase human resources for cancer research	1.00	3.00	1.00	3.00	724,571	1,030,000	-	684,401	684,401	1,754,571
4.2	Develop new methodologies for cancer research	7.55	6.40	8.05	6.40	3,288,513	398,200	127,345	161,356	288,701	3,686,713
4.3	Provide the resources and infrastructure to support and enhance research	4.90	12.10	4.90	12.10	3,117,425	2,972,594	264,223	266,115	530,338	6,090,019
		13.45	21.50	13.95	21.50	7,130,509	4,400,794	391,568	1,111,872	1,503,440	11,531,303
5	<b>Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research</b>										
5.1	Define the vision and implement the scientific strategy of the Agency, providing the framework for the fulfilment of its objectives	1.60	1.25	1.60	1.25	809,080	550,000	-	-	-	1,359,080
5.2	Oversee the strategic direction of the Agency and the implementation of its programme	-	1.00	-	1.00	179,701	219,000	-	-	-	398,701
5.3	Create and maintain key strategic partnerships with national, regional and international organizations	1.35	0.50	1.35	0.50	467,675	150,000	-	-	-	617,675
5.4	Effectively communicate and disseminate the work of the Agency	5.00	3.00	5.00	3.00	1,883,289	542,000	898,669	100,000	998,669	2,425,289
		7.95	5.75	7.95	5.75	3,339,745	1,461,000	898,669	100,000	998,669	4,800,745
6	<b>Enable and support the efficient conduct and coordination of research</b>										
6.1	Ensure the Agency is directed and managed according to highest sector standards	11.45	22.75	11.45	22.75	6,605,583	1,790,516	1,272,848	1,217,126	2,489,974	8,396,099
6.2	Invest strategically towards increasing IARC's capacity	0.65	0.60	0.65	0.60	303,923	175,000	93,176	55,200	148,376	478,923
		12.10	23.35	12.10	23.35	6,909,506	1,965,516	1,366,024	1,272,326	2,638,350	8,875,022
	<b>TOTAL</b>	74.00	85.20	74.00	85.20	34,484,790	10,588,510	6,921,116	9,469,928	16,391,044	45,073,300

**Summary Table F**  
**SUMMARY OF BUDGET CHANGES FROM PREVIOUS BIENNIAL BUDGET**  
(expressed in euros)

Description	Amount (euros)	Percentage increase/decrease from 2016-2017
1. Budget for 2016-2017	43,413,599	
2. Real programme increase / (decrease)	482,550	1.11%
3. Increase / (decrease) to unprogrammed reserve	0	0.00%
4. Cost increases / (decreases) due to statutory costs and inflation	1,177,151	2.71%
5. Budget for 2018-2019	45,073,300	3.82%



Summary Table G										
SUMMARY OF REGULAR BUDGET BY COMPONENT AND CAUSE OF INCREASE/DECREASE										
(expressed in euros)										
COMPONENT	2016-2017 Budget			2018-2019 Budget			BIENNIAL INCREASE/(DECREASE) 2016-2017 TO 2018-2019 (see below note)			
	2016	2017	2016-2017	2018	2019	2018-2019	Programme	Cost	Total	%
<b>Staff Budget:</b>	9,973,518	10,466,151	20,439,669	10,866,700	11,035,068	21,901,767	483,663	978,435	1,462,098	7.15%
Professional	6,094,986	6,310,654	12,405,640	6,159,249	6,423,775	12,583,023	(21,333)	198,716	177,383	1.43%
General Service	16,068,504	16,776,805	32,845,309	17,025,948	17,458,842	34,484,790	462,330	1,177,151	1,639,481	4.99%
Total Staff Costs										
<b>Non-Staff Budget:</b>	40,000	40,000	80,000	40,000	59,000	99,000	19,000	0	19,000	23.75%
Temporary assistance	128,835	128,835	257,670	124,300	124,300	248,600	(9,070)	0	(9,070)	-3.52%
Temporary advisors (experts, not coming for meetings)	196,800	196,800	393,600	206,700	194,700	401,400	7,800	0	7,800	1.98%
Other contractual arrangements (APWs, SSAs and consultants)	236,500	306,500	543,000	331,500	328,500	660,000	117,000	0	117,000	21.55%
Meetings (temporary advisors and participants)	459,570	459,571	919,141	462,300	459,300	921,600	2,459	0	2,459	0.27%
Duty travel (all categories of staff including fellows)	387,534	374,665	762,199	333,400	258,400	591,800	(170,399)	0	(170,399)	-22.36%
Collaborative research agreements	150,396	150,636	301,032	128,650	128,890	257,540	(43,492)	0	(43,492)	-14.45%
Supplies	156,853	145,853	302,706	172,960	152,990	325,950	23,244	0	23,244	7.68%
Equipment and furniture	734,500	734,500	1,469,000	756,900	754,900	1,511,800	42,800	0	42,800	2.91%
Fellowships	152,100	152,620	304,720	145,300	145,970	291,270	(13,450)	0	(13,450)	-4.41%
Office services	110,050	110,290	220,340	176,700	164,900	341,600	121,260	0	121,260	55.03%
Publications (including printing)	162,200	172,204	334,404	143,000	153,500	296,500	(37,904)	0	(37,904)	-11.33%
Library books & periodicals	341,150	341,150	682,300	317,450	317,450	634,900	(47,400)	0	(47,400)	-6.95%
Laboratory maintenance and supplies	35,000	35,000	70,000	38,350	39,800	78,150	8,150	0	8,150	11.64%
IT maintenance and licences	1,595,371	1,570,007	3,165,378	1,570,000	1,613,000	3,183,000	17,622	0	17,622	0.56%
Building services	95,000	95,000	190,000	99,000	90,800	189,800	(200)	0	(200)	-0.11%
Staff Development & Training	220,000	180,000	400,000	200,000	200,000	400,000	0	0	0	0.00%
Director's Development Provision	86,400	86,400	172,800	77,800	77,800	155,600	(17,200)	0	(17,200)	-9.95%
Others	5,288,259	5,280,031	10,568,290	5,324,310	5,264,200	10,588,510	20,220	0	20,220	0.19%
Unprogrammed reserve	0	0	0	0	0	0	0	0	0	0.00%
<b>TOTAL REGULAR BUDGET</b>	21,356,763	22,056,836	43,413,599	22,350,258	22,723,042	45,073,300	482,550	1,177,151	1,659,701	3.82%
							1.11%	2.71%	3.82%	

Note: Causes of budget changes are classified into two groups i.e. due to programmatic requirements ('Programme') and due to cost changes ('Cost').

