About Cancer

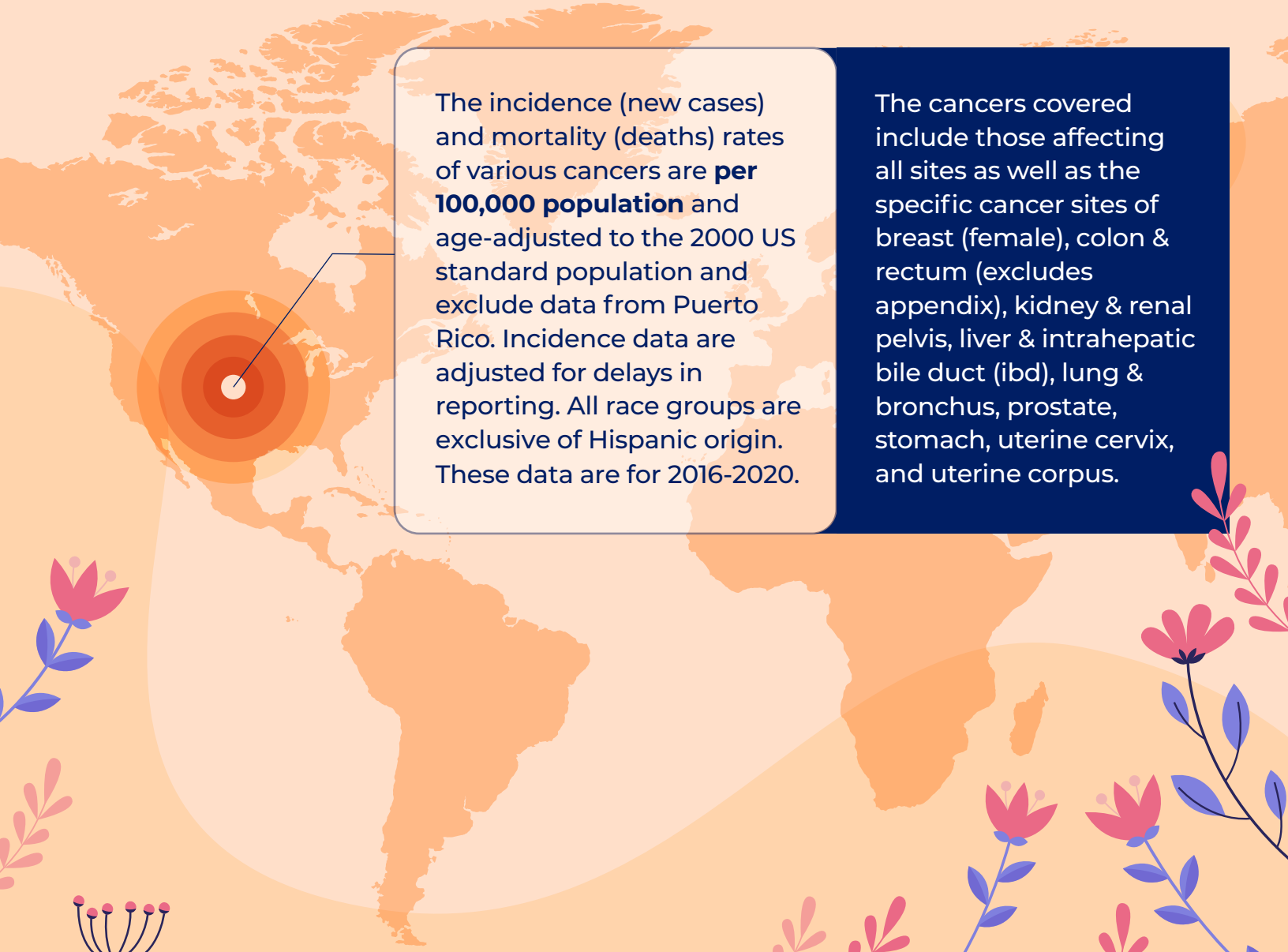
WHERE WE ARE AND WHERE WE NEED TO GO

Healthy Americas Foundation®
healthyamericasfund.org

National Alliance for Hispanic Health®
www.healthyamericas.org

Nuestras Voces Adelante
Our Voices Moving Forward Network
An Initiative of the National Alliance for Hispanic Health®

The comprehensive data drawn from central cancer registries and the National Center for Health Statistics, presented by Siegel, Giaquinto, and Jemal in **Cancer statistics, 2024**, provide crucial insights for understanding the impact of cancer across communities and gender. These data shed light on the complex nature of cancer incidence and mortality. The data demonstrate the need for a tailored approach in cancer prevention, treatment, and research, by considering the diverse factors influencing cancer dynamics in different communities. Moreover, the data show that while at the same time Hispanics and Asian Americans have lower incidence and mortality rates of many specific cancers, for both of these communities cancer remains the leading cause of death.



