

Reducing Cancer Disparities in Asian American, Native Hawaiian, and Pacific Islander Communities



Cancer rates and disparities vary among Asian American (AA), Native Hawaiian, and Pacific Islander (NHPI) people due to a highly diverse community, immigration history, unique cancer risks, and cultural barriers to prevention and screening services. In fact, cancer is the leading cause of death among Chinese, Filipino, Korean, and Vietnamese individuals, ranks second among Asian Indian, Japanese, and Native Hawaiian individuals, and third among Guamanian and Samoan individuals.¹ Racial bias and discrimination in health care and every other aspect of society contribute to poor health for many racial and ethnic groups, including AA and NHPI people.

Cancer impacts everyone, but it doesn't impact everyone equally. The American Cancer Society Cancer Action Network (ACS CAN) and our volunteers are advocating for local, state, and federal public policies that reduce cancer-related disparities and improve health outcomes for everyone, regardless of race, ethnicity, age, gender, gender identity, sexual orientation, ability, income, and/or zip code.

ACS CAN's Asian American & Pacific Islander (AAPI) Volunteer Caucus represents volunteer leaders throughout the country and plays a critical role in advancing public policy work, advising the organization on areas such as outreach, engagement, and communications. Learn more about our AAPI Volunteer Caucus, advocacy work, and how you can get involved at fightcancer.org/AAPIcaucus.

Some examples of ACS CAN's advocacy work to reduce the cancer burden for AANHPI communities include:



ACCESS TO HEALTH CARE

Because...

- The health insurance coverage gap between AANHPI people and non-Latino White people has closed significantly due to the Affordable Care Act;² and
- Uninsured rates vary greatly among non-elderly AANHPI ethnic groups including more than 12% of Native Hawaiians and Pacific Islanders;² and
- Patient navigators can guide patients through complicated processes, reduce financial, social, and cultural obstacles including language barriers, and improve cancer screening rates and outcomes.

ACS CAN is...

- Improving **access to health insurance, protecting provisions of the Affordable Care Act (ACA)**, and **expanding Medicaid coverage** in the 10 states that haven't already done so.
- Advocating to **expand insurance coverage of comprehensive biomarker testing** that can help cancer patients get the right treatment at the right time; and
- Working to ensure everyone at risk for or diagnosed with cancer can **access patient navigation services**, which can help make it easier for people to obtain quality health care.



RESEARCH

Because...

- Asian American and NHPI people are underrepresented in federally funded clinical research including clinical trials;³ and
- Inclusive clinical trial enrollment improves detection, access, and treatment for everyone.

ACS CAN is...

- Advocating for **increased funding for lifesaving cancer research**.
- Supporting policies that ensure people of color, older adults and people with limited incomes who have cancer are **enrolled in clinical trials**.



EARLY DETECTION

Because...

- Early detection of cancer through screenings increases the chances of finding, treating, and surviving cancer; and
- Cancer screening rates are generally lower among Asian American people compared to White people; and
- Only about 50% of women who are Samoan, Tongan, Laotian, Guamanian, Hmong, or Pakistani are diagnosed with breast cancer at an early stage compared with 68% of White women; and
- NHPI people are twice to three times as likely to die from cervical, stomach, and uterine cancers than White people; and
- Prostate cancer is the most commonly diagnosed cancer in Asian American and NHPI men.

ACS CAN is...

- Urging Congress to fund the National Breast Cancer and Cervical Cancer Early Detection Program, and state legislatures to fund state programs, that **provide access to screening and diagnostic services to women** with limited incomes and without insurance; and
- Advocating for state and federal policies that **remove barriers to prostate cancer screening and treatment**; and
- Supporting the Multi-Cancer Early Detection (MCED) Act that would **expand access to cancer screenings** in Medicare once they are proven effective and approved by the FDA. MCED tests may find more than one type of cancer from a single blood test, helping to reduce early detection disparities.



TOBACCO CONTROL

Because...

- Lung cancer is the leading cause of cancer death in men for all nine Asian American and NHPI ethnic groups; and
- Lung cancer is the leading cause of cancer death among Native Hawaiian, Chinese, Vietnamese, Japanese, and Korean women; and
- Smoking causes about 80% of lung cancer deaths;⁸ and
- Most (77%) Native Hawaiian and 41% of Pacific Islander adults who smoke use menthol cigarettes, which are easier to start and harder to quit;⁹

ACS CAN is...

- Encouraging the FDA, and state and local governments, to **end the sale of menthol cigarettes and all flavored cigars**, highlighting the impact that target marketing of menthol cigarettes has had on targeted communities; and
- Advocating for state and local smoke-free workplace laws, including restaurants, bars and gaming facilities, to **ensure all people have a fair and just opportunity to breathe smoke-free air**; and
- Advocating for culturally relevant, inclusive, and barrier-free **health insurance coverage of tobacco cessation services** that will help people quit using tobacco products.

¹ American Cancer Society. Cancer Facts & Figures for Asian American, Native Hawaiian, & Other Pacific Islander People 2024-2026.

Health Insurance Coverage and Access to Care Among Asian Americans, Native Hawaiians, and Pacific Islanders: Recent Trends and Key Challenges (Issue Brief No. HP-2024-13). Washington, DC: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. June 2024. <https://aspe.hhs.gov/reports/health-insurance-coverage-among-aanhpis>

³ KFF analysis of the 2021 American Community Survey

⁴ American Cancer Society Cancer Action Network. Cancer Research and Disparities, (2021). Available at www.fightcancer.org

⁵ American Cancer Society Cancer Action Network. Barriers to Patient Enrollment in Therapeutic Clinical Trials for Cancer, (2016). Available at www.fightcancer.org

⁶ American Cancer Society. Cancer Facts & Figures for African American/Black People 2022-2024.

⁷ American Cancer Society. Cancer Facts & Figures 2023. Atlanta: American Cancer Society; 2023.

⁸ American Cancer Society. Lung Cancer Risk Factors, (2023). Available at www.cancer.org/cancer/types/lung-cancer/causes-risks-prevention/risk-factors.html