Breast cancer is the most common cancer in women. Among women in the U.S., rates of breast cancer incidence (new cases) and mortality (death) vary by race and ethnicity.

**Black women* in the U.S.**
Overall, Black women have a slightly lower rate of breast cancer than white women. However, for women under 40, the rate of new cases is higher in Black women than white women. The reasons for this are under study.

Breast cancer is the leading cause of cancer death among Black women. The breast cancer mortality rate is about 40 percent higher in Black women than in white women. This may be due to:
- Differences in tumors (more likely to have triple negative breast cancer).
- Later stage of breast cancer at diagnosis.
- Barriers to high-quality care (such as not having health insurance).
- Risk factors (such as being overweight or obese).
- Health behaviors (such as not completing treatment).

**Hispanic and Latina women in the U.S.**
The breast cancer incidence and mortality rates are lower for Hispanic and Latina women than for white women and Black women. Yet, breast cancer is the most common cancer and the leading cause of cancer death among Hispanic and Latina women.

Hispanic and Latina women tend to be diagnosed with later stage breast cancers than white women. This may be due to delays in follow-up after an abnormal screening mammogram.

Hispanic and Latina women may also be less likely than white women to get high-quality and timely breast cancer care. It’s not known if this affects breast cancer survival in Hispanic and Latina women.

**Asian American and Pacific Islander women in the U.S.**
The breast cancer incidence and mortality rates are lower for Asian American and Pacific Islander women than for white women and Black women.

Rates vary among Asian American ethnic groups. For example, the rate of new breast cancer cases is higher among Samoan American and Hawaiian women than among Chinese American and Vietnamese American women.

Breast cancer is the second leading cause of cancer death in Asian American women.

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**Note:** The term “Black” is used in this resource as a term inclusive of those who identify as Black, African American, multi-cultural, or as new or recent immigrants.

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This fact sheet is intended to be a brief overview. For more information, visit komen.org or call Susan G. Komen’s Breast Care Helpline at 1-877 GO KOMEN (1-877-465-6636) Monday through Friday, 9 a.m. to 10 p.m. ET, or email at helpline@komen.org. Se habla español.
Racial and Ethnic Differences in Breast Cancer in the U.S.

American Indian and Alaska Native women in the U.S.
The breast cancer incidence and mortality rates are lower for American Indian and Alaska Native women than for white women and Black women.

Rates vary based on where women live. For example, women who live in Alaska, the Southern Plains and the Northern Plains have the highest rates of breast cancer (similar to white women). Women who live in the East and Southwest have lower rates.

Breast cancer is the second leading cause of cancer death in this ethnic group.

Why are there differences in incidence rates of breast cancer?
Some groups are more likely than others to have certain risk factors for breast cancer. This may help explain why rates vary. Risk factors that vary by race and ethnicity include:

- Age at first childbirth.
- Age at first period.
- Age at menopause.
- Body weight.
- Breastfeeding.
- Menopausal hormone therapy use (postmenopausal hormone use).
- Number of childbirths.

Studies are looking at other reasons.

Screening mammography rates
Screening tests are used to find breast cancer before it causes any warning signs or symptoms. Regular screening tests (along with follow-up tests and treatment, if diagnosed) reduce the chance of dying from breast cancer.

Overall, Hispanic and Latina, Black, white and Asian American women have similar screening mammography rates. Although data is limited, American Indian and Alaska Native women have slightly lower rates of screening mammography than other women.

Barriers to high-quality breast care
Barriers may make it hard for some women to get breast cancer screening or follow-up if they have an abnormal finding. These include:

- Lack of access to care.
- Financial barriers.
- Cultural and language differences.
- Lack of knowledge of breast cancer.
- Racial, ethnic and social injustices.

Health Equity:
To advance health equity in breast cancer care, Komen believes that everyone should have a just opportunity to be as healthy as possible despite their cultural or demographic background. That’s why Komen is committed to eliminating barriers to care for individuals and communities experiencing breast health inequities now and in the future. Learn more here.