

New ACS Study Finds Cancer Survival Rates Lower in Rural Areas, Aligned With Disparities in Receipt of Care

American Cancer Society researchers stress the need to increase access to cancer care for historically marginalized populations to help mitigate disparities

ATLANTA, September 24, 2025 — A new study led by researchers at the [American Cancer Society](#) (ACS) shows that the overall five-year cancer survival rates for each stage of cancer (localized, regional, distant) were lower in non-metropolitan areas for Black and White individuals in the United States. The results also find that survival rates are lower for Black persons compared to White persons across various cancer types and in several stages and categories of urbanicity, especially for breast and colorectal cancers. Urbanicity was defined as the degree to which an area is considered urban or rural, ranging from highly populated metropolitan areas to rural settings. Lower cancer survival generally aligned with lower receipt of cancer treatment. The [study](#) is published today in [Cancer](#), an international, interdisciplinary journal of the American Cancer Society.

“Lower survival rates for cancers with the same stage at diagnosis in non-metropolitan areas largely reflect disparities in receipt of quality cancer care due to inequities in social determinants of health, including lack of insurance coverage,” said [Dr. Farhad Islami](#), senior scientific director, cancer disparity research at the American Cancer Society and lead author of the study. “This needs to change. Increasing access to cancer care to these historically marginalized populations is critically needed to mitigate disparities.”

Researchers analyzed data by stage at diagnosis on five-year survival and receipt of cancer surgery, chemotherapy, and radiotherapy for all, lung, female breast, prostate, and colorectal cancers diagnosed in 2015-2021 in individuals aged 15 years and older from the National Cancer Institute's (NCI) Surveillance, Epidemiology, and End Results (SEER) 22 registries. Stages of cancer at diagnosis included localized (confined to the site of origin), regional (direct extension and/or regional lymph node involvement), and distant (metastasis to distant sites or nodes).

Study results showed the overall five-year cancer survival for localized-stage, regional-stage, and distant-stage cancers was lower in non-metropolitan than metropolitan areas in both Black and White persons by 2, 5, and 3-7 percentage points, and was lower in Black than White persons across categories of urbanicity by 1-2, 7, and 4-7 percentage points, respectively. The stage-specific survival for the evaluated cancer types was often lower in Black than White persons, especially for breast and colorectal cancer. The receipt of cancer surgery for localized-stage and regional-stage cancers was lower in Black than White persons for most evaluated cancers and categories of urbanicity, for example, by 6 to 9 percentage points for localized-stage and by 7 to 8 percentage points for regional-stage lung cancer. The receipt of chemotherapy and radiotherapy varied by cancer, stage, and urbanicity.

“More research concerning interventions to mitigate disparities in cancer treatment and care and the contributing social factors is needed,” Islami added.

“Where someone lives shouldn't determine if they live,” said [Lisa A. Lacasse](#), president of the American Cancer Society Cancer Action Network (ACS CAN), the advocacy affiliate of the American Cancer Society. “This study provides further evidence of how important access to timely, high-quality, affordable health care is to having better health outcomes and reducing cancer disparities. We can't afford to have new or existing barriers to accessing cancer prevention, screening, or treatment services. We urge Congress to support funding increases for cancer prevention and early detection programs at the Centers for Disease Control and Prevention and extend the health care tax credits before time runs out. Our ability to reduce the cancer burden for everyone relies on this.”

Other ACS researchers involved in this study include [Dr. Daniel Wiese](#), [Elizabeth Schafer, MPH](#), [Dr. Hyuna Sung](#), and senior author [Dr. Ahmedin Jemal](#).

Additional ACS Resources:

- [Report on the Status of Cancer Disparities](#)
- [Health insurance status and cancer stage at diagnosis and survival in the U.S.](#)
- [Cancer Disparities Research](#)

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