

Increased State Spending Boosted Survival for Black People With Cancer

Each 10% increase in state spending decreased racial disparities in five-year overall survival by 5%.

June 15, 2022 By Laura Schmidt

Five-year overall survival for Black patients with cancer improved and racial disparities in survival decreased when states increased their spending on social welfare programs, including via expanding Medicaid, according to study findings presented at the 2022 annual meeting of the American Society of Clinical Oncology (ASCO), held earlier this month in Chicago.

As a starting point, researchers found that the five-year overall survival for non-Hispanic Black people with cancer was 10.8% lower than that of their white counterparts. Black patients in states that increased their investments in social services programs by at least 10%, experienced a cancer survival improvement compared with Black patients in states that didn't increase such spending.

For the study, researchers at Washington University School of Medicine in St. Louis examined records from nearly 3 million adults ages 18 and older who were newly diagnosed with cancer from 2007 to 2016. They also looked at data from the U.S. Census Bureau on annual state spending.

They found that states with higher investment in public welfare programs had higher five-year overall survival for non-Hispanic Black patients with cancer. In fact, every 10% increase in public welfare spending was linked to an 8.6% improvement in cancer survival among Black patients, nearly four times greater than the overall increase in survival when compared with all patients with cancer, [according to MedPage Today](#).

The increase in spending was also associated with a decrease in [the disparities](#) in survival between Black and white patients in a variety of cancers. Each 10% increase in state spending narrowed racial disparities in five-year overall survival by 4.6%.

“There is evidence that spending by states on various social services can mitigate structural racism and partially address social determinants of health, such as financial stability, education, place of residence and insurance status, but such spending has also been associated with declines in racial and ethnic disparities, leading to unknown overall survival outcomes for patients with

cancer,” said lead author Justin Michael Barnes, MD, MS, of the Department of Radiation Oncology at Washington University School of Medicine in St. Louis, [in a news release](#).

Five-year overall survival for Black patients increased in the following cancer types: [breast](#) (6.15% survival increase), [cervix](#) (11.9%), [colorectum](#) (4.42%), [head and neck](#) (9.41%), [liver](#) (7.02%), [ovary](#) (8.95%), [bladder](#) (8.18%) and [uterus](#) (14.1%).

“This study underscores the critical role that state social welfare spending, including Medicaid expansion, plays in reducing cancer outcome disparities,” said ASCO chief medical officer and executive vice president Julie R. Gralow, MD, FACP, FASCO. “State-funded programs can reduce barriers to accessing cancer care and impact survival.”

Click here to read the [study abstract](#).

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