International Agency for Research on Cancer

World Health Organization

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Global platform on childhood cancer survival highlights striking disparities

Lyon, France, 13 February 2026 – In 2022, more than 200 000 children younger than 15 years were diagnosed with cancer worldwide, and about 75 000 died from the disease, according to the Global Cancer Observatory.

Although childhood cancer rates are highest in North America and Europe, nearly 94% of deaths from the disease occur in Africa, Asia, South America, and the Caribbean. In these regions, children are almost twice as likely to die from cancer as those in Europe and North America.

To mark International Childhood Cancer Day, the International Agency for Research on Cancer (IARC) today launches the new SURVCAN subsite, a visualization platform on survival, dedicated to childhood cancer. Drawing on data from 47 cancer registries in 23 countries, SURVCAN provides the most comprehensive high-quality population-based data from Africa, Asia, and Latin America and the Caribbean. The project assessed cancer survival of almost 17 000 children at 1, 3, and 5 years after diagnosis, and the results reveal stark inequalities across regions, countries, cancer types, and levels of development.

“Cancer survival tells a striking story of global inequality. Although in high-income countries more than 80% of children with cancer survive at least 5 years after diagnosis, in selected low- and middle-income countries the 5-year survival proportion is as low as 37%,”[1] says Dr Isabelle Soerjomataram, Deputy Head of the Cancer Surveillance Branch at IARC. “The survival gaps highlighted in SURVCAN show that a child’s chance of surviving cancer still depends far too heavily on where they are born.”

Striking inequalities in global childhood cancer survival

Across regions

Childhood cancer survival is lowest in sub-Saharan Africa and highest in the Caribbean and Central America. It increases steadily with national income and Human Development Index (HDI). Leukaemia, central nervous system tumours, and lymphomas account for more than 60% of childhood cancer cases, but outcomes vary widely.

For childhood leukaemia, which accounts for nearly one third of all childhood cancers, devastating disparities are seen. The 3-year survival ranges from less than 40% in sub-Saharan Africa to almost 90% in the Caribbean and Central America, with particularly poor outcomes for acute myeloid leukaemia (AML) in low-income countries. Differences are also seen for other major cancer types in children. Survival for central nervous system

[1] Daltveit DS, Morgan E, Bardot A, Steliarova-Foucher E, Damie A, Hagenimana M, et al. (2025). Childhood cancer survival in Africa, Asia, Latin America and the Caribbean, during 2008–2017 (SURVCAN-3): a population-based benchmarking study of 16 821 children. *J Natl Cancer Inst*. Published online 15 December 2025. https://doi.org/10.1093/jnci/djaf321

tumours and some lymphoma subtypes remains low in many regions, highlighting gaps in timely diagnosis and treatment.

Across countries

The childhood cancer survival gap between countries is striking, and it exists even within the same world region. For example, in Central and South America 3-year survival rates for childhood leukaemia vary dramatically. In Puerto Rico, survival is 89%, and in Costa Rica it is more than 85%. However, in Ecuador survival is only about 50%.

Despite regional efforts to standardize treatment guidelines, differences in diagnostic and treatment access as well as health system capacity drive these large disparities in outcome.

Childhood leukaemia is one of the most curable childhood cancers, with survival rates of more than 90% in high-income countries when diagnosed early and treated with risk-adapted chemotherapy.

Across cancer types

Childhood cancer survival also varies widely by cancer type. The outcomes are best for testicular cancer (boys) or ovarian cancer (girls) (79–94% at 3 years across regions). The outcomes are worse for brain tumours (38% in Colombia to 80% in Puerto Rico; often less than 60% in more than half of the countries included in this database). Children with eye cancers (retinoblastoma), kidney tumours, and skin cancers have a good chance of survival almost everywhere. For example, the survival rate of eye cancer is 94% in Asia and 91% in the Caribbean, but that of bone tumours is only 36% in Rwanda. The biggest gaps in survival are seen for blood cancers (53–91%) and leukaemia (30–89%); these are tied to access to diagnosis and treatment.

This proves that cure is possible for more than 80% of children with cancer when comprehensive services are accessible and available.

“Children in low- and middle-income countries face far greater challenges. Delayed diagnosis, limited access to treatment, treatment-related deaths, interrupted care, and relapse all contribute to significantly lower survival rates,” says Dr Freddie Bray, Head of the Cancer Surveillance Branch at IARC. “Although progress has been made, these disparities in outcomes highlight the urgent and ongoing inequalities in childhood cancer care worldwide.”

Note to editors

This database builds on IARC’s Cancer Survival in Countries in Transition (SURVCAN) project in collaboration with the Global Initiative for Cancer Registry Development (GICR), aiming to improve national capacity to collect and analyse high-quality cancer survival data. This new database compiles survival estimates for children aged 0–14 years diagnosed between 2008 and 2017, covering 13 major cancer sites across 47 population-based cancer registries.

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IARC plays a central role in collecting, analysing, and sharing high-quality population-based cancer data worldwide. This work supports global efforts, including the World Health Organization (WHO) Global Initiative for Childhood Cancer, and collaborations with partners such as St. Jude Children's Research Hospital (USA), to strengthen cancer registration, which can then improve diagnosis and treatment and ultimately improve survival for children in low- and middle-income countries.

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The International Agency for Research on Cancer (IARC) is part of the World Health Organization. Its mission is to coordinate and conduct research on the causes of human cancer, the mechanisms of carcinogenesis, and to develop scientific strategies for cancer control. The Agency is involved in both epidemiological and laboratory research and disseminates scientific information through publications, meetings, courses, and fellowships. If you wish your name to be removed from our press release emailing list, please write to com@iarc.who.int.

From 19 to 21 May 2026, IARC will mark its 60th anniversary with the IARC@60 conference, bringing together leading experts to reflect on six decades of cancer research and prevention. The conference will highlight scientific advances, global collaboration, and emerging challenges in cancer control. IARC@60 will also look ahead, shaping priorities for the future of cancer research worldwide.