The incidence (new cases) and mortality (deaths) rates of various cancers are **per 100,000 population** and age-adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. These data are for 2016-2020.

The cancers covered include those affecting all sites as well as the specific cancer sites of breast (female), colon & rectum (excludes appendix), kidney & renal pelvis, liver & intrahepatic bile duct (ibd), lung & bronchus, prostate, stomach, uterine cervix, and uterine corpus.

[1] Siegel RL, Giaquinto AN, and Jemal A, published in the CA Cancer Journal for Clinicians in 2024

General Trends

American Indian / Alaska Native (AI/AN) communities usually had the

highest

incidence rate and mortality rate.

For all communities, incidence and mortality rates tended to be

higher

for male than female.

Liver and stomach incidence and mortality rates were

lowest

for Whites.

AMERICAN INDIAN / ALASKA NATIVE (AI/AN)

Incidence Rate

478.8

Highest rate for all cancer sites combined.

465.5

All cancer sites combined for **female.**

67.2

2nd highest rate for **male** lung cancer.

Highest rate for specific cancers except breast (female), prostate, lung cancer (male).

Mortality Rate

183.8

Highest rate for all cancer sites combined.

221.6

male
(excluding prostate)

157.9

female
(excluding breast and uterine corpus)

2nd highest mortality rate for

22.5	4.9
prostate	uterine corpus

Note: Rates of various cancers are per 100,000 population and age-adjusted to the 2000 US standard population.

ASIAN AMERICAN/ PACIFIC ISLANDER (AA/PI)

Incidence Rate

301.3

Lowest rate for all cancer sites combined.

11.9

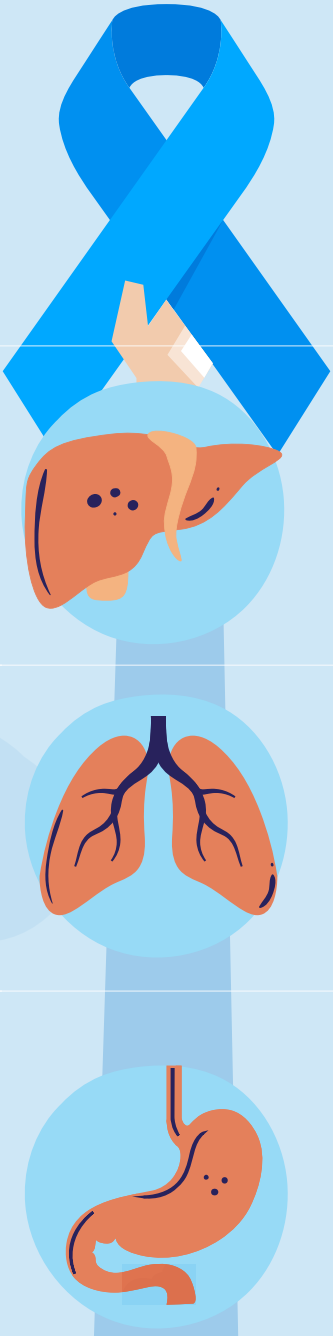
Liver cancers incidence rates higher than Black and White.

33.6

Lung cancers incidence rates higher than Hispanic.

9.0

Stomach cancers incidence rates higher than White.



Mortality Rate

95.4

Lowest rate for all cancer sites combined.

8.5

Liver cancers incidence rates higher than Black and White.

20.0

Lung cancers incidence rates higher than Hispanic.

4.7

Stomach cancers incidence rates higher than White.

Note: Rates of various cancers are per 100,000 population and age-adjusted to the 2000 US standard population.

BLACK

Incidence Rate

186.1
Prostate cancer
Highest incidence rate

72.4
Lung cancer (male)
Highest incidence rate

129.6
Breast cancer (female)
2nd highest incidence rate

40.8
Colorectal cancer
2nd highest incidence rate

48.8 male | 35.0 female

Mortality Rate

175.8
2nd highest rate for all cancer sites combined.