Summary Table H SUMMARY OF REGULAR BUDGET AND PROPOSED FINANCING (expressed in euros)								
LEVEL 2 OBJECTIVES	2016	2017	2016-2017	%	2018	2019	2018-2019	%
1. Describe the occurrence of cancer	1,518,695	1,651,783	3,170,478	7.30%	1,734,106	1,773,287	3,507,393	7.78%
2. Understand the causes of cancer	6,045,378	6,280,298	12,325,676	28.39%	5,845,579	6,026,155	11,871,734	26.34%
3. Evaluate and implement cancer prevention and control strategies	2,178,446	2,241,818	4,420,264	10.18%	2,328,268	2,158,835	4,487,103	9.95%
4. Increase the capacity for cancer research	5,093,809	5,187,538	10,281,347	23.68%	5,677,720	5,853,583	11,531,303	25.58%
5. Provide strategic leadership and enhance the impact of the Agency's contribution to global cancer research	2,205,074	2,253,179	4,458,253	10.27%	2,388,447	2,412,298	4,800,745	10.65%
6. Enable and support the efficient conduct and coordination of research	4,315,361	4,442,220	8,757,581	20.17%	4,376,138	4,498,884	8,875,022	19.69%
Total Regular Budget	21,356,763	22,056,836	43,413,599	100.00%	22,350,258	22,723,042	45,073,300	100.00%
<b>PROPOSED FINANCING:</b> (see Summary Table I)								
Governing Council Special Fund	250,000	250,000	500,000	1.15%	0	0	0	0.00%
Participating States Assessments	21,106,763	21,806,836	42,913,599	98.85%	22,350,258	22,723,042	45,073,300	100.00%

Summary Table I SUMMARY OF PROPOSED FINANCING FROM ASSESSMENTS ON PARTICIPATING STATES AND GOVERNING COUNCIL SPECIAL FUND (expressed in euros)										
Participating States	Number of units assigned (see Note 1 & 2)	YEAR 2018		YEAR 2019		BIENNIUM 2018-2019	BIENNIUM 2016-2017	2018-2019	2016-2017	
		70% of the assessed budget borne equally	30% of the assessed budget in accordance with the unit system	TOTAL	70% of the assessed budget borne equally	30% of the assessed budget in accordance with the unit system	TOTAL	TOTAL	% increase/decrease (see Note 3)	Amount increase/decrease
Australia	2	625,807	262,943	888,750	636,245	267,329	903,574	1,737,461	3.16	54,863
Austria	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Belgium	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Brazil	2	625,807	262,943	888,750	636,245	267,329	903,574	1,737,461	3.16	54,863
Canada	2	625,807	262,943	888,750	636,245	267,329	903,574	1,737,461	3.16	54,863
Denmark	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Finland	0	625,807	0	625,807	636,245	0	636,245	1,494,554	-15.56	(232,502)
France	4	625,807	525,889	1,151,696	636,245	534,660	1,170,905	2,223,275	4.47	99,326
Germany	4	625,807	525,889	1,151,696	636,245	534,660	1,170,905	2,223,275	4.47	99,326
India	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Ireland	0	625,807	0	625,807	636,245	0	636,245	1,251,647	0.83	10,405
Italy	2	625,807	262,943	888,750	636,245	267,329	903,574	2,223,275	-19.38	(430,951)
Japan	8	625,807	1,051,779	1,677,586	636,245	1,069,320	1,705,565	3,194,903	5.89	188,248
Morocco	0	625,807	0	625,807	636,245	0	636,245	0	0.00	1,262,052
Netherlands	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Norway	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Qatar	0	625,807	0	625,807	636,245	0	636,245	1,251,647	10.405	10,405
Republic of Korea	2	625,807	262,943	888,750	636,245	267,329	903,574	1,494,554	19.92	297,770
Russian Federation	2	625,807	262,943	888,750	636,245	267,329	903,574	1,737,461	3.16	54,863
Spain	2	625,807	262,943	888,750	636,245	267,329	903,574	1,737,461	3.16	54,863
Sweden	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Switzerland	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
Turkey	1	625,807	131,473	757,280	636,245	133,666	769,911	1,494,554	2.18	32,637
United Kingdom	4	625,807	525,889	1,151,696	636,245	534,660	1,170,905	2,223,275	4.47	99,326
United States of America	8	625,807	1,051,779	1,677,586	636,245	1,069,320	1,705,565	3,194,903	5.89	188,248
TOTAL PARTICIPATING STATES	51	15,645,175	6,705,083	22,350,258	15,906,125	6,816,917	22,723,042	42,913,599	5.03	2,159,701
TOTAL GCSEF				0			0	500,000	-100.00	(500,000)
TOTAL FUNDING		15,645,175	6,705,083	22,350,258	15,906,125	6,816,917	22,723,042	43,413,599	3.82	1,659,701

Notes:

1. The method of assessment of contributions of Participating States is detailed in Resolutions GC/15/R9, GC/37/R9, and GC/56/R6.
2. Group classification of countries for the purpose of assigning units in accordance with the applicable GC resolutions is based on the revised scale of assessments for WHO starting 2017 as adopted by the World Health Assembly in May 2016 (WHA69.14).
3. Morocco's contribution is included in the 5.03% increase in the overall assessment on Participating States for 2018-2019. When excluding Morocco, overall assessment increase is 2.09%, partly to absorb an absence of the Governing Council Special Fund (GCSEF).

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## ANNEXES

Seven additional tables are also provided hereafter as supplementary information:

- **Information Table A - Total staff and non-staff budget by Section and Group:** Provides details of staff and non-staff budget annual allocation by Section and Group.
- **Information Table B - United Nations accounting rates of exchange: euros to US dollars:** Contains the monthly exchange rates set by the United Nations for euros to US dollars from January 2006 to December 2016.
- **Information Table C - IARC Project Tree structure and associated projects:** Shows the structure of the IARC Project Tree from the highest level objective (level 1) to the most detailed level objectives (level 4) and associated projects contributing to the respective Project Tree path.
- **Information Table D - Group classification of countries and assigning units for assessed contributions:** Provides supplementary information to the Summary Table I for comparison of the group classification and unit assignment of IARC Participating States in the proposed budget 2018–2019 with three prior approved biennial budgets.
- **Information Table E - Comparison of assessments on Participating States based on current and revised scales:** Illustrates the assessments on Participating States should the same scale of assessment used for the approved budget 2016–2017 be applied to the proposed budget 2018–2019 in comparison to the assessments based on the revised scale.
- **Information Table F - Comparison of proposed regular budget 2018–2019 with approved regular budget 2016–2017 by level 2/3 objectives:** Provides supplementary information to the Summary Table B for comparison of the proposed budget 2018–2019 with the approved budget 2016–2017 in equivalent categories of objectives.
- **Information Table G - Priority projects requiring additional voluntary contributions:** Provides supplementary information to section 3.3 Extrabudgetary resources.

