

Unfairand Unjust

Cancer inequities



Cancer hurts all of us, but it's hurting some of our friends, family, and neighbors more than others. If we want to put an end to cancer cases and deaths, we need to understand how these inequities are created and perpetuated.

PLACE

Cancer deaths are more common in rural counties than in denser ones.

Rural

Urban

180 deaths

per 100,000 persons¹

158 deaths per 100,000 persons¹

* Closing this equity gap requires making key cancer screenings available at home.

COMPENSATION

People who have paid sick leave are more likely to get screened for cancer than those who don't.

Within *2 years* after mandating paid sick leave in 57 metros in the U.S.,

COLORECTAL CANCER SCREENINGS INCREASED

BREAST CANCER SCREENINGS INCREASED



8.1%

9 3.3%

Closing this equity gap requires making screenings available outside of traditional care settings.

RACE

Black men are more than twice as likely to die of prostate cancer than non-Hispanic white men.

Black Males White Males

~6,000

~3,000

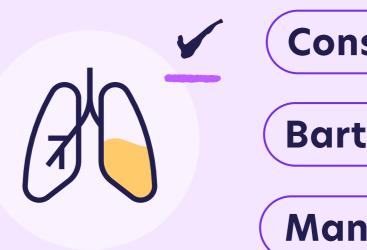
deaths per year³

deaths per year³

Closing this equity gap requires making more specific screenings more accessible and affordable for specific, high-risk populations.

OCCUPATION

People with certain occupational and environmental exposures are at higher risk for developing lung cancer.



Construction⁴

Mining

Bartending

Trucking

Manufacturing and more

* Closing this equity gap means tailoring cancer screening programs for industry risk.

Sources: (1) National Library of Medicine. Invasive Cancer Incidence, 2004-2013, and Deaths, 2006-2015, in Non-metropolitan and Metropolitan and Metropolitan Counties - United States. Published July 7, 2017. (2) Callison K, Pesko MF, Phillips S, Sosa JA. Cancer Screening after the Adoption of Paid-Sick-Leave Mandates. N Engl J Med. 2023;388(9):824-832. (3) American Cancer Society. Cancer Facts & Figures for African American/Black People 2022-2024. (4) Translational Lung Cancer Research. Environmental and occupational determinants of lung cancer. Published May 30, 2019.



The Color approach

Color's programs and screening protocols can be tailored to populations who may be at an increased risk based on environmental, inherited, and other behavioral factors.

Accessibility

We make screenings available for people on their own time by bringing screenings directly to members' homes and scheduling in-person visits when it works best for them. can delay care.

Affordability

We remove cost barriers to referrals and prescriptions for covered screenings because we know co-pays

Want to learn more?

Get in touch with our team of experts at learnmore@color.com

Inclusivity

Our care teams undergo diversity, equity and inclusion training and lead with empathy and open communication.

color.com/cancer