217.4 male | 150.2 female

17.7
Colorectal cancer
2nd highest mortality rate

22.4 male | 14.4 female

27.8
Breast cancer (female)
Highest mortality rate

51.3
Lung cancer (male)
2nd highest mortality rate

37.9
Prostate cancer
Highest mortality rate

Note: Rates of various cancers are per 100,000 population and age-adjusted to the 2000 US standard population.

HISPANIC

Incidence Rate

Liver cancer
2nd highest incidence rate

20.4 male | 8.4 female

7.7
Stomach cancer (female)
2nd highest incidence rate

9.7
Uterine cervix cancer
2nd highest incidence rate

100.7
Breast cancer (female)
Lowest incidence rate

28.3
Lung cancer (all)
Lowest incidence rate

Mortality Rate

Liver cancer
2nd highest mortality rate

13.1 male | 6.0 female

3.9
Stomach cancer (female)
2nd highest mortality rate

2.5
Uterine cervix cancer
2nd highest mortality rate

15.5
Lung cancer (all)
Lowest mortality rate

Note: Rates of various cancers are per 100,000 population and age-adjusted to the 2000 US standard population.

WHITE

Incidence Rate

474.3
2nd highest rate for all cancer sites combined.

511.2 male | 449.3 female

134.9
Breast cancer (female)
Highest incidence rate

59.5
Lung cancer
2nd highest incidence rate

54.8
Lung cancer (female)
2nd highest incidence rate

110.7
Prostate cancer
2nd highest incidence rate

7.5
Liver cancer
Lowest incidence rates

5.1
Stomach cancer
Lowest incidence rates

Mortality Rate

32.9
Lung cancer (female)
2nd highest mortality rate

19.7
Breast cancer (female)
2nd highest mortality rate

5.9
Liver cancer
Lowest mortality rates

2.1
Stomach cancer
Lowest mortality rates

Note: Rates of various cancers are per 100,000 population and age-adjusted to the 2000 US standard population.

Cancer Risks

The substantial differences in both incidence and mortality rates among groups highlight cancer risks that are either environmental or health systems related:

Environmental

Environmental factors such as:

1. **higher exposure to environmental toxins and pollutants,** often due to living in areas where air or water quality can increase cancer risk
2. **occupational hazards** due to jobs in certain industries with higher exposure to carcinogens
3. **use of personal care and other products that have chemicals that are banned** in other countries increase cancer risk

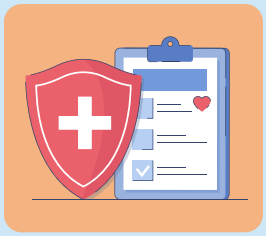
Less access to recreational space activities and **less free time** to engage in physical activity can contribute to increased cancer risk.

The targeting of tobacco advertisements in certain communities can lead to increased risk of cancers like lung, liver, and colorectal cancer.

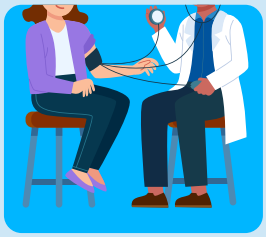
Low or modest income that limits access to quality healthcare, safe living environments, and nutritious options.

- For example, consumption of easily accessible and low-cost processed foods and lack of access to and low intake of fresh fruits and vegetables, can elevate cancer risk.

Health Systems



Lack of adequate health insurance can result in less screening, delayed diagnoses, and more aggressive treatment.



Less access to healthcare services, including preventive care and early cancer screening, can lead to later-stage diagnoses and poorer outcomes. Even with access, poor communication with healthcare providers and understanding of medical advice and recommendations can affect follow-up.

Lack of research on biological factors include: (1) genetic predisposition to certain types of cancers; (2) differences in hormone levels and their regulation that may influence risk of hormone-related cancers; and, (3) exposure to virus.

Underrepresentation in research in clinical trials and cancer research, leading to less tailored screening, diagnostic and treatment strategies.

Public health initiatives that do not address the specific needs and challenges of each population.

