

Closing the Breast Cancer Gap: A Roadmap to Save the Lives of Black Women in America

ST. LOUIS, MO

BREAST CANCER RACIAL DIVIDE

St Louis Black Women Nearly Twice as Likely to Die from Disease

A new study from Susan G. Komen reveals stunning racial inequities in breast cancer outcomes in the St Louis area. Despite being more likely to get screened than white women, Black women in St. Louis City and St. Louis County are substantially more likely to die from the disease.

The lack of affordable insurance is noted as a primary factor. Limits on coverage, high deductibles and copays often force women to choose between health care and day-to-day needs. Missouri's rejection of Medicaid expansion and the closure of a local public hospital also contribute to poor access to screening and care, resulting in more late-stage diagnoses with higher mortality rates.

Segregated neighborhoods and the high cost of transportation also play a significant role. In each of the priority counties within the St. Louis MTA, high-quality diagnostic and treatment facilities tend to be farther away from underserved Black communities. Changing guidelines around breast cancer screening also feed into misconceptions and add to barriers to proactively screen. Participants observed that there are mixed messages across providers, including how often to get a screening mammogram.

“Having no insurance or being underinsured is a large contributing factor to the inability of a woman to get screened routinely and in treatment. Some of the highest breast cancer mortality rates we see are in the inner North County, which has many zip codes where one in four households are uninsured.”

- Provider

KEY TAKEAWAYS

- Black women in St. Louis County and St. Louis City are more likely than white women to be screened for breast cancer, but almost twice as likely to die from the disease.
- The four counties with the largest Black populations have the greatest percentage of people who are medically underserved, low-income and experience food insecurities.
- Decades of discriminatory practices have led to striking segregation in the St. Louis MTA
- Lack of insurance and the poor quality of available and affordable insurance programs were principle contributing factors to treatment inequities.

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