



From the Executive Director: Reflecting on Our Wins & Planning for the Future

By Karuna Jaggar, Executive Director

Another October has come and gone. Like many of you, I am enjoying the rich colors of the fall, happy to be free of the pink barrage.

Breast cancer is not pretty or pink. And breast cancer has never been limited to just one month. At Breast Cancer Action, our work continues full-force year round. Just over a week and a half ago, we delivered 31,694 *Toxic Time Is Up* petition signatures to the Chair of the Senate Environment and Public Works Committee, Senator Barbara Boxer. You can read more about it in our [program update](#).



Since our founding in 1990, Breast Cancer Action has demonstrated that when women raise our voices together, we achieve big changes. With the support of our fearless and passionate members, we have a history of going toe-to-toe with industry, whether corporate polluters or billion dollar biotech companies that think they can own our genes. And as a grassroots activist organization, we pride ourselves on our freedom from corporate influence which enables us to be the watchdog of the breast cancer movement.

Our strength is our members, and when we all join together to demand change, together we make the impossible *possible*. Just this summer, many of you celebrated with us when we won at the U.S. Supreme Court a full four years after most experts said our case was "frivolous" and couldn't be won. Many of you were part of the early years of Think Before You Pink®, when Breast Cancer Action was a lone voice calling for accountability and transparency in breast cancer fundraising. Today, our hallmark campaign is known across the country and pinkwashing is a household word. And in just one month, this past October, nearly 32,000 people across the country joined our call to end pinkwashing once and for all by demanding chemical reform—that is over 1,000 people each day during October!

Yes, we still have a lot of work to do, *and* together, our power to create change is growing.

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For most of Breast Cancer Action's history, this work was done under the leadership of Barbara Brenner, a truly legendary health activist, influential thought leader, and visionary in the breast cancer movement. Under Barbara's leadership, Breast Cancer Action changed the national conversation about breast cancer. And we continue to be a leading voice, fearlessly willing to take on issues that others won't—or can't—address.

I told Barbara more than once that I am deeply humbled and profoundly honored to carry forward the work of Breast Cancer Action. Barbara, along with the staff and Board, developed and implemented plans to create a smooth and successful leadership transition in early 2011. Every day I am grateful for that work and preparation. My transition was also bolstered by one of the best, most heavily used strategic plans I have ever worked with. The current strategic plan—developed with the help and participation of many of you—provides valuable guidance for making decisions about what work we do while remaining broad enough to be relevant beyond its five year scope. This plan has supported a continuity of priorities, vision, and voice, while also allowing for innovation and adaptation.

Our current strategic plan is close to my heart because it also reflects the way that I personally come to breast cancer: committed to providing unbiased information for women to make their own health decisions; equally focused on cancer prevention and ending the epidemic; all through a feminist, social justice lens that demands systemic solutions.

We have accomplished much under our current strategic plan. The world has changed since we started that process more than six years ago—and *we* changed it! I am excited to share with you that we are currently embarking on a planning process to develop a new strategic plan covering the next five years.

Over the coming months, we will be reaching out to ask you to share your perspective on our current work: what you think is most important about what we do; what you'd like to see change; how we can leverage our strengths, and where there are unmet needs and opportunities. I look forward to your participation in this important and exciting process of defining (and refining) the future direction for the organization.

As a self-reflective, learning, critical organization, we are starting to take a deep look at our programs and priorities. Over the coming year, I look forward to sharing with you how we plan to stay on the cutting edge of a fast-moving field.

During this process of strategic planning, rest assured:

- We will always be the watchdog.
- We will never be bought.

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- We will always put patients before profits.
- We will always be a social justice organization.
- And we will always look to systemic solutions to meet the needs of women living with breast cancer and stop cancer before it starts.

Thank you for being part of the Breast Cancer Action community. With your support, we are celebrating momentous wins this year and we are looking forward to harnessing these successes for ongoing change.

