Foreword

Cancer is undoubtedly a disease of inequalities. At source, tackling these inequalities is a matter of social justice and human rights. In 1997, the International Agency for Research on Cancer (IARC) summarized the available evidence on the differences in cancer incidence, survival, and mortality between groups with different socioeconomic status in the volume *Social inequalities in cancer* in order to draw attention to this area of research.

The first studies showing socioeconomic differences in cancer outcomes date back to more than a century ago. There has been notable progress in understanding many major causes of cancer, such as tobacco use, alcohol consumption, obesity, poor diet, and other lifestyle factors, as well as exposure to certain infections, radiation, chemical agents in the workplace, and air pollution, and much of this knowledge has been translated into effective preventive interventions. Over the same period, there have been significant improvements in the early detection, diagnosis, and treatment of some cancer types, as well as in the provision of palliative care. However, in parallel with this progress there has been increasing recognition of the social inequalities which exist in accessing the benefits of that progress. Far from disappearing, social inequalities in cancer have persisted over time, albeit changing in nature and extent.

Social inequalities in cancer, therefore, remain as a crucial public health issue, affecting everyone but hitting particularly hard the most disadvantaged individuals. These inequalities entail major financial consequences for societies, in addition to the impact on health. Understanding how the phenomenon of inequalities evolves and is reshaped over time demands a broader perspective. Economic, social, political, legislative, and technological forces have an impact on the distribution of risk factors within a population, and also affect access to health services, which translate into the observed inequalities in cancer outcomes. There are also important psychosocial factors leading individuals with low socioeconomic status to adopt unhealthy behaviours and therefore be exposed to a greater variety, and higher intensity, of cancer risk factors compared with their fellow citizens. To monitor, investigate, and understand these issues, high-quality data on populations within populations are

needed, and multisectoral action is required to find effective solutions to the prevailing social inequalities in cancer.

Research can provide the data needed to inform evidence-based interventions to reduce social inequalities in cancer. The research community has a duty to provide high-quality evidence and to ensure this knowledge is presented in a form which can be translated into effective cancer control policies that leave no one behind. In its role as an international cancer research agency and part of the World Health Organization, IARC is committed to this task. The present volume serves as a foundation not only to its own research but also to collaborative research efforts on social inequalities and cancer worldwide.

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