Conclusion

By identifying cancers with high incidence or mortality rates in specific populations, the data suggest areas where tailored and targeted interventions, such as increased screening, education, and healthcare access, may be beneficial. The differences observed in cancer rates among different communities should prompt further research to identify their various causes. Targeting these multiple factors can lead to more effective prevention and treatment by tailoring public health strategies and interventions that address the specific needs and challenges faced by each community.

Appendix

INCIDENCE OF SELECTED CANCERS BY RACE AND ETHNICITY

Selected Cancers	All	American Indian/ Alaska Native	Asian American/ Pacific Islander	Black	Hispanic/ Latino	White
All sites	453.2	478.8	301.3	459.7	358.1	474.3
Breast (female)	129.0	115.5	104.6	129.6	100.7	134.9
Colon & rectum[a]	35.3	50	28.1	40.8	32.2	35.2
Kidney & renal pelvis	17.6	33.0	8.2	19.3	17.9	17.8
Liver & ibd[b]	8.8	19.1	11.9	10.5	13.9	7.5
Lung & bronchus	55	62.2	33.6	56.7	28.3	59.5
Prostate	115.0	91.9	60.9	186.1	90.9	110.7
Stomach	6.3	10.1	9.0	9.7	9.3	5.1
Uterine cervix	7.7	11.4	6.0	8.6	9.7	7.2
Uterine corpus	27.7	30.4	21.7	28.9	25.8	27.9

MORTALITY BY SELECTED CANCERS BY RACE AND ETHNICITY

Selected Cancers	All	American Indian/ Alaska Native	Asian American/ Pacific Islander	Black	Hispanic/ Latino	White
All sites	149.8	183.8	95.4	175.8	108.6	155.0
Breast (female)	19.7	21.1	11.8	27.8	13.7	19.7
Colon & rectum[a]	13.2	19	9.2	17.7	10.7	13.1
Kidney & renal pelvis	3.5	6.7	1.6	3.4	3.3	3.6
Liver & ibd[b]	6.6	13.6	8.5	8.3	9.3	5.9
Lung & bronchus	35.0	43.4	20.0	37.5	15.5	38.2
Prostate	18.9	22.5	8.7	37.9	15.4	17.9
Stomach	2.9	5.6	4.7	5	4.8	2.1
Uterine cervix	2.2	3.3	1.7	3.3	2.5	2.0
Uterine corpus	5.1	4.9	3.5	9.1	4.3	4.6

Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. To reduce racial misclassification for American Indian and Alaska Native individuals, incidence rates are limited to Preferred/Referred Care Delivery Area counties and mortality rates are for the entire United State and adjusted for misclassification using factors from the National Center for Health Statistics.

[a] Colorectal cancer incidence rates exclude appendix. [b] intrahepatic bile duct

Source: Siegel RL, Giaquinto AN, Jemal A. Cancer statistics, 2024. CA Cancer J Clin. 2024;74(1):12˝49. doi:10.3322/caac.21820

Appendix

INCIDENCE OF SELECTED CANCERS BY RACE AND ETHNICITY (FEMALE)

Selected Cancers	All	American Indian/ Alaska Native	Asian American/ Pacific Islander	Black	Hispanic/ Latino	White
All sites	426.6	465.5	307.3	409.9	351.3	449.3
Breast	129.0	115.5	104.6	129.6	100.7	134.9
Colon & rectum[a]	30.6	43.7	23.7	35.0	27.2	30.5
Kidney & renal pelvis	12.1	23.9	5.5	13.7	13.3	12.1
Liver & ibd[b]	4.9	12.3	6.7	5.5	8.4	4.2
Lung & bronchus	49.4	58.6	28.1	45.8	24.0	54.8
Stomach	4.6	7.8	6.9	7.4	7.7	3.4
Uterine cervix	7.7	11.4	6.0	8.6	9.7	7.2
Uterine corpus	27.7	30.4	21.7	28.9	25.8	27.9

Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. To reduce racial misclassification for American Indian and Alaska Native individuals, incidence rates are limited to Preferred/Referred Care Delivery Area counties and mortality rates are for the entire United State and adjusted for misclassification using factors from the National Center for Health Statistics.

