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# Conquering Cancer in the 21st Century: Leading a Movement to Save More Lives Worldwide

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John R. Seffrin, PhD<sup>1</sup>

## Abstract

This article examines the current state of the global fight against cancer and of noncommunicable disease in general, the progress to date against cancer, and postulates that there has never been a more challenging—nor more ideal—time to succeed in making significant headway against the disease worldwide. Based on progress made particularly in the past two decades, and with proven interventions and scientific knowledge, it is possible to bring cancer as a major health problem worldwide under control in this century. The article also discusses what the American Cancer Society, the nation's largest voluntary health organization dedicated to saving lives from cancer, is doing to lead a global movement in support of achieving this goal.

## Keywords

American Cancer Society, cancer, chronic disease, global health, noncommunicable disease, voluntary health organization

With the Elizabeth Fries Health Education Award, the James F. and Sarah T. Fries Foundation does more than honor individuals; it ennobles the very field of health education itself. As the 2010 recipient of this award, I am deeply humbled.

I am privileged to lead another noble organization—the American Cancer Society—working toward the basic goal of all health educators: improving the public health. It is a defining moment in the battle against the disease the Society fights, as there has never been a more exciting—nor more challenging—time to be involved in the cancer fight. While we have been making great progress against cancer in the United States, the level of devastation the disease threatens worldwide—in terms of loss of life and economic harm—has never been greater. At the same time, our knowledge of the disease and how to implement effective, lifesaving interventions is unprecedented.

This article focuses on the progress in cancer in the past two decades, the current state of the disease on the global health agenda, and what can and should be done with the knowledge, tools, and resources available to tackle this significant worldwide public health challenge and ultimately bring the disease under control in this century.

## Progress Against Cancer

Looking back over the nearly 100-year history of the American Cancer Society, or even just in the past generation, knowledge about cancer has come so far. When the Society was founded in 1913, cancer was an almost certain death sentence, only to be preceded by a protracted period of pain and suffering. Today, the optimistic side of the disease has never been so hopeful, even though there is much work to be done.

In March 2004, *Fortune* magazine published a cover story titled, “Why We’re Losing the War on Cancer, and How to Win It,” by executive editor Clifton Leaf, a cancer survivor. Leaf writes, “While there have been substantial achievements since the crusade began with the National Cancer Act in 1971, we are far from winning the war. So far away, in fact, that it looks like losing.”

When fighting a disease like cancer, it is sometimes easy to feel as if we are losing the war—a feeling I had when in 1992 I took the chief executive officer role at the American Cancer Society. That is why one of the first things I did in my new role was to work with the Society’s leadership to answer the question, “What can we accomplish?” That led us to set aggressive goals for the year 2015: to measurably reduce the impact of cancer, decreasing cancer mortality by 50%, reducing cancer incidence by 25%, and improving quality of life for people with the disease.

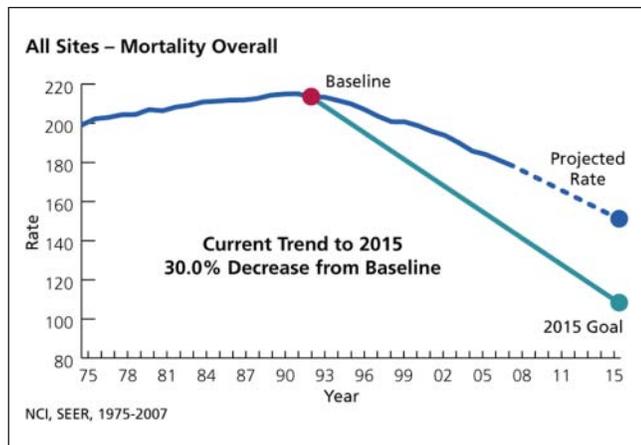
There is still much work to do to meet those goals, but we have made significant progress toward achieving them. Evidence proves we are indeed *not* losing the cancer fight—we are winning. Most people survive the disease—with almost 12 million Americans living today after a cancer diagnosis. Figure 1 shows that cancer death rates have declined every year for more than 15 years in a row (American Cancer Society, 2010).