Like most nonprofits, year's end is the time when we receive most of our donations that provide the much-needed funding to fuel our work year-round. Over the next few weeks we will be asking you to invest in our work. Please give generously because your donations allow us to remain the watchdog of the breast cancer movement, bringing people together to go toe-to-toe with industry so that women's health always comes first and addressing and ending this epidemic remains a priority.

Thank you. Your support means that we can bring the power of grassroots activism to achieve meaningful change that puts public health—our health—before corporate profits.

Think Before You Pink® 2013 Campaign Recap: Toxic Time Is Up!

By Annie Sartor, Policy and Campaigns Coordinator

We made it through "Pinktober" 2013. *Hooray!*

The flood of pink ribbon products touting "breast cancer awareness" are always overwhelming and frustrating, which is one of the many reasons why our Think Before You Pink® campaign is always a welcome relief and resonates with people year after year. People are sick and tired of pinkwashing! This year's campaign, *Toxic Time Is Up* really hit a nerve and has provided thousands of us with a way to channel our frustration and make real change to help address and end the breast cancer epidemic.



For 12 years, Breast Cancer Action's Think Before You Pink campaign has held corporations accountable for their toxic pink ribbon products. Over the years, we've campaigned against [many of the most egregious pinkwashers](#) – companies that make money off breast cancer by selling products whose toxic ingredients help increase our risk of the disease. This year, as

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many of you know, we went straight to the source – the chemicals in the products that we use every day that are linked to causing breast cancer and other health harms.

We are proud to report that in just one month nearly 32,000 people from across the country signed our [Toxic Time Is Up](#) petition. That's more than 1,000 people per day during October who joined together to demand an end to pinkwashing by removing cancer-causing chemicals from our daily lives.



On November 4th we boxed up all the petition signatures, and then our entire staff, along with members, volunteers, interns and family members, [together delivered nearly 32,000 signatures to the office of U.S. Senator Barbara Boxer in Oakland](#), CA. Sen. Boxer is the Chair of the Environment and Public Works Committee that is tasked with updating our current (and broken) toxic chemical policy. You know that Sen. Boxer is hearing from industry, and now, because of our Toxic Time Is Up campaign, she is hearing from people living with and at risk of breast cancer as the Senate considers the future of chemical regulation in the United States.

This campaign would never have been successful without you. Thank you to everyone who signed the petition, shared it with friends, family and community, took it to the streets to collect signatures, and blogged about the campaign, pushed our message out to their organizations and networks. We depend on you: all of our members, activists, and partner organizations. We need all of you and we are so proud to have stood alongside you in this action.



BCAction staff and members deliver your Think Before You Pink: Toxic Time Is Up petition signatures

The struggle for meaningful, comprehensive chemical reform is not over, and Breast Cancer Action will continue to demand that decision-makers hear our collective voice and take swift action for public health. The Toxic Time Is Up campaign was barely over when we sent a letter to members of the U.S. House of Representatives Committee on Energy and Commerce Subcommittee on Environment and the Economy in advance of the hearing on Chemical Safety Improvement Act (CSIA) held November 13th. We wrote and posted an open letter in [The Huffington Post](#) that outlined our opposition to the CSIA as it is currently written. This letter called upon the committee to introduce significant and necessary changes to strengthen TSCA and protect public health. We then sent this letter directly to key Representatives,

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identifying our areas of concerns. We don't yet know when Congress will take another step toward reforming TSCA, so we will continue to keep the pressure on our legislators and demand that they act – sooner rather than later.

We must ensure the passage of a TSCA reform bill that is strong enough to meaningfully protect public health from toxic chemicals. Passing such a bill will represent a tremendous step in the right direction towards preventing breast cancer and other disorders and diseases. Please stand with BCAction to help make this goal a reality. Together, we are building a movement that will create a healthier world for all of us.

