

The Need for an Equitable Cancer Care Delivery System

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Despite scientific and medical advances, the incidence and mortality rates of cancer remain disproportionately high among certain populations. Geographic location now plays a significant role

in predicting cancer mortality due to several factors, including socioeconomic status, race and ethnicity, and access to care.

People with lower socioeconomic status are more likely to be diagnosed with cancer and to die from the disease; they are more likely to live in areas with poor air quality, to have unhealthy diets, and to have less access to preventive care. These people are also more likely to delay seeking care, which can lead to later-stage diagnosis and poorer outcomes.

A study by the American Cancer Society found that people with low socioeconomic status were more likely to be diagnosed with breast cancer at a later stage than people with high socioeconomic status.¹ They were also more likely to die from breast cancer, even after adjusting for other factors such as age, race, and stage at diagnosis.¹ People of color are also more likely to be diagnosed with cancer at a later stage when the disease is more difficult to treat.


Another study by the National Cancer Institute found that Black Americans were more likely to be diagnosed with prostate cancer at a later stage than other men.² Black Americans were also more likely to die from prostate cancer, even after adjusting for factors such as age, stage at diagnosis, and treatment.²

Inequity in cancer care is a major public health problem that cannot be ignored. This inequity reveals a gaping hole in our healthcare delivery system; one that was only exacerbated by the COVID-19 pandemic. More patients seeking cancer care today are more likely to present with advanced disease due to gaps in screening during the pandemic, adding more pressure to an already strained cancer delivery system.

Fixing this inequity may not be that far out of our reach. However, a fair dose of determination and alignment among all stakeholders in the

cancer care delivery system is necessary to implement solutions like those below:

- Expand access to health insurance and improve access to preventable care. This solution will allow patients to seek care earlier and providers to detect and treat cancers before they become more advanced.
- Leverage technology to improve access to care. Technology is an essential tool to help reduce barriers to cancer care for people living in underserved areas. Embracing and investing in the right technology will help providers identify our most vulnerable patients and intervene before it is too late.
- Improve diversity in the healthcare workforce. A more diverse workforce leads to inclusion of ideas that can help us expand how we deliver care. A more diverse workforce also provides the opportunity to build trust with patients in underserved areas.
- Fund research to understand the root causes of cancer care disparities. These data will allow us to develop effective interventions that improve cancer care equity and help us engineer best practices into our processes.

Making cancer care more equitable is a complex challenge, but one worth fighting for. We all have a responsibility and a role to play to ensure all patients access to the care they need. ACCC's long-time motto, "Together We Are Stronger" holds true in this scenario. Only by working together can we protect our most vulnerable patients. 

References

1. Giaquinto AN, Sung H, Miller KD, et al. Breast cancer statistics, 2022. *CA Cancer J Clin.* 2022;72(6):524-541. [doi: 10.3322/caac.21754](https://doi.org/10.3322/caac.21754)
2. Lillard JW, Jr, Moses KA, Mahal BA, George DJ. Racial disparities in black men with prostate cancer: a literature review. *Cancer.* 2022;128:3787-3795. [doi: 10.1002/cncr.34433](https://doi.org/10.1002/cncr.34433)

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