World Health Organization

Eastern Mediterranean Region

Cairo Call to Action on Breast Cancer: Advancing Equity and Innovation

Breast cancer is the most commonly diagnosed cancer among women worldwide and in the Eastern Mediterranean Region. An estimated 2.3 million women were diagnosed globally in 2022, resulting in 670 000 deaths. However, the global burden is marked by stark inequities across development levels. In countries with a very high human development index (HDI), 1 woman in every 12 will develop breast cancer in her lifetime, and 1 in 71 will die from it. In contrast, in low-HDI countries, only 1 woman in 27 is diagnosed, yet 1 in 48 dies, reflecting critical gaps in early detection, timely diagnosis and treatment access.[1]

Health inequity expands through an intergenerational burden. In 2020, there were 1.04 million new maternally orphaned children as a result of 4.4 million cancer deaths of women worldwide. One quarter of these were due to breast cancer.[2]

In the Region, there are more than 130 000 new breast cancer cases and 52 000 deaths annually.[3] The burden of the disease is exacerbated by multiple risk factors, including entrenched poverty and economic hardship, inadequate health care infrastructure and workforce, low levels of societal awareness and screening uptake, as well as cultural and traditional barriers that often relegate women to secondary status within the household and society. These factors contribute to delays in diagnosis and treatment, leading to poorer outcomes and reduced survival for a disease that is otherwise highly treatable when detected early.

The incidence-to-mortality ratio of breast cancer in the Eastern Mediterranean Region highlights significant health inequities. For instance, in 2022 Jordan reported 60 cases of breast cancer per 100 000 women, with a mortality rate of 19.3 per 100 000. In contrast, Somalia had a lower incidence rate – 38.6 cases per 100 000 women – but a higher mortality rate of 25.7 per 100 000. Egypt, with one of the highest incidence rates in the region at 55.4 per 100 000 women, reported a mortality rate of 19.8 per 100 000.[3]

The 2024 WHO report *Women's cancer in the WHO Eastern Mediterranean Region: Situation analysis and investment case* estimates that by 2050, if strategic interventions are not scaled up and current morbidity and mortality rates remain unchanged, economic losses associated with breast cancer in the Region will reach US$ 408 billion. Conversely, investing in early diagnosis and comprehensive treatment for breast cancer is projected to yield a return of US$ 6.4 to 7.8 for every US$ 1 invested.[4]

Since its launch in 2019, the Egyptian Presidential Initiative on Women's Health has achieved significant progress in the early detection, timely diagnosis and delivery of integrated care for breast cancer,[5] in alignment with the WHO Global Breast Cancer Initiative.[1]

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[1] The global breast cancer initiative [website]. Geneva: World Health Organization (https://www.who.int/initiatives/global-breast-cancer-initiative).

[2] IARC Evidence Summary Brief No. 5: Maternal orphans due to cancer: The intergenerational impact of cancer deaths in women [PDF]. Lyon, France: International Agency for Research on Cancer; 2024 (https://www.iarc.who.int/wp-content/uploads/2024/03/IARC_Evidence_Summary_Brief_5.pdf).

[3] Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, et al. Global Cancer Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer; 2024 (https://gco.iarc.who.int/today).

[4] Women's cancer in the WHO Eastern Mediterranean Region. Situation analysis and investment case report. Cairo: WHO Regional Office for the Eastern Mediterranean; 2024. License: CC BY-NCSA 3.0 IGO.

[5] Deputy Prime Minister and Minister of Health extends his thanks to His Excellency President Abdel Fattah El-Sisi for his concern for women's issues and his support for their health and social well-being. Cairo: Egyptian Cabinet; 2024 (www.cabinet.gov.eg/News/Details/77704).

The Initiative's core model focuses on raising breast health awareness at the community level and providing annual clinical breast examinations for at-risk groups, followed by a fast-tracked referral pathway for diagnostic follow-up and treatment.[6] This approach represents an opportunity for reaching out to high-risk population subgroups in low- and middle-income countries, driven by strong political commitment, with potential for replication in other settings.

On 23 January 2025, the Egyptian Presidential Initiative on Women's Health hosted a high-level dialogue on advancing equity and innovation in breast cancer care alongside the 17th Breast, Gynaecological and Immuno-Oncology International Cancer Conference in Cairo. Building on the deliberations, a set of key commitments is articulated in the Cairo Call to Action.

The Cairo Call to Action is aligned with the Fourth United Nations Political Declaration on the Prevention of Noncommunicable Diseases and Mental Health, adopted in September 2025, which reaffirms the high-level political commitment to accelerating action in the next phase of the global noncommunicable disease response, including breast cancer. It serves as a practical and unifying framework to galvanize partnerships and scale up proven, effective, evidence-based and innovative interventions, ensuring that no woman is left behind.

This Call to Action represents a tangible step towards advancing regional solidarity and sustained collective action for women's health and well-being throughout the Region and beyond.

[6] Azim HA, Kassem L et al. Clinical breast examination for early diagnosis of breast cancer: An Egyptian nationwide study. Ann Oncol. 2023. 34 (suppl_2):S925–S953. DOI: 10.1016/S0923-7534(23)01945-2.

