

[International Day of the African Child](#) [1]

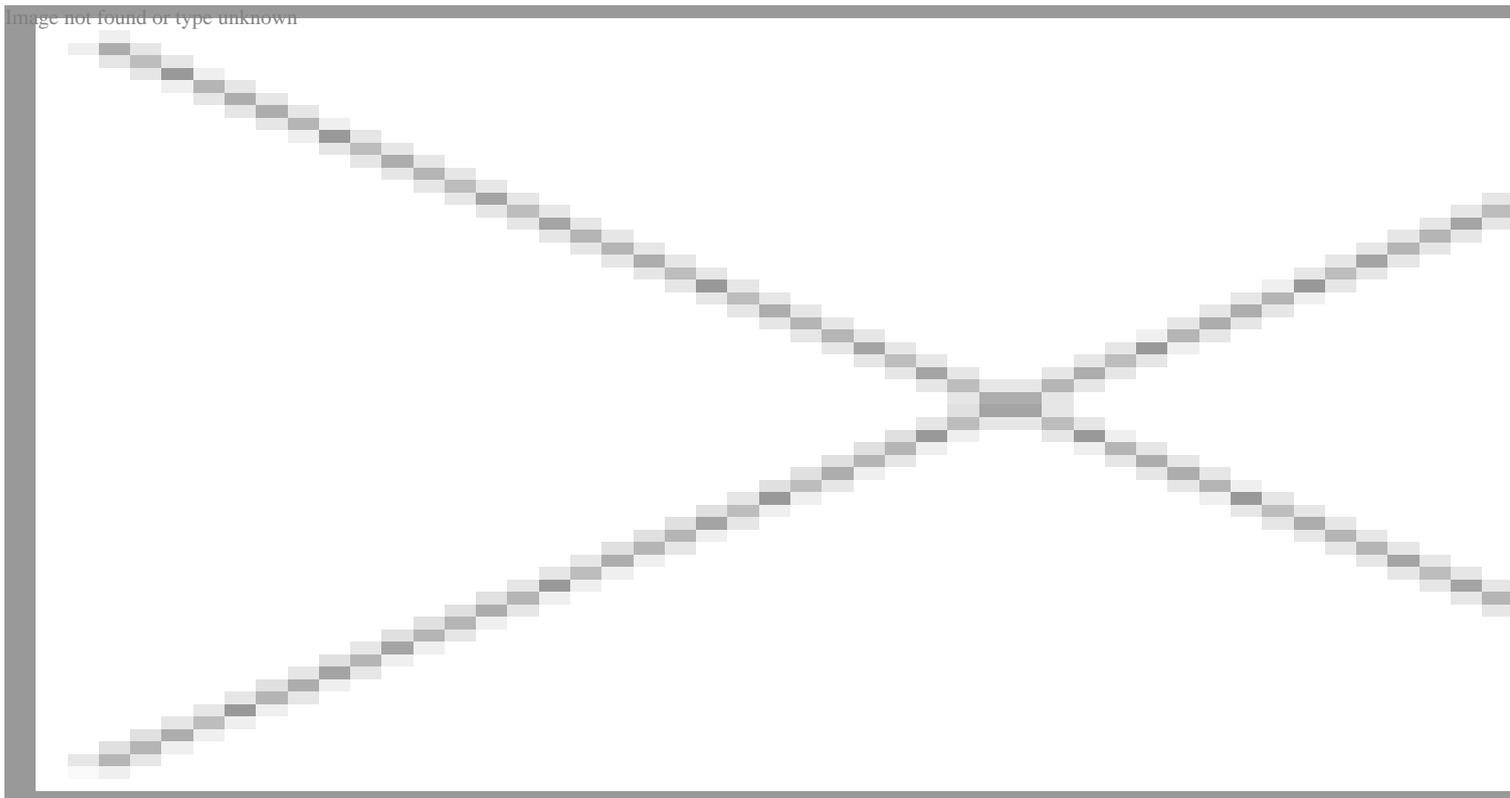
Publish Date:

16 June 2021 08:22 BST

June 16 marks The International Day of the African Child. For World Child Cancer, it is an opportunity to shine a light on the barriers to diagnosis and treatment that many children with cancer in Africa face and what must be done to address these inequalities. At the same time, we celebrate the strength and resilience of these families, and the doctors, nurses and social workers involved in their care.

Most childhood cancers are curable. For children in the UK, USA and much of Europe, as many as 9 in 10 will survive [[gov.uk](#) [2], 2017]. But for those in low and middle-income countries – who make up the majority of the 400,000 children who will develop cancer each year – the prognosis is bleak. Their chance of survival can fall as low as 10% [[WHO](#) [3], 2021].

In much of Sub-Saharan Africa, public and professional awareness of childhood cancer is dangerously low. Opportunities for early diagnosis are missed. Referrals are delayed. And there are not enough health workers with the specialist skills to diagnose and treat the disease.



But the solution already exists. The challenge is making sure that every child gets the diagnosis, treatment and support they need.

