A Summary of the American Cancer Society Report to the Nation: Cancer in the Poor

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On July 17, 1989, the American Cancer Society issued a compelling "Report to the Nation," which found that poor Americans are forced to accept substandard health care services and endure assaults on their personal dignity when seeking treatment for cancer. The report, which described the nature and extent of problems poor people face when seeking cancer education, prevention, detection, and treatment services in America, was released to key health policymakers at a special briefing in Washington, DC.

The American Cancer Society estimates that the survival rate of poor people with cancer is 10 to 15 percent lower than that of other Americans.

Copies of the report were submitted to President George Bush, congressional leaders, Health and Human Services Secretary Louis Sullivan, Assistant Secretary of Health and Human Services James Mason, and key members of the White House domestic policy staff.

The American Cancer Society's "Report to the Nation" was the culmination of a series of fact-finding hearings the Society held in collaboration with the National Cancer Institute (NCI) and the Centers for Disease Control (CDC) in May and June. At these hearings, the Society heard testimony from poor people of all races who have been affected by cancer—economically disadvantaged whites, blacks, Hispanics, American Indians, and older people—as well as from professionals who serve the disadvantaged. Nearly 70 poor Americans and 100 health professionals appeared at the hearings to tell their stories. More than 70 other individuals submitted written testimony.

Description of the Hearings

The hearings were held in government buildings, churches, community centers, business offices, and health centers in seven regional cities: Atlanta, Georgia; El Paso, Texas; Jackson, Mississippi; Newark, New Jersey; St. Louis, Missouri; Phoenix, Arizona; and Sacramento, California.

At each hearing a panel listened to, and asked questions of, the people presenting testimony. The panel consisted of four ACS officials, one representative each from CDC and NCI, and one state or local policymaker.

The individuals who presented testimony had approximately 10 minutes to make their presentations and then another five minutes to respond to questions from
the panel. At each hearing, there were 10 to 15 scheduled testifiers, in addition to a one-hour session for open testimony and questions. To ensure broadest possible participation, the American Cancer Society actively solicited written testimony from individuals or groups unable to be present at the hearings.

The testimony focused on cancer prevention and control. Because the needs of poor Americans are influenced by a variety of social and economic factors, broader issues were also discussed.

The objectives of the hearings were to determine the magnitude of unmet cancer prevention and control needs among the disadvantaged; identify model programs and strategies that address these needs; identify barriers to serving the economically disadvantaged, as well as possible ways to meet this challenge most effectively; and identify and bring together American Cancer Society and other experts to share experiences and needs and explore potential areas of collaboration to address this problem.

Findings

The report found that the five most critical issues related to cancer and the poor were:

1. Poor people endure greater pain and suffering from cancer than other Americans.
2. Poor people and their families must make extraordinary personal sacrifices to obtain and pay for care.
3. Poor people face substantial obstacles in obtaining and using health insurance and often do not seek care if they cannot pay for it.
4. Current cancer education programs are culturally insensitive and irrelevant to many poor people.
5. Fatalism about cancer is prevalent among the poor and prevents them from seeking care.

10 Challenges for the Nation

The American Cancer Society’s “Report to the Nation” identified 10 specific challenges the country will face in addressing the problems poor people currently encounter when seeking cancer education, prevention, detection, and treatment services. These challenges are to:

1. Ensure that cancer prevention, detection, treatment, and rehabilitation services are accessible and available to all who need them, regardless of their ability to pay.
2. Improve cancer prevention and early detection among poor Americans to eliminate unnecessary pain, suffering, and death.
3. Undertake aggressive educational efforts to counteract fatalism, overcome fears, and enable poor people to reduce cancer risk.
4. Improve and expand public and private assistance for the poor, including health insurance.
5. Develop cancer education materials and outreach programs that are culturally sensitive, understandable, and relevant to poor people.
6. Establish patient advocate and referral services to help poor patients navigate the health system and manage personal problems that result from cancer treatment.
7. Involve community organizations serving the poor and poor people themselves in cancer education and patient advocacy programs.
8. Train health care providers to be sensitive to the needs of poor patients and to serve their needs more effectively.
9. Expand the availability of and accessibility to health services for poor people of rural areas, which are now underserved.
10. Conduct research to further document the scope of the problem and identify effective interventions.

American Cancer Society Commitment

American Cancer Society Chairman of the Board Kathleen Horsch announced at the briefing the Society’s commitment to a three-year demonstration project, designed to help develop and promote unique and effective ways to address the cancer education, prevention, detection, and treat-
ment needs of the poor. The Society has authorized $1.8 million in grants for three selected communities to develop and test new model programs that can be duplicated in other communities. The demonstration programs are scheduled to begin in October 1989.

Further Information

Additional information about the hearings or a copy of the full report can be obtained from Daniel Hoskins, American Cancer Society, 1599 Clifton Road, NE, Atlanta, Georgia 30329, 404-329-7634.

American Cancer Society
Great American Smokeout
November 16, 1989

This year's American Cancer Society Great American Smokeout—the 13th annual nationwide event urging smokers to quit, even if only for the day—is scheduled for Thursday, November 16. Physicians, nurses, dentists, and other health professionals, particularly those in primary care, are in a unique position to help their patients make the decision to quit smoking and to encourage young people never to start. Several studies have shown that most smokers would be influenced to stop smoking if their doctors urged them to do so.

As always, your local American Cancer Society will make available a variety of brochures, posters, T-shirts, buttons, stickers, and decals for your patients who are attempting to quit.

Also available especially for health professionals is the new "Tobacco-Free Young America Kit for the Busy Practitioner." This folder contains a number of printed materials and ideas designed to make the job of helping patients quit easier.

These and other quit-smoking materials are available free of charge from your local American Cancer Society.