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Information Table A												
TOTAL STAFF AND NON-STAFF BUDGET BY SECTION AND GROUP												
(expressed in euros)												
Section	Group	2018			2019			2018-2019			Section Total Budget	
		Staff Budget	Non-staff Budget	Group Total Budget	Staff Budget	Non-staff Budget	Group Total Budget	Staff Budget	Non-staff Budget	Group Total Budget		
<b>Scientific Programme (Objective 1-5)</b>												
CSU	CSU	1,267,086	185,000	1,452,086	1,301,790	185,000	1,486,790	2,568,876	370,000	2,938,876	2,938,876	2,938,876
DIR	DIR	650,188	545,000	1,195,188	659,445	545,000	1,204,445	1,309,633	1,090,000	2,399,633	2,399,633	2,399,633
DIR Others	COM	998,383	276,060	1,274,443	1,022,466	265,940	1,288,406	2,020,849	542,000	2,562,849	2,562,849	6,304,792
	ETR	356,286	515,000	871,286	368,285	515,000	883,285	724,571	1,030,000	1,754,571	1,754,571	6,304,792
	GHS	124,484	120,000	244,484	635,137	40,000	40,000	124,484	160,000	284,484	284,484	6,304,792
	LSB	613,751	227,000	840,751	635,137	227,000	862,137	1,248,888	454,000	1,702,888	1,702,888	6,304,792
EDP	PRI	692,711	90,000	782,711	706,027	90,000	796,027	1,398,738	180,000	1,578,738	1,578,738	2,668,493
	SCR	449,848	90,000	539,848	459,907	90,000	549,907	909,755	180,000	1,089,755	1,089,755	2,668,493
ENV	ENV	1,088,794	180,000	1,268,794	1,115,385	180,000	1,295,385	2,204,179	360,000	2,564,179	2,564,179	2,564,179
GEN	GCS	907,287	128,000	1,035,287	931,230	128,000	1,059,230	1,838,517	256,000	2,094,517	2,094,517	3,682,844
	GEP	678,668	107,000	785,668	695,659	107,000	802,659	1,374,327	214,000	1,588,327	1,588,327	3,682,844
IMO	IMO	1,187,504	260,500	1,448,004	1,212,415	260,500	1,472,915	2,399,919	521,000	2,920,919	2,920,919	2,920,919
INF	ICB	604,152	95,000	699,152	619,864	95,000	714,864	1,224,016	190,000	1,414,016	1,414,016	3,365,262
	ICE	870,603	95,000	965,603	890,643	95,000	985,643	1,761,246	190,000	1,951,246	1,951,246	3,365,262
MCA	EGE	576,422	95,000	671,422	593,456	95,000	688,456	1,169,878	190,000	1,359,878	1,359,878	2,738,207
	MMB	586,625	95,000	681,625	601,704	95,000	696,704	1,188,329	190,000	1,378,329	1,378,329	2,738,207
NME	BMA	696,287	61,000	757,287	828,192	61,000	889,192	1,524,479	122,000	1,646,479	1,646,479	3,783,321
	NEP	555,749	75,000	630,749	566,564	61,000	627,564	1,122,313	136,000	1,258,313	1,258,313	3,783,321
	NMB	372,486	61,000	433,486	384,043	61,000	445,043	756,529	122,000	878,529	878,529	3,783,321
SSR	ASO/ITS	258,002	940,750	1,198,752	268,055	966,244	1,234,299	526,057	1,906,994	2,433,051	2,433,051	2,433,051
SSR	DAF (GCG/SCI)	87,994	109,500	197,494	91,707	109,500	201,207	179,701	219,000	398,701	398,701	398,701
<b>Administrative Programme (Objective 6)</b>												
SSR	ASO	984,432	779,500	1,763,932	1,022,578	798,016	1,820,594	2,007,011	1,577,516	3,584,527	3,584,527	8,875,022
	BFO	1,136,181	29,000	1,165,181	1,167,873	29,000	1,196,873	2,304,054	58,000	2,362,054	2,362,054	8,875,022
	DAF	402,493	10,500	412,993	411,258	10,500	421,758	813,751	21,000	834,751	834,751	8,875,022
	HRO	473,623	91,500	565,123	490,082	91,500	581,582	963,705	183,000	1,146,705	1,146,705	8,875,022
	ITS	405,909	63,000	468,909	415,076	63,000	478,076	820,985	126,000	946,985	946,985	8,875,022
TOTAL	TOTAL	17,025,948	5,324,310	22,350,258	17,458,842	5,264,200	22,723,042	34,484,790	10,588,510	45,073,300	45,073,300	45,073,300

<b>Information Table B</b>												
<b>UNITED NATIONS ACCOUNTING RATES OF EXCHANGE: EUROS TO US DOLLARS</b>												
From January 2006 to December 2016												
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	
January	0.845	0.760	0.686	0.730	0.693	0.761	0.774	0.754	0.725	0.850	0.922	
February	0.827	0.771	0.676	0.762	0.714	0.734	0.763	0.737	0.737	0.882	0.882	
March	0.844	0.755	0.661	0.782	0.741	0.728	0.746	0.773	0.731	0.943	0.895	
April	0.827	0.750	0.634	0.759	0.743	0.710	0.753	0.783	0.727	0.923	0.887	
May	0.791	0.732	0.642	0.744	0.774	0.675	0.755	0.764	0.723	0.904	0.882	
June	0.778	0.744	0.643	0.717	0.819	0.702	0.805	0.767	0.735	0.894	0.897	
July	0.796	0.740	0.636	0.711	0.811	0.699	0.804	0.767	0.736	0.905	0.901	
August	0.784	0.731	0.658	0.712	0.763	0.700	0.816	0.754	0.748	0.915	0.895	
September	0.780	0.734	0.698	0.695	0.787	0.688	0.797	0.755	0.759	0.889	0.897	
October	0.788	0.705	0.729	0.688	0.735	0.733	0.777	0.737	0.787	0.891	0.906	
November	0.786	0.694	0.773	0.676	0.720	0.707	0.772	0.726	0.803	0.912	0.920	
December	0.759	0.678	0.758	0.664	0.764	0.750	0.770	0.736	0.820	0.914	0.942	
Annual Average	0.800	0.733	0.683	0.720	0.755	0.716	0.778	0.754	0.753	0.902	0.902	
Biennial Average		0.767		0.701		0.735		0.766		0.827		
		2006/2007		2008/2009		2010/2011		2012/2013		2014/2015		
Budget 2006/2007	approved at 0.815 €/US\$		Budget 2010/2011	approved at 0.660 €/US\$		Budget 2014/2015	approved at 0.758 €/US\$					
Budget 2008/2009	approved at 0.815 €/US\$		Budget 2012/2013	approved at 0.675 €/US\$		Budget 2016/2017	approved at 0.729 €/US\$					



