

Eliminating Disparities in Cancer



Despite notable advances in cancer prevention, screening, and treatment, not all individuals benefit equally from this important progress. The American Cancer Society Cancer Action Network (ACS CAN) is actively pursuing evidence-based public policies at all levels of government that seek to reduce these disparities and improve health outcomes for all individuals, regardless of race, ethnicity, gender, age, sexual orientation, socioeconomic status (SES) or zip code.

Examples of our federal advocacy include:

ACCESS

Because:

- **Black and Hispanic** cancer patients are **more likely to be uninsured** than whites;
- **Low-income** cancer patients who live in **non-Medicaid expansion** states are **3.5 times more likely to be uninsured**, and **less likely to receive early stage diagnosis** of lung, breast and colorectal cancers;
- **Hispanic, Latinx, American Indian and Alaskan Native** adults are **least likely to have a usual place to go for medical care**;
- Cancer survivors report the **greatest medication non-adherence due to cost** if they are **uninsured, female**, or from **communities of color**; and
- Only 36% of smaller hospitals have **palliative care teams**, creating a lack of access for **rural Americans**...

ACS CAN is:

- Ensuring **Affordable Care Act (ACA)** provisions are preserved that aid lower SES and people of color, including marketplace subsidies, protections for individuals with preexisting conditions, and access to affordable prescriptions;
- Ensuring cancer patients who receive **Medicaid** have **adequate access and coverage** without unintentional barriers to care for low-income individuals (e.g., work requirements); and
- Advocating for increased education and research on palliative care by passing the **Palliative Care and Hospice Education & Training Act (PCHETA)** and working to execute strategies to support palliative care in rural areas and communities of color.



EARLY DETECTION

Because:

- **Asians, Hispanics and Latinx, American Indians and Alaskan Natives** are **least likely to be screened for cancer**, overall;
- **Uninsured women 40-64** are **half as likely to have gotten a mammogram** in the past two years than insured women; and
- Individuals living in the **South and Midwest** are **less likely to have been screened for colorectal cancer** than those in the Northeast and Mid-Atlantic...

ACS CAN is:

- Advocating for increased funding for the **National Breast and Cervical Cancer Early Detection Program (NBCCEDP)** which provides cancer screening to low-income, uninsured and underinsured women – a majority of whom are women of color; and
- Advocating for increased funding for the **Colorectal Cancer Control Program (CRCCP)**, which has the potential to significantly improve screening rates for low income and uninsured populations.



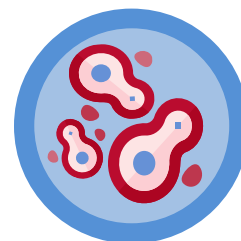
RESEARCH

Because:

- **Communities of color** are often **underrepresented in clinical trials**;
- Individuals age **65 and older** are **less likely to be included in clinical trials** than younger individuals;
- Individuals from **low-income households** are **less likely to be included in clinical trials**; and
- Cancer registries capture **race and ethnicity in broad categories** that may **mask disparities**...

ACS CAN is:

- Pursuing passage of the **Henrietta Lacks Enhancing Cancer Research Act** to ensure clinical trials enroll diverse patient populations; and
- Supporting policies to fund, collect, and make available **detailed data on race, ethnicity and SES**, to equip researchers and policymakers to better understand and respond to cancer disparities.



ACS CAN is fighting to achieve health equity, the just and fair opportunity for everyone to prevent, find, treat and survive cancer - regardless of how much money they make, the color of their skin, their sexual orientation, their gender identity, their disability status, or where they live.

Learn more about our advocacy work at the federal, state and local levels to eliminate disparities and improve cancer-related outcomes for all individuals at fightcancer.org/healthdisparities.