New Fact Sheet: Disparities in Breast Cancer: Through the Breast Cancer-Care Continuum

By Sahru Keiser, Education and Mobilization Coordinator

Our newest factsheet, *Disparities in Breast Cancer: Through the Breast Cancer-Care Continuum*, complements the [Inequities in Breast Cancer factsheet](#) and builds on our work to address the ways in which inequities in breast cancer are the invisible, underlying forces that drive the disparities we see in this breast cancer epidemic. This new factsheet describes the landscape of breast cancer disparities from diagnosis through treatment, survival and mortality to understand how social injustices – political, economic, and racial inequalities – lead to disparities in breast cancer incidence and outcomes. **The fact sheet is included at the end of this issue of our newsletter.**



"Underserved communities experience extreme health disparities in many diseases and breast cancer is no exception. The rate of most diseases is higher among poorer communities that are predominantly comprised of people of color; however, the reverse is true for breast cancer. There are actually higher rates of breast cancer in higher income communities. However, the greater disparity lies in breast cancer after diagnosis. African American women have a 40% higher chance of dying from breast cancer than white women. These disparities are rooted in a complex interplay of economics, power, racism and discrimination that lead to a variety of social injustices, including major inequities in healthcare." Excerpt from the introduction to *Disparities in Breast Cancer: Through the Breast Cancer-Care Continuum*.

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Testing and Treatment Updates

By Joyce Bichler, BCAction's Deputy Director and Karuna Jaggur, BCAction's Executive Director

Genetic testing

Many of you celebrated with us this summer when the Supreme Court ruled in our favor. For those of you who have not heard about this win, thanks to our incredible team at the American Civil Liberties Union (ACLU), BCAction was victorious in our lawsuit against Myriad Genetics challenging the legality of human gene patents.

Now that the Supreme Court decision is behind us, our work to ensure that women have access to accurate and affordable BRCA 1 & 2 testing

continues. The Supreme Court ruling invalidated one company's monopoly on this potentially life-saving genetic testing, and we were pleased

to see other companies immediately enter the market offering lower-cost BRCA tests. As the watchdog of the breast cancer movement, we'll continue to monitor BRCA tests that come on to the market to ensure they are affordable, well validated, contribute to open access medical research databases, and include genetic counseling before and after testing.



BCAction members rally at the Supreme Court to protest the patenting of human genes.

Myriad has continued to throw its weight around, filing lawsuits against some direct competitors, even after the Supreme Court ruling. According to several legal experts, Myriad's suits have no legal merit, yet that doesn't seem to bother Myriad. They will stop at nothing (including setting loose a giant legal team to bully and intimidate the competition) to try to retain a monopoly on the "breast cancer genes" as long as possible. Myriad has asked for a court injunction that would stop competitors from releasing their own versions of the test while this new suit moves forward. Recently, BCAction worked with the ACLU and filed an amicus (friend of the court) brief in one of the cases as we believe that such an injunction would not be in the public's interest. We expect the judge's decision on this at any time.

First neo-adjuvant drug approved for breast cancer

The first FDA-approved drug for the neo-adjuvant (before surgery) treatment of breast cancer was approved on September 30, 2013. Pertuzumab, trade name Perjeta, manufactured by Roche Pharmaceuticals, was previously granted FDA approval in 2012 for treatment of metastatic HER2-positive breast cancer. This new approval, granted under the accelerated approval program, is intended for women with early stage HER2-positive breast cancer who

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have tumors greater than 2cm or with positive lymph nodes. Perjeta is intended to be used in combination with Herceptin and other chemotherapy drugs prior to surgery.

Under the FDA's accelerated approval program, patients have access to promising treatments while drug companies conduct ongoing clinical trials to verify a drug's efficacy, safety, and long-term outcomes. The confirmatory trial is still underway with Perjeta in the neo-adjuvant setting. The results are expected in 2016.

Although the use of drugs during the neo-adjuvant setting often appears promising, Breast Cancer Action is advising caution as data still has not shown that pathologic Complete Response (pCR) necessarily translates into overall survival. There is no way to know, as of now, if tumor shrinkage/elimination will translate into women actually living longer, with a better quality of life. Only overall survival data can provide this information.