Information Table C IARC PROJECT TREE STRUCTURE AND ASSOCIATED PROJECTS						
LEVEL 1 OBJECTIVE: Reduce the burden of cancer worldwide through the conduct of research						
Level 2/3 Objectives	Level 4 Objectives	Project Number Project Title				
<b>1 Describe the occurrence of cancer</b>	1.1 Improve and expand reporting of descriptive cancer statistics	1.1.1 Expand the descriptive analyses of cancer incidence, mortality, prevalence and survival regionally and worldwide	PB.1819.CSU.03 Descriptive epidemiology of cancer			
		1.1.2 Improve the validity, range, timeliness and dissemination of appropriate cancer indicators available at the national, regional and global level	PB.1819.CSU.01 Global cancer indicators: development and dissemination			
	1.2 Support improved coverage and quality of cancer registration, particularly in low and middle-income countries (LMIC)	1.2.1 Improve the availability, quality and dissemination of registry data, via IARC Regional Hubs and promote the role of population-based cancer registries in cancer control planning	PB.1819.CSU.02 Cancer registry support and development			
		1.3.1 Publish WHO Classification of Tumours Series	PB.1819.IMO.03 WHO classification of tumours series			
<b>2 Understand the causes of cancer</b>	2.1 Identify the risk factors for human cancer through the conduct of epidemiological studies	2.1.1 Advance understanding of the role of infectious agents	PB.1819.ICB.02 Determine the role of infectious agents in different human cancers PB.1819.ICE.02 Spectrum, natural history, and prevention of infection-associated cancers			
		2.1.2 Advance understanding of the role of environmental, occupational and iatrogenic factors	PB.1819.ENV.01 To study carcinogenic effects of exposure to protracted low doses of ionising radiation PB.1819.ENV.02 To study exposure to non-ionising radiation (electromagnetic fields)			
		2.1.3 Advance understanding of the role of dietary, metabolic and lifestyle factors	PB.1819.ENV.03 To study cancers with suspected environmental, occupational or lifestyle-related causes PB.1819.ENV.04 To study unique environmental, lifestyle and occupational exposures			
		2.1.4 Advance understanding of the role of genetic factors in influencing risk, and their interaction with non-genetic factors	PB.1819.BMA.01 Dietary and metabolic biomarkers associated with cancer and intermediate end-points PB.1819.NEP.01 Molecular epidemiologic studies of nutrition and metabolism and cancer PB.1819.NMB.02 Dietary and lifestyle exposures associated with cancer and other non-communicable diseases			
		2.2 Elucidate mechanisms of carcinogenesis through the conduct of laboratory studies	2.2.1 Advance understanding of biological and cellular pathways	PB.1819.GCS.01 Identify genes involved in cancer development PB.1819.GEP.01 Genetic epidemiology of tobacco and alcohol related cancer PB.1819.GEP.02 Kidney cancer molecular epidemiology		
			2.2.2 Apply biomarkers to studies of cancer causes and molecular genetic classification of tumours	PB.1819.EGE.01 Epigenetic alterations in studies of cancer causation and prevention PB.1819.ICB.01 Biological properties of infectious agents in vitro and in vivo experimental models PB.1819.MMB.01 Somatic alterations and mechanisms of carcinogenesis associated with exposure to environmental risk factors		
		2.3 Provide expert evaluations of the available evidence-base to identify human carcinogens	2.3.1 Publish IARC Monographs and associated outputs on strategically related topics	PB.1819.EGE.02 Epigenetics-based biomarkers in exposomics PB.1819.MMB.02 Molecular alterations as biomarkers of exposure, cancer risk and detection PB.1819.IMO.01 IARC Monographs on the Evaluation of Carcinogenic Risks to Humans		
			<b>3 Evaluate and implement cancer prevention and control strategies</b>	3.1 Enhance understanding of interventions for cancer prevention and control	3.1.1 Analyse the efficacy of primary cancer prevention strategies	PB.1819.GHI.01 Gambia Hepatitis Intervention Study (GHIS) PB.1819.ICE.01 Implementation and monitoring of HPV vaccination and HPV-based screening in low and middle-income countries
		3.1.2 Analyse the efficacy of secondary cancer prevention strategies			PB.1819.PRI.03 Epidemiology and prevention of gastric cancer	
		3.1.3 Enhance understanding of the factors affecting cancer prognosis			PB.1819.PRI.02 Cervical cancer screening strategies for low and middle income countries PB.1819.ENV.05 To study lifestyle and environmental determinants of cancer risks, prognosis and cancer outcomes	
		3.2 Enhance the implementation of cancer prevention and control programmes		3.2.1 Identify factors influencing the effective implementation of primary and secondary prevention programmes	3.2.1.1 Improving the quality of breast cancer screening, early diagnosis and treatment services in LMICs	PB.1819.SCR.06 Expansion and evaluation of Cancer Prevention Recommendations
					3.2.1.2 Implementation studies of HPV vaccination	PB.1819.PRI.01 Implementation studies of HPV vaccination
					3.2.1.3 Evaluation of cervical cancer control measures in developing countries	PB.1819.SCR.01 Evaluation of cervical cancer control measures in developing countries PB.1819.SCR.02 Evaluation of colorectal and oral cancer screening PB.1819.SCR.04 Cancer Screening Initiatives & Their Impact in 5 Continents
3.3 Provide expert evaluations of the available evidence-base in order to recommend prevention strategies	3.3.1 Publish IARC Handbooks on Cancer Prevention	PB.1819.IMO.02 IARC Handbooks of Cancer Prevention				