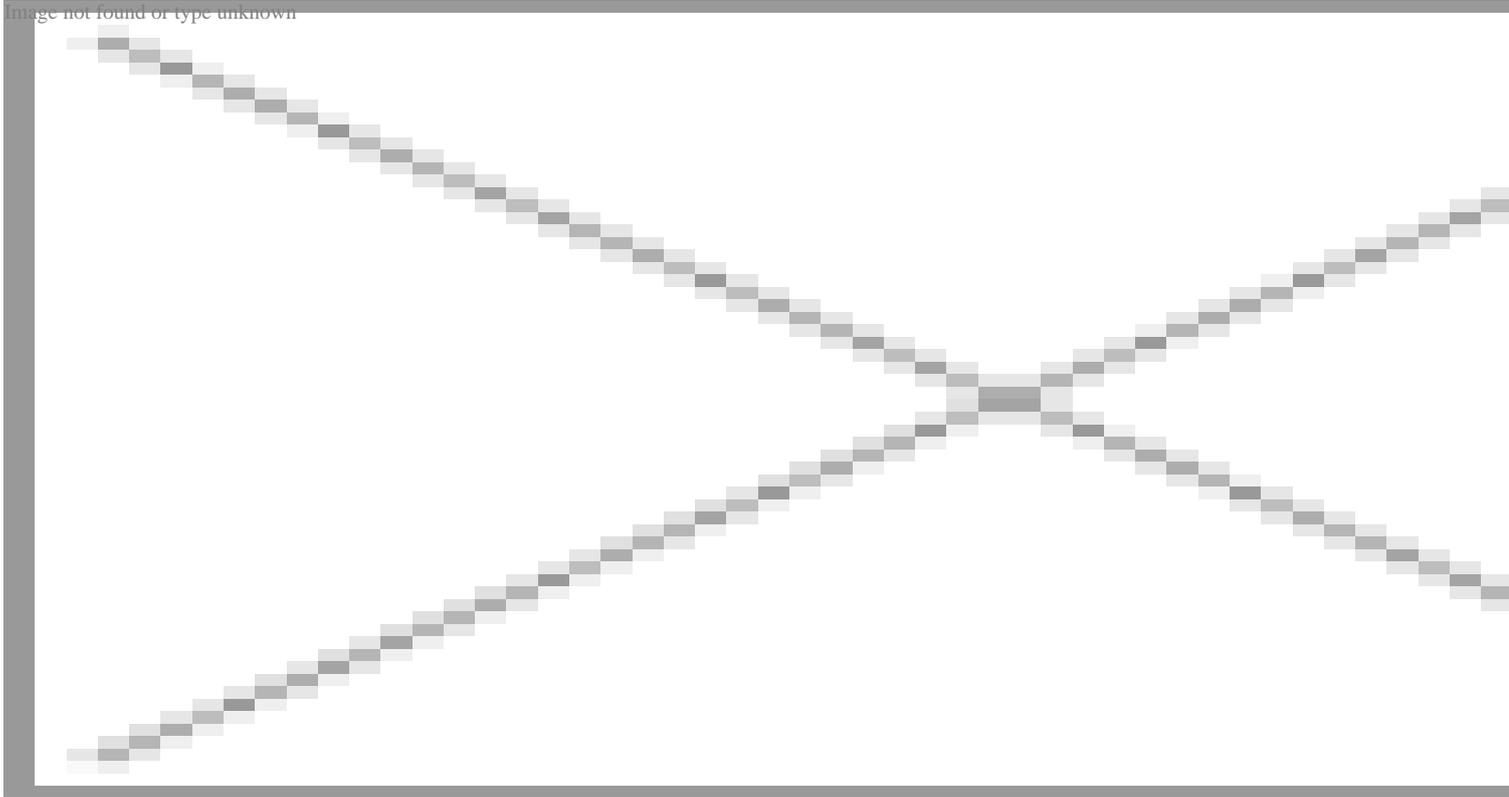
In 2018, the WHO set an ambitious target to raise global childhood cancer survival rates to 60% by 2030. World Child Cancer is part of its taskforce, and at the heart of its strategy are the four pillars underpinning

its programmes:

- Improving the quality of childhood cancer care.
- Increasing the rate of diagnosis among children with cancer.
- Providing financial and psychosocial support to families and children.
- Influencing policy and public opinion on the need to do more on childhood cancer.

At the core of World Child Cancer's approach is working in partnership with healthcare providers, civil society organisations and generous donors that support children with cancer across the world.

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Dr Cathy Segbefia, a paediatric oncologist in Ghana, says,

“I love what I do because it makes a real difference in the lives of children and families. If we do have families that come in early, if we do have treatment available, if we can do the tests that we need to do – then the outcomes are generally good.

[Video of Healthcare Access Pioneer – Dr. Cathy Segbefia](#)

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Links

[1] <https://sbx.sandoz.com/news/international-day-african-child>

[2] <https://publichealthmatters.blog.gov.uk/2017/02/01/childhood-cancer-statistics-what-can-we-learn-from-new-data/>

[3] <https://www.who.int/news-room/fact-sheets/detail/cancer-in-children>