That decline in age-adjusted cancer mortality rates means there are hundreds of thousands of deaths—767,600—that

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**Figure 1.** Age-adjusted mortality rates for all cancers (American Cancer Society, 2010, p. 20)

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have been averted, which would have been lost to cancer if death rates had remained the same as they were in the early 1990s (Figure 2). To put it a different way, in 2007, the most recent year for which we have data, that progress helped save more than 350 lives per day. If we were to increase our efforts in cancer prevention and control, we could save hundreds more per day.

## A Results Focus

How has this progress been possible? The American Cancer Society was the first voluntary health organization to establish measurable goals, measure performance, and report to the public each year progress toward those goals. David Williamson and the late John Sawhill in “Measuring What Matters in Nonprofits” chose to highlight the Society for this reason. “The very act of aligning the mission, goals, and performance metrics of an organization can change it profoundly,” they write (Sawhill & Williamson, 2001).

That results-focus as the Society works toward its 2015 goals has enabled substantial progress. It signaled the need for the organization to realign some of its work in the early part of this new century, as it became clear the Society would not reach those goals without such a change. Society research released in 2007 showed what had not been proven before: a lack of access to quality health care affects a person’s ability to fight and to survive cancer. Without a true systems change in American health care policy through effective advocacy, the Society could not reach its 2015 goals. The organization also has achieved great progress in recent years by working to redouble efforts to research the causes and cures of cancer and promote and elevate prevention into standard practice nationwide.

But it was the Society’s work to help ensure access to quality health care for all Americans, framing the health care reform debate through the “cancer lens,” that has proven to be the boldest and perhaps most historic for the organization. The

move was the only time in the organization’s nearly 100-year history the Society has earned top billing in *The New York Times*, with a piece on the prominent newspaper’s front page. In a September 11, 2007, editorial, the *Times* said the Society’s campaign focusing on the issue would “bring home in gripping terms what happens to people without health insurance. When it comes to dealing with cancer, any delay in detection or treatment, as is common among the uninsured or poorly insured, can be fatal” (Editorial, 2007, p. 26).

And thanks in part to the Society’s leadership role alongside its nonprofit, nonpartisan, partner advocacy organization, the American Cancer Society Cancer Action Network<sup>SM</sup>, the United States in 2010 took a giant step toward ensuring access to health care for all Americans with the passage of health care reform legislation. Although not perfect, this new law will do much to improve care for cancer patients and their families.