Level 2/3 Objectives	Level 4 Objectives	Project Number	Project Title
<b>4 Increase the capacity for cancer research</b>			
4.1 Increase human resources for cancer research	4.1.1 Award fellowships and provide training through participation in collaborative research projects	PB.1819.E.TR.01	IARC Research Training and Fellowship Programme
	4.1.2 Deliver training courses, basic and advanced, in the areas of core competencies of the Agency	PB.1819.E.TR.02	IARC Courses
4.2 Develop new methodologies for cancer research	4.2.1 Improve and implement epidemiological, statistical and bioinformatics methods	PB.1819.ENV.07	Contribute to advanced biostatistical analyses and developing biostatistical methods
	4.2.2 Improve and implement laboratory methods	PB.1819.ICE.03	Improving statistical methods and models to estimate infection-associated cancers
		PB.1819.NMB.01	Integration of lifestyle and –omics-based exposures in aetiological models for cancer research
		PB.1819.BMA.02	Metabonomics-based development of biomarkers of foods, food constituents, food contaminants and metabolism
		PB.1819.EGE.03	Epigenomic profiling applicable to molecular epidemiology
		PB.1819.GCS.02	Non-invasive biomarkers for early detection of cancer
		PB.1819.MMB.03	Experimental methodologies and bioinformatic resources for molecular cancer research
		PB.1819.NEP.02	Novel tools and platforms for nutrition assessment in cancer epidemiology
4.3 Provide the resources and infrastructure to support and enhance research	4.3.1 Develop and maintain research platforms	PB.1819.GEP.03	Coordination of large cohort studies as research platforms
		PB.1819.LSB.01	Management of IARC biobank and pre-analytical processing services
		PB.1819.LSB.03	Capacity building and biobank infrastructure support for Low and Middle Income Countries (LMIC)
		PB.1819.GCS.03	Genetics Platform
		PB.1819.LSB.02	Laboratory Services support
		PB.1819.LSB.04	Histology laboratory
		PB.1819.MMB.04	The IARC TP53 Database
		PB.1819.SSR.03	Laboratory and computing services
	4.3.3 Respond to emerging research opportunities and demands by supporting new or ongoing initiatives	PB.1819.DIR.03	Strategic Research Investment
<b>5 Provide strategic leadership and enhance the impact of the Agency</b>	<b>Agency's contribution to global cancer research</b>		
5.1 Define the vision and implement the scientific strategy of the Agency, providing the framework for the fulfilment of its objectives	5.1.1 Define the vision and implement the scientific strategy of the Agency, providing the framework for the fulfilment of its objectives	PB.1819.DIR.01	Direction and Leadership
5.2 Oversee the strategic direction of the Agency and the implementation of its programme	5.2.1 Oversee the strategic direction of the Agency and the implementation of its programme	PB.1819.SSR.05	Support to Governing and Scientific Council meetings and interactions with Participating States
5.3 Create and maintain key strategic partnerships with national, regional and international organizations	5.3.1 Create and maintain key strategic partnerships with national, regional and international organizations	PB.1819.DIR.02	Strategic Partnerships
5.4 Effectively communicate and disseminate the work of the Agency	5.4.1 Effectively communicate and disseminate the work of the Agency	PB.1819.COM.01	Information Services and Dissemination
		PB.1819.COM.02	Editing, Layout, and Translation
		PB.1819.COM.03	Web Services
		PB.1819.COM.04	Media Relations and Multimedia
<b>6 Enable and support the efficient conduct and coordination of research</b>	<b>6.1 Ensure the Agency is directed and managed according to highest sector standards</b>	PB.1819.SSR.01	Sound management of human and infrastructure resources
		PB.1819.SSR.06	Nouveau Centre
	6.1.2 Ensure the funding requirements for the Agency's activities are met and available resources are disbursed in line with the strategy	PB.1819.SSR.02	Financial management in line with the strategy
6.2 Invest strategically towards increasing IARC's capacity	6.2.1 Ensure a work culture that encourages exploring new approaches and opportunities	PB.1819.SSR.04	Work culture to encourage new approaches and opportunities

**Information Table D**  
**GROUP CLASSIFICATION OF COUNTRIES AND ASSIGNING UNITS FOR ASSESSED CONTRIBUTIONS**  
From 2012 to 2019

WHO's % Contribution	IARC Group	IARC Scale (# units)
8% and above	1	8
4% and above; below 8%	2	4
2% and above; below 4%	3	2
0.5% and above; below 2%	4	1
less than 0.5%	5	0

Participating State	GROUP AND UNIT ASSIGNED TO EACH PARTICIPATING STATE											
	REVISED SCALE for 2018-2019 PROPOSED BUDGET			SCALE for 2016-2017 APPROVED BUDGET			SCALE for 2014-2015 APPROVED BUDGET			SCALE for 2012-2013 APPROVED BUDGET		
	WHO's % Contribution	IARC Group	IARC Scale (# units)	WHO's % Contribution	IARC Group	IARC Scale (# units)	WHO's % Contribution	IARC Group	IARC Scale (# units)	WHO's % Contribution	IARC Group	IARC Scale (# units)
Australia	2.3371	3	2	2.0741	3	2	2.0741	3	2	1.9331	4	1
Austria	0.7201	4	1	0.7981	4	1	0.7981	4	1	0.8511	4	1
Belgium	0.8851	4	1	0.9981	4	1	0.9981	4	1	1.0751	4	1
Brazil	3.8232	3	2	2.9342	3	2	2.9342	3	2	1.6111	4	1
Canada	2.9211	3	2	2.9842	3	2	2.9842	3	2	3.2072	3	2
Denmark	0.5840	4	1	0.6750	4	1	0.6750	4	1	0.7361	4	1
Finland	0.4560	5	0	0.5190	4	1	0.5190	4	1	0.5660	4	1
France	4.8592	2	4	5.5935	2	4	5.5935	2	4	6.1234	2	4
Germany	6.3892	2	4	7.1416	2	4	7.1416	2	4	8.0186	1	8
India	0.7370	4	1	0.6660	4	1	0.6660	4	1	0.5340	4	1
Ireland	0.3350	5	0	0.4180	5	0	0.4180	5	0	0.4980	5	0
Italy	3.7482	3	2	4.4483	2	4	4.4483	2	4	4.9994	2	4
Japan	9.6802	1	8	10.8338	1	8	10.8338	1	8	12.5309	1	8
Morocco	0.0540	5	0	0.0620	5	0	0.0620	5	0	0.0580	5	0
Netherlands	1.4821	4	1	1.6541	4	1	1.6541	4	1	1.8551	4	1
Norway	0.8491	4	1	0.8511	4	1	0.8511	4	1	0.8711	4	1
Oatar	0.2690	5	0	0.2090	5	0	0.2090	5	0	0.1350	5	0
Republic of Korea	2.0391	3	2	1.9941	4	1	1.9941	4	1	2.2602	3	2
Russian Federation	3.0882	3	2	2.4382	3	2	2.4382	3	2	1.6021	4	1
Spain	2.4431	3	2	2.9732	3	2	2.9732	3	2	3.1772	3	2
Sweden	0.9561	4	1	0.9601	4	1	0.9601	4	1	1.0641	4	1
Switzerland	1.1401	4	1	1.0471	4	1	1.0471	4	1	1.1301	4	1
Turkey	1.0181	4	1	1.3281	4	1	1.3281	4	1	0.6170	4	1
United Kingdom	4.4632	2	4	5.1794	2	4	5.1794	2	4	6.6045	2	4
United States of America	22.0000	1	8	22.0000	1	8	22.0000	1	8	22.0000	1	8
<b>TOTAL UNITS</b>			<b>51</b>			<b>53</b>			<b>53</b>			<b>55</b>