We support the approval of Perjeta with only the pCR data in the neo-adjuvant setting because existing data on this drug in the metastatic setting shows Perjeta does improve overall survival and has low toxicity. We would be less supportive if this data were not already available. Although BCAction agrees that having Perjeta for use in the neo-adjuvant setting adds a reasonable option for women with HER2+ breast cancer, we will continue to uphold our standard that newly approved drugs must be backed up with solid clinical data that demonstrate the drug extends life, improves quality of life, and/or costs less than drugs currently on the market.

BCAction we will be waiting for the confirmatory data on Perjeta, and watching very closely as other drugs come up for review for use in the neo-adjuvant setting. To read more on BCAction's take on Perjeta please visit: <http://bcaction.org/2013/10/14/fda-approves-first-drug-to-be-used-in-neo-adjuvant-setting/>

San Antonio Breast Cancer Symposium (SABCS)

The largest annual symposium on breast cancer will be meeting from December 10 -14, 2013 in San Antonio, TX. If you're planning on attending be sure to stop by the Breast Cancer Action table and say "Hi" to BCAction staff and volunteers. Executive Director Karuna Jaggar and Information and Resources Liaison Zoë Christopher will both be attending sessions, bringing our voice, and talking with women concerned about breast cancer. There's always lots of news and information to report about treatments, issues, and controversies. Follow our live reports via Twitter (@karunajaggar and @BCAction), and look for our reports and analysis in future blogs, Facebook posts, and the next edition of *The Source*.



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2013 Highlights from the Program Department

By Sahru Keiser, Education and Mobilization Coordinator and Annie Sartor, Policy and Campaigns Coordinator

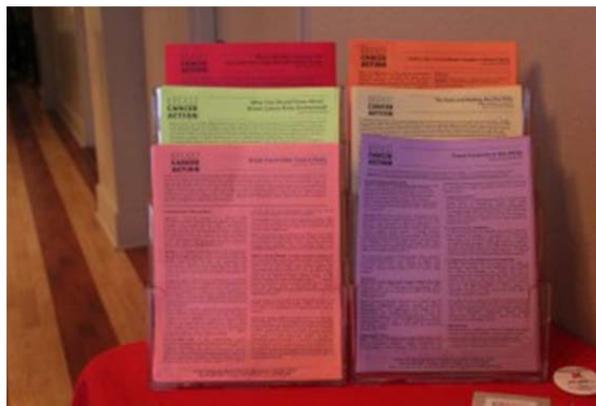
Information & Resources

BCAction's Information & Resources program remains a valuable resource for people recently diagnosed or otherwise affected by breast cancer. Since January 2013, we have responded to over 235 people on topics that range from treatment issues, financial crisis, anti-fracking and breast cancer cause-marketing.

Fact Sheets

Our factsheets have a specific goal in mind: we set out to provide critical analysis of important breast cancer advocacy topics by challenging many common assumptions about breast cancer and inspire the changes that will address and end this epidemic. This year, we updated a number of our current factsheets including [Facts & Myths about Breast Cancer](#), [The Facts and Nothing but the Facts](#) and [What You Should Know About Breast Cancer and the Environment](#). We also created four new factsheets including:

- [Ductal Carcinoma In Situ \(DCIS\)](#)
- [Health Is Not Just Healthcare: Inequities in Breast Cancer](#)
- Disparities in Breast Cancer: Through the Breast Cancer-Care Continuum
- [Breast Cancer and Fracking](#)



Each factsheet offers a general overview and framing of the topic, a foundation of science-based information along with BCAction's perspective on the topic. We encourage you to share these factsheets, available in PDF format, with friends, family, co-workers and your larger community: <http://bcaction.org/resources/breast-cancer-action-toolkits/>

Myriad Genetics Gene Patenting Case

On April 15, 2013, the U.S. Supreme Court heard oral arguments in our landmark case challenging Myriad Genetics' patents on the human "breast cancer" genes, BRCA1 and BRCA2.

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BCAction's Executive Director Karuna Jaggar was one of only 15 members of the public to get one of the coveted tickets and made it inside the courtroom to observe the oral arguments. While she was inside, BCAction hosted a rally outside on the steps of the Supreme Court alongside over 50 activists from 14 states joining us on behalf of women's health and taking a stand against corporate control of our genes. We held up signs and pictures of our loved ones who couldn't be there, we shared compelling stories about why we believe human gene patenting is wrong and why the Supreme Court must correct this wrong.