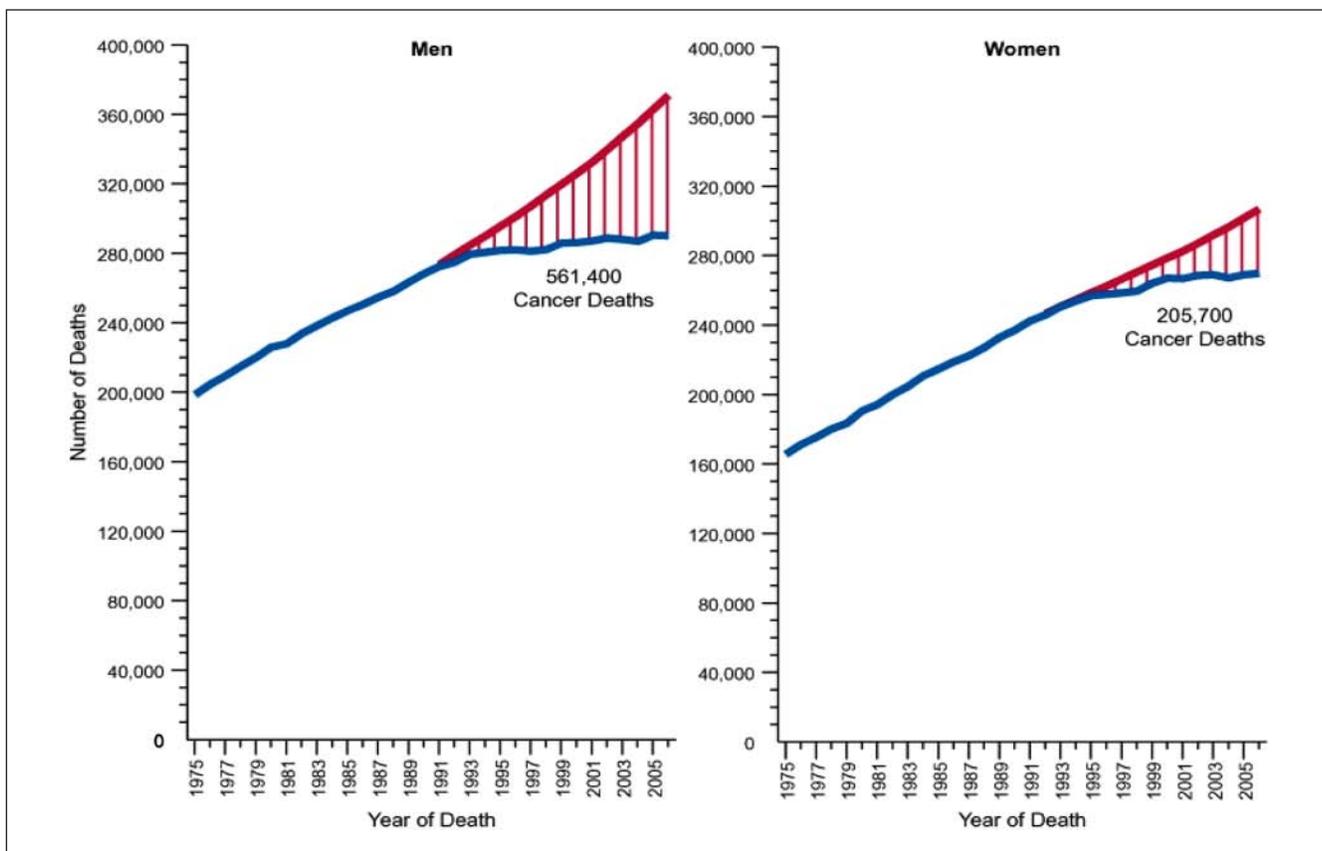
## Saving More Lives

The decision to make access to health care a focus of the American Cancer Society’s work several years ago has been transformative for the organization—as the new health care reform law will be for the health of the nation. The Society is proud of the progress the organization has helped enable in recent years and in its nearly century of experience—but is not satisfied with resting on the laurels of that progress. The organization is looking ahead to its next bold move that will enable even greater results in the cancer fight, because there is a moral obligation to do more with the knowledge we have about cancer on behalf of public health worldwide.

The future holds the promise of a greater ability to control cancer in the months and years ahead, thanks to ever-increasing experience and expanding knowledge from evidence-based research. Perhaps more important, evidence strongly suggests that much of the oncoming epidemic of cancer and other life-threatening chronic diseases is potentially *preventable* if collectively we apply what we know with respect to tobacco control, alcohol consumption, nutrition and physical activity, primary and preventative care (including immunizations and cancer screening), and treatment. However, if we fail to act now to promote the global control of these diseases, the epidemic of cancer and other chronic diseases that raged in economically developed countries in the 20th century—which we are now beginning to bring under control—will be repeated throughout the developing world in this new century.

The American Cancer Society is choosing to build on success against cancer by transforming the organization to save more lives from the disease both in the United States and worldwide. In the past 97 years, the Society has already transformed from a community-based charity that raised money locally and did research centrally, to a high-impact, public health change agency. Today, the Society is again reinventing itself, expanding its platform as an organization to help lead a global movement to bring cancer under control in this century.