Information Table E COMPARISON OF ASSESSMENTS ON PARTICIPATING STATES BASED ON CURRENT AND REVISED SCALES (expressed in euros)											
PARTICIPATING STATE	Approved Budget 2016-2017	Proposed Budget 2018-2019 distributed based on the same scale used in 2016-2017 Budget				Proposed Budget 2018-2019 distributed based on the revised scale				Incremental Increase/(decrease) from current to revised scale	Change in country group classification
		Units	2018-2019	% increase	Amount	Units	2018-2019	% increase/decrease	Amount Increase/(decrease)		
Australia	1,737,461	2	1,772,316	2.01	34,855	2	1,792,324	3.16	54,863	20,008	
Austria	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Belgium	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Brazil	1,737,461	2	1,772,316	2.01	34,855	2	1,792,324	3.16	54,863	20,008	
Canada	1,737,461	2	1,772,316	2.01	34,855	2	1,792,324	3.16	54,863	20,008	
Denmark	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Finland	1,494,554	1	1,517,184	1.51	22,630	0	1,262,052	-15.56	(232,502)	(255,7132)	change from group 4 to 5
France	2,223,275	4	2,282,580	2.67	59,305	4	2,322,601	4.47	99,326	40,021	
Germany	2,223,275	4	2,282,580	2.67	59,305	4	2,322,601	4.47	99,326	40,021	
India	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Ireland	1,251,647	0	1,262,052	0.83	10,405	0	1,262,052	0.83	10,405	0	
Italy	2,223,275	4	2,282,580	2.67	59,305	2	1,792,324	-19.38	(430,951)	(490,256)	change from group 2 to 3
Japan	3,194,903	8	3,303,110	3.39	108,207	8	3,383,151	5.89	188,248	80,041	
Morocco	0	0	1,262,052		1,262,052	0	1,262,052		1,262,052	0	
Netherlands	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Norway	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Qatar	1,251,647	0	1,262,052	0.83	10,405	0	1,262,052	0.83	10,405	0	
Republic of Korea	1,494,554	1	1,517,184	1.51	22,630	2	1,792,324	19.92	297,770	275,140	change from group 4 to 3
Russian Federation	1,737,461	2	1,772,316	2.01	34,855	2	1,792,324	3.16	54,863	20,008	
Spain	1,737,461	2	1,772,316	2.01	34,855	2	1,792,324	3.16	54,863	20,008	
Sweden	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Switzerland	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
Turkey	1,494,554	1	1,517,184	1.51	22,630	1	1,527,191	2.18	32,637	10,007	
United Kingdom	2,223,275	4	2,282,580	2.67	59,305	4	2,322,601	4.47	99,326	40,021	
United States of America	3,194,903	8	3,303,110	3.39	108,207	8	3,383,151	5.89	188,248	80,041	
TOTAL	42,913,599	53	45,073,300	5.03	2,159,701	51	45,073,300	5.03	2,159,701	0	



Information Table G	
<b>PRIORITY PROJECTS REQUIRING ADDITIONAL VOLUNTARY CONTRIBUTIONS</b>	
<b>1. Global Initiative for Cancer Registry Development (GICR)</b>	<b>Project Tree Path: 1.2.1</b>
<p><b>Project summary</b></p> <p>Demographic transitions are projected to place the greatest future burden of cancer in LMICs. To mitigate the impact, effective evidence-based cancer control programmes are needed. High-quality population-based cancer registries (PBCR), the basis from which to plan, implement and monitor such programmes, are established in less than one-third of all LMICs. Led by the Agency, the GICR is a collaboration with key international partners to accelerate improvements in the coverage, quality and use of PBCRs worldwide to better inform cancer control.</p> <p>The GICR aims to contribute to the development of in-country capacity for cancer surveillance through structured support to PBCRs. Coordinated by IARC, six IARC Regional Hubs serve as a first point of contact to provide technical training, consultancies through site visits, mentorship and analysis to produce scientific and policy reports. The GICR represents an expansion of activities that have been, and remain, a cornerstone of the Agency since its inception, yielding cancer indicators and fostering descriptive epidemiologic research.</p> <p><b>Resource Gap</b></p> <p>The total resource gap for the GICR project during the biennium 2018–2019 is approximately <b>€5.98 million</b>. The GICR Secretariat at IARC has overall responsibility for coordinating activities, ensuring progress and communicating with stakeholders, together with providing technical support to the Regional Hubs and target countries. To support these functions during the biennium 2018–2019, <b>€1.64 million</b> for core infrastructure costs and operations of the Hubs is requested. Additional funding mechanisms will be mobilized from other sources to support the country-led surveillance plans over the period, amounting to €4.34 million.</p> <p><u>Expected deliverables in 2018–2019 (conditional on available resources)</u></p> <ul style="list-style-type: none"> <li>• Agreements to provide measurable improvements in the coverage, quality and national networking capacity of cancer registries in at least 20 LMIC;</li> <li>• Transition of a centralized training and support model to one which is devolved into regions through the expanded presence of the six IARC Hubs;</li> <li>• Launch of a best practices portal and the production of e-learning tools tailored to support PBCRs in LMIC.</li> </ul> <p>These activities will have major impact in targeted LMICs in terms of an increase in the numbers of qualified registry staff working in PBCRs and improvement of the quality of the data on cancer. Ultimately the GICR will increase the accessibility of robust cancer data for national health care planning, monitoring and evaluation, as well as ensure valid national estimates of cancer burden are publicly available.</p>	