On June 13, 2013, the Supreme Court did just that. They ruled to strike down Myriad Genetics' patents on the human "breast cancer" genes, BRCA1 and BRCA2—and not just Myriad's patents on human genes, but patents on all naturally occurring genes! This was a tremendous win for women's health – and for all our health. And to think, four years ago when we first filed this suit alongside our partners at the ACLU, many experts in the field said the case was frivolous and could not be won! Like that has ever stopped us.



BCAction member Donna Kaufman representing women living with breast cancer who couldn't be at the rally.

In the months following the Supreme Court's decision, we have kept a close eye on the field of BRCA testing. We're the watchdog, it's what we do. And lo and behold, Myriad Genetics is responding to their loss at the Supreme Court by spending hundreds of thousands of dollars (most of which have come from their BRCA testing monopoly) filing lawsuits to block the competition from releasing additional genetic tests into the marketplace. In other words, Myriad is working hard to preserve their monopoly (for more on our role in this see Testing and Treatment).

Webinars

BCAction's webinars allow members to get a deeper understanding of key breast cancer advocacy issues as well as opportunities to take action. Over the past year, we joined numerous experts in the field to host webinars ranging from treatment issues to environmental concerns to breast cancer cause-marketing. If you missed any of our webinars, they're all archived on our website and available [here](#) or you can click on the individual webinars below:

- [The Oversimplification of Early Detection: Screening Mammography and Breast Cancer Overdiagnosis](#) (March 2013)
- [Fracking and Its Connection to Breast Cancer](#) (April 2013)

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- [Separating Hype from Hope: Breast Cancer Media Literacy](#) (May 2013)
- [The Supreme Court Decision to Overturn Gene Patents: What it Means for You](#) (June 2013)
- [What's the Big Idea? Environmental Exposures and the State of Chemical Policy Reform](#) (August 2013)
- [What Are Pink Ribbons Hiding?](#) (October 2013)

Toxic Chemical Reform

In early May, we sent out an e-alert to all our members urging you to take action for safe chemicals by sending letters to Senators asking them to support the Safe Chemicals Act of 2013. Only a few weeks later, the significantly weaker Chemical Safety Improvement Act (CSIA) was introduced – which changed the landscape for chemical regulation advocacy.

In June, we were among the first organizations to take a public stand against the CSIA, via a blog post and an e-alert demanding that Senators oppose the weaker bill unless and until substantial improvements were included to protect the public from toxic chemicals in our daily lives. We continue to monitor the legislative process for both the Safe Chemicals Act and the Chemical Safety Improvement Act, and we are committed to ensuring that only the strongest legislation moves forward.

In September, BCAction signed on to a letter from a number of health-oriented groups addressed to ranking members of the U.S. Senate Environment and Public Works Committee to express concerns about the Chemical Safety Improvement Act's failure to adequately address health concerns regarding toxic chemical exposures.

This year's Think Before You Pink Campaign – Toxic Time Is Up generated over 32,000 petition signatures urging the Senate Environment and Public Works Committee to take action and pass only the strongest TSCA reform. These signatures represent a tidal wave of support for strong TSCA reform – and we intend to leverage them to keep the pressure on legislators and continue to build momentum for meaningful chemical safety reform.

Pink Ribbon License Plate

In September, California Assembly Member Joan Buchanan introduced bill AB49, which if passed, would introduce a breast cancer awareness license plate program for the state of California. A pink ribbon license plate! Needless to say, we had concerns and we addressed them with Assembly Member Buchanan directly.

1. The language on the proposed pink ribbon license plate, "early detection saves lives" is misleading to many women and factually inaccurate.

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2. The revenue generated from the Pink Plate program funds only breast cancer screening, and not follow-up treatment, care nor counseling for low income women.