We know about 2.6 million of the 7.6 million total cancer deaths that occurred worldwide in 2008 were potentially avoidable through prevention of major risk factors, including



**Figure 2.** Total number of cancer deaths averted, from 1991 to 2006 in men and from 1992 to 2006 in women

Source: Jemal, Siegel, Xu, & Ward, 2010, p. 293 (from *CA: A Cancer Journal for Clinicians*, Vol. 60, No. 5, 2010). Copyright 2010 American Cancer Society. This material is reproduced with permission of John Wiley & Sons, Inc.

tobacco use, dietary factors, infections, and alcohol use. To put that another way, each day there are 7,300 avoidable cancer deaths worldwide (Brawley, 2011). Those are 7,300 lives left on the table that proven cancer control strategies could have saved. That estimate does not include some cancer control interventions that we know work, including vaccinations against hepatitis B and human papillomavirus infections, human immunodeficiency virus (HIV) prevention and antiretroviral therapy for HIV-related cancers, and screening for breast and colorectal cancers. By applying *all* the cancer control interventions we know to be effective, we could be saving as many as 10,000 lives per day globally.

These are not easy goals, but the scientific knowledge to achieve them is available, and they are attainable, with the right resources behind them. Striving toward them is not only the right thing to do—it is a moral imperative when considering the growing global cancer pandemic and the millions of avoidable deaths from this disease.