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<b>2. IARC Monographs Programme</b>	<b>Project Tree Path: 2.3.1</b>
<p><b>Project summary</b></p> <p>The IARC Monographs Programme was created in 1971 with the overall aim of providing authoritative, up-to-date evaluations of agents and exposures that present carcinogenic hazards to humans. The hazards that may be evaluated include chemical, physical and biological agents, occupational exposures, complex mixtures, foods, drugs and personal habits. About 1000 such agents have been evaluated to date. The Monographs are respected as a definitive international reference for cancer hazard evaluation. The results are disseminated worldwide and are used by national and international health agencies to support actions to control exposure to known and suspected carcinogens. The Programme’s objective of identifying the causes of cancer is directly relevant to the Agency’s core mission.</p> <p><b>Resource Gap</b></p> <p>The Monographs Programme is developing a more quantitative approach to hazard evaluation based on advice from a 2014 Advisory Group. Selected Monographs for agents with an adequate database will include quantitative risk estimates within the limits of published data.</p> <p>To support this approach, the Monographs Section will recruit a scientist with expertise in quantitative exposure assessment. This individual will have operational responsibility for the section covering exposure data in each Monograph, including: managing exposure databases; supporting expert Working Groups in finding and analysing pertinent exposure data and reviewing and fact-checking draft reports. Adding a staff scientist with expertise and responsibilities dedicated to exposure assessment will support the use of quantitative approaches. Along with gains in efficiency, this expansion of the scientific staff together with investment in an additional half-time scientific editor will shorten the time interval from the conclusion of an evaluation to the publication of the final Monograph. The total cost of the additional 1.5 posts is approximately <b>€0.42 million</b> for the biennium.</p> <p><u>Expected deliverables in 2018–2019 (conditional on available resources)</u></p> <p>The activities of the new staff members would be fully integrated with the overall goals of the programme, which has the following major deliverables for the biennium:</p> <ul style="list-style-type: none"> <li>• Convene 5 evaluation meetings with Monograph Working Groups;</li> <li>• Convene an Advisory Group on Priorities to review agents for possible future evaluations;</li> <li>• Publish 6 Monograph volumes.</li> </ul> <p>This request supports ongoing efforts to diversify the funding base for the Monographs programme. Currently, the programme relies on approx. €0.88 million of extrabudgetary resources per year in addition to funds from the regular budget. In view of the worldwide impact of the Monographs and their centrality to IARC’S mission, it is a high priority to expand beyond the single large grant that currently supports a significant proportion of the costs for staff and programme operations.</p>	

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<b>3. Multicentric study of cervical cancer screening and triage with human papillomavirus testing (ESTAMPA)</b>	<b>Project Tree Path: 3.1.2</b>
<p><b>Project Description</b></p> <p>ESTAMPA is an international effort in Latin America to implement organized HPV-based cervical screening and reduce cervical cancer mortality among women in the region, by evaluating emerging screening techniques that can be used to triage HPV positive women and different approaches to implement organized HPV-based screening in the region.</p> <p>Approximately 50 000 women aged 30–64 years will be HPV-screened in 10 countries in Latin America. The study will provide important data to define triage methods to select women who require further evaluation or treatment among those who are HPV positive, in order to maximize impact of the screening process avoiding excessive diagnostic workup and overtreatment. This will increase the feasibility of the programmes in LMICs. The implementation research components of the study will guide the introduction of HPV-based programs in the region, and the creation of an extensive network of cancer investigators throughout Latin America is expected to lead to new initiatives to develop research in the region. All these activities are fully in line with IARC's principles and objectives.</p> <p><b>Resource Gap</b></p> <p>The overall study budget for 2016–2020 is €15 million which is funded mainly from several grants from public funding agencies in the participating countries, the Reproductive Health Research Program of WHO, a grant from the US National Cancer Institute, the UICC and PAHO, as well as from in-kind contributions of the local governments and universities participating in the study. The additional contribution mentioned below will accelerate the programme, including the evaluation of new biomarkers and approaches for cervical cancer control and consolidate the wide network of investigators in the region.</p> <p>The total voluntary contribution required during the period 2018–2019 to complete the planned activities is <b>€2 million</b>.</p> <p><u>Expected deliverables in 2018–2019 (conditional on available resources)</u></p> <ul style="list-style-type: none"> <li>• Consolidation of data and biospecimen bank for evaluation of cervical cancer screening and triage methods</li> <li>• Realization of field work for sub-study on psychosocial impact of HPV testing</li> <li>• Evaluation of alternative implementation strategies (e.g., invitation for self-collection) in selected study sites</li> <li>• Design of the ESTAMPA prospective cohort study (5 year follow-up)</li> </ul>	



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<b>4. Cancer Screening in Five Continents (CanScreen5)</b>	<b>Project Tree Path: 3.2.1</b>
<p><b>Project summary</b></p> <p>CanScreen5 will be a global repository of information on cancer screening programs. The project aims to collect, analyze and disseminate information on the characteristics, performance and effectiveness of screening programs worldwide. This will result in improvements in countries in screening programme management and quality assurance, strengthening health information systems, and ultimately to support the collection of screening data and promoting their use informing policy development and research in cancer prevention and early detection.</p> <p>The methodology will be based on the Agency’s recent experience compiling the European Screening Report on the status of implementation of cancer screening programmes in the EU. The data collection tools and the data management and analysis plan will be further improved to make them more broad based and suitable for different resource settings. An online platform similar to “Cancer Today” in the IARC Global Cancer Observatory will be developed, to disseminate results in a manner suitable for policy makers, programme managers and researchers.</p> <p><b>Resource Gap</b></p> <p>CanScreen5 will be a long term project of the Agency, requiring standardization of data collection and analysis from many countries with different levels of health system organization. The total budget needed to complete the project is estimated at around <b>€3.0 million</b>, with the amount required for the first phase during 2018–2019 estimated at <b>€1.2 million</b>.</p> <p><u>Expected deliverables in 2018–2019 (conditional on available resources)</u></p> <ul style="list-style-type: none"> <li>• Development of tools and guidelines to collect and share data on screening programmes;</li> <li>• Collection and analysis of data and quantitative information on the protocols, management and performance of screening programs from at least 50 countries in the first phase;</li> <li>• Developing capacity for data collection on screening programs in the selected countries;</li> <li>• Functioning website for data collection and an online platform for dissemination of information tailored to the needs of various users.</li> </ul> <p>CanScreen5 will be a powerful tool providing access to standardized, systematically collected data and indicators evaluating the performance of cancer screening programmes, eventually in every country where they exist. In addition, it is expected that the project will have an impact in the countries by providing the tools and encouraging them to improve data collection through the development of the health information system for quality assured cancer screening programs.</p>	