Since we are an activist organization, we gave BCAction members in California an opportunity to express concerns about the Pink Plate as well. Two hundred and sixty of our members joined us to demand that the license plate language and beneficiaries be changed to better address the needs of women living with and at risk of breast cancer.

***Pink Ribbons, Inc.* community screenings across the country**

We had an overwhelming response to our September "Pinktober" email offering people options for engaging in October in non-pink product ways. One option was to host a community screening of *Pink Ribbons, Inc.* and over 50 members contacted us to find out more. In October and November, in a show of community spirit you all rose to the challenge. We hosted 22 screenings of *Pink Ribbons, Inc.* from Texas to New York to Washington to Kansas to Michigan to California. Staff, Board and member speakers participated in almost half of the screenings to facilitate discussions after the film and answer questions.



Members AnneMarie Ciccarella (left) and Eileen Fuentes present at a *Pink Ribbons, Inc.* screening in New York.

Breast Cancer Action's Community Leaders for Change (previously known as the [Speakers Bureau](#))

Our members are our strength and we value the involvement of grassroots activists throughout the country and around the world. Our pilot program, which began October 2012, is comprised of diverse BCAction members across the U.S. The program now has twenty-six women who, with support and training from Breast Cancer Action, serve as leaders in their communities facilitating discussions and providing education and outreach at health/community fairs, house parties and other community events. Since the program's inception, speakers have organized and participated in almost 40 community events all across the country. For more information about the program or to join, please contact Sahru Keiser at 415-243-9301 x14 or skeiser@bcaction.org.

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Members Vanessa Raditz (left) & Qing York Williams say "Don't frack with our health" at the Global Frackdown on October 19th, 2013 in Oakland, CA.

Anti-Fracking work

During 2013, our anti-fracking work really took off. We are proud to be a founding member of the *Americans Against Fracking* coalition, addressing fracking nation-wide. The links between fracking and breast cancer are cause for serious concern and we posted materials on this issue on our website. In August, we targeted the Bureau of Land Management (BLM) demanding no expansion of fracking on public lands across the United States. And we were proud of our members for their role in generating over 1 million comments to the BLM from people everywhere who stand

against fracking. As the comments were being delivered to Washington, DC, the coalition held a press conference and our eye-catching anti-fracking logo was prominently displayed in coverage of the event. We are thrilled by the enormous success of this campaign and remain committed to playing a leadership role in the anti-fracking movement.

Breast Cancer Action endorsed and participated in the 2nd annual Global Frackdown on October 19th in Oakland, CA and our signs and campaign logo were enthusiastically held high by many of the attendees! We joined with thousands of individuals and organizations around the world to demand an end to this inherently dangerous method of extracting oil and natural gas. No sooner were we back from the Global Frackdown, we were back in action collecting petition signatures urging the U.S Bureau of Land Management to ban fracking on public lands in California and signed on to a letter to the U.S. Department of the Interior State Director, Jim Kenna, to demand additional public hearings regarding fracking on public lands in California.

Phew! It's been a busy year. And thanks to the generous ongoing support of individuals like you, we can continue to do this important work to address and end breast cancer—much of which involves going toe-to-toe against corporate giants with extremely deep pockets!

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Member Perspective: \$20 in the Pink Pumpkin for Breast Cancer

By Jodi Burton, BCAction member

I flew on Delta Airlines this October and the airline was ALL about breast cancer and pink ribbons. I arrived in Minneapolis to change planes. Before passengers boarded onto their connecting flight, flight attendants brought out a shellacked pink pumpkin, got on the public address system, and asked people to donate \$10's and \$20's (preferably), "just stick it in the pumpkin." It felt like a shakedown.



