

BREAST CANCER is a significant public health concern in North Carolina, as it is across the United States. While advancements in detection and treatment have improved outcomes for many, disparities in breast cancer incidence, treatment, and survival rates persist, particularly among certain populations. Along with prostate cancer, breast cancer is the most common new cancer diagnoses for all people in North Carolina. Addressing these disparities is crucial for achieving health equity in the state.



## **Key Statistics**

- Breast Cancer Incidence: In North Carolina, the age-adjusted incidence rate of female breast cancer is approximately 154 cases per 100,000 women, significantly higher than the national average of 133.8 per 100,000.
- Mortality Rates: The breast cancer mortality rate in North Carolina is 19.9 per 100,000 women. However, this rate is slightly higher for African American women, at 26.5 per 100,000, compared to 18.6 per 100,000 for white women a rate indicating African American women are 1.4 times more likely to die from the disease.
- Screening Disparities: African American women in North Carolina are less likely to receive timely mammograms compared to their white counterparts, contributing to laterstage diagnoses and poorer outcomes.

# **Disparities in Breast Cancer Outcomes:**

- Racial Disparities: African American women in North Carolina are less likely to be diagnosed with breast cancer than white women but have higher mortality rates. This is due to factors like limited access to care, socioeconomic differences, and the prevalence of more aggressive cancer types, like triple-negative breast cancer.
- Geographic Disparities: Women in rural North Carolina have lower screening rates and higher mortality rates than those in urban areas. They face barriers like limited health care access,

- fewer specialists, and longer travel times.
- 3. **Socioeconomic Disparities:** Women with lower incomes or no health insurance are less likely to get preventive services, leading to later-stage diagnoses and lower survival rates.

# **Initiatives to Address Disparities**

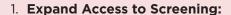
- NC Breast and Cervical Cancer Control Program (NC BCCCP): This state-run program provides free or low-cost breast and cervical cancer screenings and diagnostic services to eligible patients, who are uninsured or underinsured and meets age and income guidelines.
- 2. Community Health Worker Programs:

  These programs employ trained community members to provide health education, facilitate access to screening services, and offer support throughout the treatment process. They are particularly effective in reaching underserved populations.
- 3. Partnerships with Local Health Departments and Organizations: Collaborative efforts between NC Department of Health and Human Services, Division of Public Health and local health departments and organizations aim to increase breast cancer awareness, promote early detection, and reduce barriers to care through targeted outreach and education campaigns for underserved populations.

# A Call to Action

We call upon healthcare providers, policymakers, community leaders, and all stakeholders to unite in a comprehensive effort to achieve health equity in breast cancer outcomes for African American women in North Carolina.

Women of color in North Carolina face higher mortality rates from breast cancer, often due to later-stage diagnoses. This is preventable. We urge health care providers, policymakers, and community leaders to work together for health equity in breast cancer outcomes.



- Invest in mobile mammography units for underserved areas.
- Subsidize mammograms for uninsured women.
- Partner with local groups to promote early detection.

## 2. Provide Culturally Competent Care:

- Train healthcare providers in cultural sensitivity.
- Offer patient navigation services to help overcome care barriers.

#### 3. Address Social Determinants of Health:

• Support policies that improve economic conditions and healthcare access.

#### 4. Focus on Research and Data:

- Fund research on factors contributing to disparities.
- Use data to create targeted solutions.

## 5. Advocate for Policy Change:

• Promote state and federal policies for health equity and breast cancer care access.

Together, we can close the gap in breast cancer outcomes for African American women in North Carolina.

### **Citations**

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- 3. Centers for Disease Control and Prevention (CDC). (2022). "Breast Cancer and African American Women."
- NC Central Cancer Registry. 2018-2022 North Carolina Cancer Mortality by Race and Ethnicity per 100,000 Population, Age-Adjusted to the 2000 U.S. Standard Population. North Carolina Department of Health and Human Services, August 2024.
- 5. North Carolina Department of Health and Human Services (NCDHHS). "North Carolina Health Disparities ANALYSIS REPORT 2024." [Data Resource Center | NCDHHS]
- 6. National Cancer Institute. (2023). "Breast Cancer Statistics in the United States."