Building on this shared vision and political momentum, the Cairo Call to Action calls upon all WHO Member States of the Eastern Mediterranean Region and global partners to renew and accelerate their commitment to breast cancer control.

National governments should:

1. Promote a comprehensive approach to improving public awareness of breast health, breast cancer risk factors, screening and the consequences of late diagnosis, including through health promotion and early detection by:
    - developing targeted breast awareness outreach campaigns to reach all women, especially those at high risk and in vulnerable situations, using evidence-based, internationally recognized and culturally sensitive messaging;
    - in partnership with national media outlets, promoting awareness of the importance of maintaining a healthy body weight and breastfeeding, and avoiding alcohol and tobacco/nicotine products, and supporting the creation of enabling environments that make these choices accessible and sustainable;
    - enhancing training for the health workforce, particularly those in primary health care settings, to communicate information effectively and empathetically about breast health awareness and breast cancer and its associated risk factors;
    - engaging local and religious leaders to address cultural misconceptions and reduce stigma around breast cancer;
    - leveraging survivor testimonials and culturally sensitive storytelling to combat breast cancer stigma and discrimination, inspire early care-seeking behaviours and make information accessible, relatable and impactful for diverse audiences.
2. Invest in strengthening the health system and establishing effective referral pathways, particularly in low-resource settings, to ensure early detection, timely diagnosis and comprehensive breast cancer management by:
    - strengthening primary health care centres as the first point of contact for early breast cancer detection by training the health workforce to enhance their capacity for early diagnosis and timely referral to treatment;
    - developing robust referral systems that overcome geographical and socioeconomic barriers, ensuring a seamless continuum of care across all levels of the health system;
    - mobilizing and allocating resources to equip health care facilities with essential diagnostic and treatment capabilities, including mammography, imaging and pathology services;
    - establishing or strengthening national cancer registries to support evidence-based planning, equitable resource allocation, and robust monitoring of cancer burden, outcomes, disparities and equity in breast cancer care;
    - strengthening and expediting the integration of breast cancer data into national health information systems, cancer registries and digital health platforms.
3. Enhance access to multidisciplinary teams and psychosocial support along the breast cancer care continuum, ensuring holistic and patient-centred care, including palliative care and the integration of survivors into the community.
4. Promote research and development, along with flexible regulatory pathways, to accelerate access to innovative diagnostics and therapies for both early-stage and metastatic breast cancer.
5. Collaborate with community-based organizations to expand access to affordable care for marginalized populations and close gaps in service delivery.
6. Implement patient-centred policies that reduce barriers to support services and streamline care pathways, ensuring patients can access the services they need in a timely and equitable manner.
7. Expand/introduce the provision of patient navigators to guide individuals through the health care system, helping them understand available services, their entitlements and how to efficiently access the care they need.

Civil society and partner organizations should:

1. Leverage culturally sensitive health education to combat breast cancer-related stigma, misinformation and discrimination, encourage early care-seeking behaviour and ensure that information is accessible, relatable and impactful for diverse audiences.
2. Identify, document and disseminate innovative approaches that address the specific needs of those in vulnerable situations, ensuring that lessons learned are shared and accessible to all relevant stakeholders.
3. Establish a regional platform to exchange experiences, share the latest data and outcomes and foster collaborative research and resource mobilization.
4. Advocate for the establishment of regional funding mechanisms to support breast cancer initiatives targeting underserved populations, ensuring that resources are allocated where they are most needed.

The World Health Organization and other United Nations organizations should:

1. Support Member States in the WHO Eastern Mediterranean Region in designing, implementing and reviewing breast cancer policies and programmes to create an enabling environment for the delivery of high-quality, timely and equitable breast cancer care.
2. Establish a robust monitoring and evaluation framework and provide regular progress updates to Member States on the achievement of the WHO Global Breast Cancer Initiative 60–60–80 targets, highlighting areas for learning, adaptation and improvement at Regional Committee meetings.
3. Supplement the monitoring and evaluation framework with adaptable implementation toolkits to support Member States in operationalizing context-specific national approaches to breast cancer care.
4. Establish mechanisms to strengthen the supply chain for breast cancer medicines and health technologies, including conducting landscape analyses and maintaining an updated pipeline to track innovations in alignment with ethics, equity and human rights.
5. Strengthen collaboration with global research institutions and regional and national regulatory bodies to shape the global breast cancer research agenda and address persistent inequities and disparities.
6. Establish a regional expert network and a South–South collaboration platform on breast cancer to support alignment with and cross-learning between national cancer control plans.
7. Establish a coordination mechanism to develop a regional roadmap for implementing the Cairo Call to Action.

We, the partners of this Cairo Call to Action, affirm our unwavering commitment to advancing a new era of regional solidarity and global cooperation in breast cancer care. We pledge to intensify South–South collaboration, institutionalize the exchange of proven and promising practices, and drive a shared innovation agenda that is rooted in equity, sustainability and the lived realities of women across our Region and beyond. This is our collective moment to lead, to act and to ensure that no woman is left behind.