When I travelled on this Delta flight, I had just finished radiation treatment. Now, I should tell you that I was diagnosed with breast cancer in October of 2012. Within that same week, I had watched [Pink Ribbons, Inc.](#) and read *Dr. Susan Love's Breast Book*. These two sources, along with my proclivity for healthful living and a non-corporate lifestyle, set the tone for my foray into Western medicine after my diagnosis. As I stood in the departure lounge, I felt really embarrassed for everyone involved, the whole scene was embarrassing. I wanted to cry out to everyone: "THINK BEFORE YOU PINK!" The in-flight magazine featured pink lemonade alcohol drinks that donated a portion to breast cancer. Unable to help myself, I scrawled my commentary on those pages. I knew if I spoke up to the crowd of people I was flying with, there could be consequences that I just didn't have the energy to negotiate. I imagined the scenario: not being allowed to board, being escorted off the plane, having to complete my trip on a Greyhound bus. As passengers from each zone were called up to board the flight, they stood in front of that pink pumpkin, some taking longer than others. It very much felt like if you don't pay, then you don't care.

This feel-good exercise smacked of absurdity to me. Just months before, just after completing chemo, I flew this same route with this same airline. A chemo-related snafu created a difficult situation for me, and not one employee appeared to care during an obviously stressful moment, including the exposure of my newly bald chemo head and my surgical mask. Maybe if I'd been carrying a shiny pink pumpkin with me I'd have received the help I needed. Maybe not.

All of you at that gate had my sympathies. You perhaps were standing up to pay it forward or perhaps you've already lost a mother, a sister or a friend. I wanted to say: "Don't donate your money to this organization. It supports bloated administrations and redundant research." Or "I

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want a portion of this money to fund prevention and finding the cause of breast cancer. Do you know that we are poisoning ourselves with chemical laden products—many of them with pink ribbons attached—and the next generation has even more cause for concern?” But I didn’t. So I’m saying it here and now.

In my experience, one of the components of cancer treatment is watching the people we know adjust, step up, or stumble, and there’s a whole world of well-intended but inadequate responses. People either understand the cancer experience or they don’t. And they’re either willing to learn or they’re not. What to say? What to do? How to help with breast cancer? For too many people Breast Cancer Awareness Month solves this issue. Want to help? Want to do something? You can. It’s easy. Just put a \$20 in the shiny pink pumpkin at the airport gate and you’re done. Pop in your \$20 and you can feel good and walk away—fly away home, even!

In my dream do-over of that lost opportunity at the Delta gate, I see myself silently handing out brochures, asking people to Think Before You Pink. In the brochures are links to websites such as Breast Cancer Action and the Environmental Working Group. I would leave them on seats, hanging over the backs of chairs, in the restrooms at the airports, wedged in those flight magazines, on the check-in counters, all over the departure lounge. Maybe if I wasn’t intimidated by the limelight or hadn’t been so exhausted from treatment, it would have felt empowering to do that. Under the circumstances, my silent seething was all I could manage.

Editor’s Note: We hear from lots of members who experience frustration and outrage over “pink ribbon shakedowns.” We all have moments where we just can’t respond as we’d like. In a perfect world, we’d have the tools to respond at our finger tips. In a direct effort to help out in such situations, we created the [Think Before You Pink Toolkit](#), which includes printable Think Before You Pink “wallet cards” you can hand out to your community. It’s free and you can download it at <http://www.bcaction.org/toolkit>.

Volunteer Spotlight

By Angela Wall, Communications Director

At Breast Cancer Action, we are always in need of volunteers, people who freely dedicate their time and to our advocacy and education work. Our volunteers are the ones who make the difference; they help us to ‘step it up a level.’ They’re often behind the scenes at events, the researchers behind campaigns, the creatives behind the visual logos, the hands that stuff envelopes, make copies, etc. The generosity of our volunteers means we can put every dollar

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you donate towards programs to address and end the breast cancer epidemic. We count on our volunteers, so if you are interested in volunteering, check out our [volunteer page](#) and get in touch with us. We'd love to hear from you.

Sheila Kitts from Abilene, TX

I am a wife and mother of three boys. I run a one-woman business out of my home that I call [Soapbox](#)--a graphic design company that works exclusively with nonprofits.