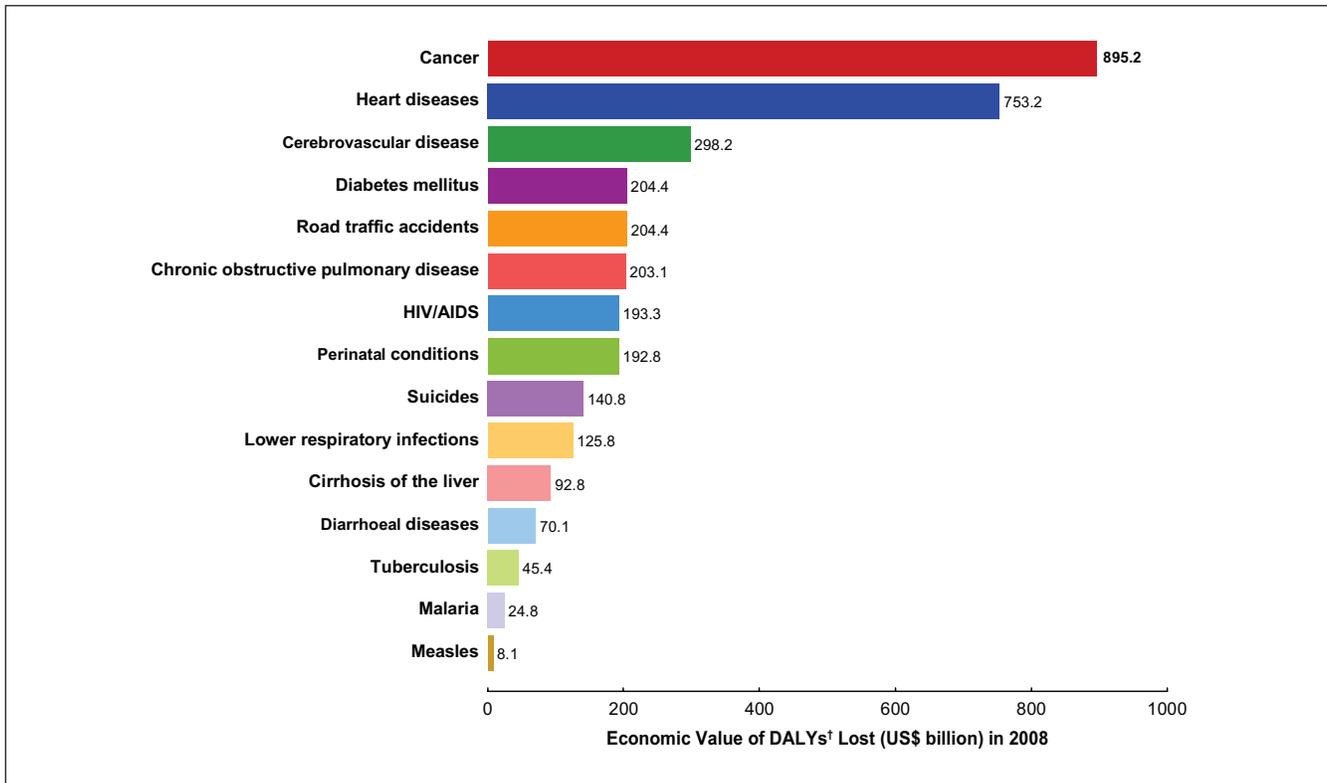
## The Global Problem

Those data calculations for saving thousands more lives per day are based on populations adopting proven prevention behaviors. Some might say this is an overly idealistic public health goal and that we cannot afford to take such an approach. Yet I believe we cannot afford *not* to take this approach.

Globally, cancer has never been a greater threat—and has thus never required greater attention or commitment from all dedicated to the betterment of public health. It is already one of the top leading causes of death globally—World Health Organization projections show cancer surpassing ischemic heart disease as the leading cause of death worldwide early in this century—and it also wreaks economic havoc on nations everywhere. By 2030, the number of people dying worldwide from cancer is expected to nearly double, from 7.6 million in 2008 to a projected 13.2 million deaths in 2030, simply due to the aging and growth of the population. More than 80% of the projected cancer deaths in 2008 are expected to be from low- and middle-income countries (Jemal et al., 2011).

The American Cancer Society and Livestrong released in 2010 a first-of-its-kind report on the economic cost of cancer, showing the disease causes more economic harm than any cause of death worldwide, costing the global economy \$895 billion in premature death and disability in 2008 alone (John & Ross, 2010; Figure 3). Unless there is change, cancer will be *the* disease of the 21st century, simply because of lack of intervention with existing tools and knowledge.

Noncommunicable diseases as a whole—including cancer, cardiovascular disease, diabetes, and respiratory disease—account for more than 60% of deaths worldwide, and yet less than 3% of all public and private developmental funding for



**Figure 3.** Leading causes of economic loss among the world's top 15 causes of death (John & Ross, 2010, p. 8)

Note: DALY = disability-adjusted life year.

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health is spent on these diseases, according to the Center for Global Development (Nugent & Feigl, 2010). Just two non-communicable diseases—cancer and heart disease—account for \$1.6 trillion in lost productivity every year (John & Ross, 2010). Noncommunicable diseases are simply *not* a current global priority and are absent in notable places such as the United Nation's Millennium Development Goals ("The UN Millennium Development Goals Report," 2007), a key driver behind global health funding, as well as agendas for G8 and G20 summit meetings, which have addressed other global threats such as climate change and energy resources.

There is tremendous opportunity to save not only millions of lives but also billions of dollars by addressing the cancer and chronic disease problems around the world. Without effective action, the low- and middle-resource nations of the world will be left to fight communicable diseases such as HIV/AIDS, malaria, and tuberculosis at the same time as they face a growing influx of noncommunicable disease, for which their systems are typically ill equipped.

### Moving the Marble

This global cancer pandemic can, and must, be brought under control. This is a major public health challenge that will require strong collaboration between all sectors—private, nonprofit, and government—to be successful.

