

Preface

This IARC Scientific Publication aims to provide a comprehensive and timely overview of the most recent evidence on social inequalities in cancer, incorporating contributions from more than 70 authors, reviewers, and editors whose expertise spans a wide range of relevant disciplines. The publication was further informed by the discussions and conclusions of a workshop held by IARC in April 2018 in Lyon, France, to identify research priorities to reduce social inequalities in cancer, the results of which were summarized and published in *CA: A Cancer Journal for Clinicians* and are reproduced in the Conclusions at the end of this volume.

The first two chapters of this book describe the concept of cancer as a disease of difference, both biologically and socially (Chapter 1), and how social inequalities in cancer are addressed by the global public health agenda (Chapter 2). The subsequent 17 chapters are structured around three major themes and are complemented by examples and specific focuses: Part I gives an overview of the evidence of social inequalities in cancer that exist between and within countries, Part II describes the most important factors and mechanisms underlying these inequalities, and Part III identifies real-world examples of interventions that contribute to the reduction of social inequalities in cancer.

Part I includes descriptions of how social inequalities matter across the whole cancer continuum (Chapter 3), how they can be measured (Chapter 4, Focus 1, and Focus 2), and evidence of inequalities in cancer between countries (Chapter 5 and Focus 3) and within countries (Chapter 6, Focus 3, Focus 5, Focus 6, and Focus 7). It also describes the evidence of social inequalities in cancer risk factors and in access to health care (Chapter 7).

Part II starts with a description of the theoretical frameworks of cancer inequities (Chapter 8) and continues by highlighting important mechanisms such as income inequalities (Chapter 9), the role of health systems (Chapter 10), the economics of tobacco, alcohol, food products, and sugar-sweetened beverages (Chapter 11 and Example 1), and national and international legislation (Chapter 12). Part II concludes with a concrete example of a life-course approach to the study of socioeconomic determinants (Chapter 13).

Part III includes considerations of the impact of public health interventions to reduce social inequalities in cancer (Chapter 14), the research priorities for low- and middle-income countries (LMICs) (Chapter 15), the potential benefits of certain low-cost technologies and approaches in LMICs (Chapter 16 and Example 2), and the lessons learned from the response to the AIDS epidemic and their application to reduce social inequalities in cancer (Chapter 17). Part III closes by describing how the increasing use of technology could, if not regulated, lead to increasing rather than decreasing inequalities in cancer (Chapter 18), and how resources that could be used to control cancer in disadvantaged individuals are instead allocated to fund the unnecessary and potentially harmful treatment of individuals with greater access to health care (Chapter 19).

Issues pertaining to cancer inequalities within specific regions of the world are also addressed and condensed in focus sections distributed through the book (Focus 4, Focus 8, and Focus 9).

This initiative was planned to stimulate the international community into acting on social inequalities and cancer, a topic that has been neglected in terms of both research and public health practice. The editors anticipate that this book, which includes detailed descriptions of specific examples of interventions that may reduce future inequalities in cancer, will also serve as a reference for policy-makers and public health officials.

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