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<b>5. IARC Handbooks of Cancer Prevention (HCP)</b>	<b>Project Tree Path: 3.3.1</b>
<p><b>Project summary</b></p> <p>The IARC Handbooks of Cancer Prevention evaluate what are the effective interventions and strategies in cancer prevention, following the same rigorous process as the Monographs. IARC Handbooks have evaluated chemo-preventive agents, individual strategies, cancer screening, and tobacco control policies. The Handbooks support the WHO Global Action Plan on the Prevention and Control of Noncommunicable Diseases. Availability of an international consensus from an independent, specialized Agency within the UN family provides an authoritative basis for health agencies to plan and implement their preventive strategies, and should facilitate national recommendations and communication with the population at risk. Conducting evidence-based evaluations of primary and secondary interventions and strategies to prevent cancer is central to IARC's mission.</p> <p><b>Resource gap</b></p> <p>Since their re-launch in 2014, Handbooks have been scheduled every 18 months on average, with very limited resources, and support from the staff of the Monographs Programme. Our aim is to secure sustainable, long-term funding dedicated to the Handbooks, to build the sustainability of the programme, and increase staff with the aim to publish one Handbook per year.</p> <p>The total cost of one Handbook is of <b>€0.52 million</b> – the funding required for the biennium 2018–2019 amounts therefore to <b>€1.04 million</b>.</p> <p><u>Expected deliverables for 2018–2019 (conditional on available resources)</u></p> <ul style="list-style-type: none"> <li>• Publication of IARC Handbook Vol. 17 on colorectal cancer screening;</li> <li>• Publication of IARC Handbook Vol. 18 (topic to be decided).</li> </ul>	

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<b>6. IARC Fellowship Programme</b>	<b>Project Tree Path: 4.1.1</b>
<p><b>Project summary</b></p> <p>For five decades as a core statutory function of the Agency, the Fellowship Programme has contributed to the development of human resources for cancer research worldwide. The main goal of the Programme is to provide training in cancer research in areas relevant to the Agency’s programme. Ultimately, the Fellowship Programme also aims at catalysing the creation of collaborative links between IARC, cancer researchers, and research institutes. Although all countries have been targeted in recent years, a specific focus has been on LMICs.</p> <p>IARC Postdoctoral Fellowships represent the vast majority of awards through the Programme. This scheme targets early career scientists, offering two-year fellowships uniquely tenable at IARC. Fellows from LMICs can apply for a return grant, supporting the establishment of their research activity in their home country. The Programme also attracts senior visiting scientists through a dedicated Award, to participate in collaborative research projects at the Agency. Finally, short fellowships have also been established in relation with the IARC Summer School.</p> <p><b>Resource gap</b></p> <p>Funding allocated to the Programme under the proposed regular budget for 2018–2019 is €0.86 million, which will allow the award of 11 two-year Postdoctoral Fellowships over the biennium (this includes the additional extraordinary contribution of €80 000 mentioned under Objective 4 of the Programme). In the past seven years, additional extrabudgetary funding was secured through two consecutive EC MSCA FP7-COFUND grants, complemented with bilateral agreements with Cancer Council Australia and the Irish Cancer Society. The funding from the COFUND programme allowed the award of around eight additional two-year Postdoctoral Fellowships per biennium. In 2015, IARC submitted a new application under the EC MSCA H2020-COFUND-2015 call for which the Agency was deemed ineligible.</p> <p>The objective being to maintain the number of fellowships awarded, a shortfall of <b>€0.56 million</b> need to be secured over the biennium through alternative sources of funding.</p> <p><u>Expected deliverables in 2018–2019 (conditional on available resources)</u></p> <ul style="list-style-type: none"> <li>• Eighteen two-year IARC Postdoctoral Fellowships awarded over the biennium;</li> <li>• Partnerships set up in order to develop additional bilateral Postdoctoral Fellowships;</li> <li>• Four short-term Fellowships awarded every year;</li> <li>• Two Senior Visiting Scientist Awards each year.</li> </ul> <p>This additional funding would ensure that the number of training opportunities for early career scientists are maintained, and that IARC can pursue its mission to contribute the development of new generations of cancer researchers, especially in LMICs.</p>	

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<b>7. IARC “Nouveau Centre” Plus</b>	<b>Project Tree Path: 6.1.1</b>
<p><b>Project summary</b></p> <p>The Nouveau Centre is a major building infrastructure project at the core of IARC’s global research mission for the next 30 to 50 years. The new building is an integral part of IARC’s business continuity plan, ensuring building infrastructure security in the long term.</p> <p>The design and construction phase of the new IARC building, to be located in the Gerland bio-district area of Lyon, is overseen by the Métropole de Lyon in cooperation with other French authorities. The project started in 2011, in close collaboration with local partners, and should be completed in 2021 when IARC moves to its new premises. The budget for the Nouveau Centre core project amounts to €49.26 million (as of July 2016) funded by the French authorities, which covers building costs, and partially covers infrastructure and equipment costs.</p> <p>Apart from coordinating and assisting the Métropole de Lyon in the daily management of the project, IARC is required to finance and manage the design and installation of offices, meeting rooms and public facilities, the partial renewal of IARC’s scientific equipment, and the physical move to its new premises. IARC will also take advantage of this important opportunity for modernization to create a fully enabling working environment for its personnel. These activities are not covered in the above quoted budget for the Nouveau Centre core project.</p> <p><b>Resource gap</b></p> <p>The additional costs to fully complete the move and installing IARC in the new premises is conservatively estimated at €7.78 million. IARC management pledged to set aside €1.5 million from overheads earned over the five year period of 2015–2019 to partially cover the physical move. The City of Lyon will provide €1.2 million from sales proceeds of the Latarjet and BRC buildings to be utilized to partially cover office design and installation costs. Residual balance of funds approved by the GC for legal services related to the Nouveau Centre project (Resolution GC/54/R6) and anticipated revenue from sales of old furniture and equipment will further contribute to cover these expenses. Nonetheless, the remaining unfunded balance of <b>€5.04 million</b> will be required to be mobilized over the next five year period of 2017–2021, with a target of <b>€2.52 million</b> for the 2018–2019 biennium.</p> <p><u>Expected deliverables (conditional on availability of resources)</u></p> <ul style="list-style-type: none"> <li>• Design and installation of offices, meeting rooms and ITC infrastructure (€0.94 million)</li> <li>• Strengthened security measures, appropriate public facilities and internal building infrastructure (€0.86 million)</li> <li>• Newly installed automated biobank and laboratory facilities (€2.70 million)</li> <li>• Smooth transition and seamless physical move to the new premises (€0.54 million)</li> </ul>	