The quickest way to achieve this goal is to implement evidence-based policies:

- First, prevent the cancers that are preventable. More than half of all cancer deaths are avoidable by acting on a few prevention practices: maintaining a healthy weight throughout life, adopting a physically active lifestyle, consuming a diet emphasizing plant sources, limiting alcohol consumption, avoiding tobacco, and through public health measures to control certain infections, including immunization. We must also prevent and detect cancers early by screening for those cancers where there is a proven benefit (cervix, colorectal, breast).
- Second, treat the cancers that are treatable. In countries with well-developed medical systems, ensure access to high-quality treatment. Provide assistance to developing countries to address the most pressing cancer treatment needs given local needs and resources.
- Third, fix the fixable within health care systems, which the United States has taken great strides toward doing in recent months.
- Fourth, provide dignified support and symptomatic care for all people facing cancer. Nationally, the Society has had success working to promote patient-centered care and to make symptom management and other aspects of palliative care an integral part of health care for everyone living with serious or life-threatening illness. And internationally, interventions such as the Global Access to Pain Relief Initiative (GAPRI), an American Cancer Society and

Union for International Cancer Control (UICC) endeavor to promote universal access to adequate pain relief can do so much to help give people access to the care they deserve when living with cancer.

- Finally, we must never forget those patients and those cancers for which we still have no answers. Some of these cancers affect the healthiest among us in the prime of their lives. Continued investment in research is needed to make breakthroughs in prevention, early detection, and treatment a reality for those cancers where we have made the least progress, as well as those cancers for which progress has been made but answers are incomplete.

To apply these approaches worldwide will take a concerted and collective effort on many levels to transform global health, beginning with a successful United Nations High-level Meeting on noncommunicable diseases in September 2010. This meeting is a sign of an important paradigm shift in the global health community, one that acknowledges noncommunicable diseases and their need for prominence on the world stage. It is a turning point for noncommunicable diseases, as there have been only 28 High-level Meetings of the United Nations since World War II, and only one of those focused on a health issue—a UN General Assembly special session on HIV/AIDS in 2001, which has largely driven the significant global response to that epidemic. It is vital that leaders in the United States and around the world realize there is no alternative but action. Cancer and all noncommunicable diseases are more than health issues alone—they are also economic and development issues with implications throughout all levels of society.

To move the cancer marble will also require a greater investment in research and a more balanced research portfolio, focusing on what will save lives and have the greatest impact on the disease. But it will also require strong and effective public health education campaigns, while working together in new and different ways to achieve these goals. Much is possible through awareness campaigns; the American Cancer Society has organized many through the years, including those that have helped promote widespread use of the Pap test to screen for cervical cancer and mammography to screen for breast cancer. Community-based interventions are also critical, like those Elizabeth Fries did so well, working under auspices of the Society and the National Institutes of Health to carry out cancer prevention and education programs in rural communities. And undergirding all of this work must be aggressive advocacy for better public policy that will lead to true systems change.

Taking these actions would help transform and balance the world's health agenda, making cancer a global priority, with the potential to strengthen health systems, bolster economies worldwide, move entire regions out of poverty, and save millions of lives.

### Leading a Movement

To enable this progress, however, one aspect must happen—and without it, success will not be possible. Someone will have to step into the breach and lead a movement. One sector

cannot achieve this task alone—it is too great. To bring cancer under control, it will take a collaboration of all sectors—from nonprofits, to private industry groups such as pharmaceutical corporations and biotechnology companies, to government agencies such as the US Food and Drug Administration and the Centers for Disease Control and Prevention—to be successful.

The American Cancer Society is working to help lead this movement, because the opportunities to improve human welfare and save lives are unprecedented. We hope our goals—to save more lives at home and potentially thousands more lives per day worldwide—are a rallying cry for people everywhere committed to defeating this disease. We believe they are attainable, and we will be relentless in pursuit of them, as we have been for the past century in creating more birthdays around the world that cancer would have otherwise claimed.

It has been said that the human being is the only animal that both laughs and cries, and that is because we somehow know the difference between what *is* and what *ought* to be. Health educators are extraordinary human beings because they try every day to change what is into what could be.

This is also the task ahead for all dedicated to the fight against cancer, noncommunicable disease, and to global health at large. As the great American poet Robert Frost wrote, we indeed have “miles to go before [we] sleep.” But a world with less cancer and millions more birthdays on a planetary scale is possible—in this century—if together, we act on the opportunities that lie before us.

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