[a] Colorectal cancer incidence rates exclude appendix. [b] intrahepatic bile duct

Source: Siegel RL, Giaquinto AN, Jemal A. Cancer statistics, 2024. CA Cancer J Clin. 2024;74(1):12˝49. doi:10.3322/caac.21820

MORTALITY BY SELECTED CANCERS BY RACE AND ETHNICITY (FEMALE)

Selected Cancers	All	American Indian/ Alaska Native	Asian American/ Pacific Islander	Black	Hispanic/ Latino	White
All sites	129.1	157.9	83.7	150.2	93.5	133.6
Breast	19.7	21.1	11.8	27.8	13.7	19.7
Colon & rectum[a]	11.0	16.0	7.8	14.4	8.5	11.1
Kidney & renal pelvis	2.2	4.2	1.0	2.2	2.1	2.3
Liver & ibd[b]	4.1	8.8	5.2	4.8	6.0	3.7
Lung & bronchus	29.4	37.0	15.6	28.0	11.4	32.9
Stomach	2.1	4.1	3.7	3.5	3.9	1.5
Uterine cervix	2.2	3.3	1.7	3.3	2.5	2.0
Uterine corpus	5.1	4.9	3.5	9.1	4.3	4.6

Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. To reduce racial misclassification for American Indian and Alaska Native individuals, incidence rates are limited to Preferred/Referred Care Delivery Area counties and mortality rates are for the entire United State and adjusted for misclassification using factors from the National Center for Health Statistics.

[a] Colorectal cancer incidence rates exclude appendix. [b] intrahepatic bile duct

Source: Siegel RL, Giaquinto AN, Jemal A. Cancer statistics, 2024. CA Cancer J Clin. 2024;74(1):12˝49. doi:10.3322/caac.21820

Appendix

INCIDENCE OF SELECTED CANCERS BY RACE AND ETHNICITY (MALE)

Selected Cancers	All	American Indian/ Alaska Native	Asian American/ Pacific Islander	Black	Hispanic/ Latino	White
All sites	492.5	504.1	299.0	533.9	377.2	511.2
Colon & rectum[a]	40.7	57.8	33.4	48.8	38.2	40.4
Kidney & renal pelvis	23.9	43.9	11.6	26.4	23.5	24.3
Liver & ibd[b]	13.2	27.3	18.4	17.0	20.4	11.2
Lung & bronchus	62.2	67.2	40.8	72.4	34.3	65.7
Prostate	115.0	91.9	60.9	186.1	90.9	110.7
Stomach	8.4	13.1	11.8	13.0	11.4	7.1

Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. To reduce racial misclassification for American Indian and Alaska Native individuals, incidence rates are limited to Preferred/Referred Care Delivery Area counties and mortality rates are for the entire United State and adjusted for misclassification using factors from the National Center for Health Statistics.

[a] Colorectal cancer incidence rates exclude appendix. [b] intrahepatic bile duct

Source: Siegel RL, Giaquinto AN, Jemal A. Cancer statistics, 2024. CA Cancer J Clin. 2024;74(1):12˝49. doi:10.3322/caac.21820

MORTALITY BY SELECTED CANCERS BY RACE AND ETHNICITY (MALE)

Selected Cancers	All	American Indian/ Alaska Native	Asian American/ Pacific Islander	Black	Hispanic/ Latino	White
All sites	178.0	221.6	111.6	217.4	130.2	183.3
Colon & rectum[a]	15.7	23.1	11.0	22.4	13.6	15.5
Kidney & renal pelvis	5.1	9.9	2.4	5.2	4.8	5.3
Liver & ibd[b]	9.6	19.9	12.6	13.0	13.1	8.5
Lung & bronchus	42.3	52.3	25.9	51.3	21.0	44.9
Prostate	18.9	22.5	8.7	37.9	15.4	17.9
Stomach	3.8	7.7	6.0	7.2	5.9	2.9

Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. Note: Rates are per 100,000 population and age adjusted to the 2000 US standard population and exclude data from Puerto Rico. Incidence data are adjusted for delays in reporting. All race groups are exclusive of Hispanic origin. To reduce racial misclassification for American Indian and Alaska Native individuals, incidence rates are limited to Preferred/Referred Care Delivery Area counties and mortality rates are for the entire United State and adjusted for misclassification using factors from the National Center for Health Statistics.

[a] Colorectal cancer incidence rates exclude appendix. [b] intrahepatic bile duct

Source: Siegel RL, Giaquinto AN, Jemal A. Cancer statistics, 2024. CA Cancer J Clin. 2024;74(1):12˝49. doi:10.3322/caac.21820