I chose to volunteer with Breast Cancer Action because I believe in the organization and the cause. But more personally, I chose to volunteer because Breast Cancer Action is made up of people who have talents and character that I admire but lack. Though I am passionate about the cause, I am not bold. I'm not loud. I'm not a born leader. I worry about bothering people with my views. I am a quiet, vote-with-your-dollar at the farmer's market type of person. But I wish I had the gifts that the people of Breast Cancer Action have!



So the only thing I can think of to do is to support people like those who work at Breast Cancer Action with the talents I was given, so that maybe those amazing bold, loud people can take my well-designed piece of paper or graphics file and use it as a tool to promote and call attention to the important work they do. The staff at BCAction have been so appreciative of the work I've done, but it's I who owe thanks to them . . . for standing up for me and the ones I love while I sit in my living room! I am very proud to support such people and such an organization.

Editor's note: Breast Cancer Action is deeply grateful to Sheila for her pro bono work designing the Toxic Time Is Up logo, a festive e-alert banner, and the insert for our year-end fundraising letter, and for volunteering time and creative consults in numerous and endless ways. Thank you Sheila Kitts!

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3rd Annual *Action Speaks Louder Than Pink – Food for Thought* Was Nourishment for Body and Mind



Event host Ann Wheat (second from right) and guests enjoy their meal.

This October, the Breast Cancer Action (BCAction) community came together to build the movement to end pinkwashing—while enjoying a delicious four-course dinner. Our **3rd Annual Action Speaks Louder Than Pink – Food for Thought** event benefitting BCAAction and hosted by Ann and Larry Wheat, owners of Millennium Restaurant, was a wildly successful event, truly offering nourishment for both the body and mind.

Thank you to all those who attended **Action Speaks Louder Than Pink – Food for Thought**. Your support feeds our work to address and end the breast cancer epidemic, and sustains the success of our **Think Before You Pink®** campaign.

The backdrop of the evening was funky warehouse event space *SF80* transformed by chandeliers and plush velvet curtains. Small bites during the cocktail reception were prepared by returning **Chefs Jonathan Sutton and Tony Ferrari from *Hillside Supperclub*** and live music performed by the talented **Cello Street Quartet**.

Our four-course dinner was prepared by famed Bay Area chefs – **Charlie Ayers from *Calafia*, Chris Johnson from *Haven*, Susanne Stampke and Sascha Weiss from *The Plant Café Organic* and Eric Tucker from *Millennium***. All used locally sourced, organic ingredients where possible. And if that wasn't enough, our philanthropic-minded chefs all generously donated their time and culinary talents. Beloved restaurant columnist **Marcia Gagliardi of *tablehopper.com*** emceed the evening. Her personal relationship



Chef Eric Tucker of Millennium Restaurant (left) prepares the vegetarian main course. Thank you to all of our generous and talented chefs who make this event possible!

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with the chefs and support for BCAction's work made her a natural as she guided us through the evening's program.

This year's **Think Before You Pink** campaign "**Toxic Time is Up**" was a huge success—nearly 32,000 people from across the U.S. signed our petition to demand strong chemical reform that will end pinkwashing once and for all. We premiered the campaign video as part of the event program and newer members of our community got to see highlights from our past Think Before You Pink victories. Executive Director **Karuna Jaggar**'s call to action rallied guests to sign the petition on the spot and inspired many to take one home or to work to get even more signatures from friends and family. We are always impressed by the generous donations many of you are able to give on such evenings in support of our work to address and end the breast cancer epidemic and this event proved no exception.

We'd like to extend a big thank you to all of you who made this wonderful event such a success – our gracious honorary hosts, the chefs, our emcee, and all who attended and supported the event. We look forward to seeing you all next October



Executive Director Karuna Jaggar speaks at the event.

Special Thanks

We could not do this work without the support of so many members and volunteers. A huge thank you to:

Hannah Klein Connelly – with extreme gratitude for passing the pinkwashing.org url to BCAction

Roger Klein, Sandra Park, Ellen Matloff and Kathleen Maxian - for participating as expert panelists on our June webinar, *The Supreme Court Decision to Overturn Gene Patents: What it Means for You*.

Linda S. Birnbaum, Ph.D., DABT, ATS, - for presenting on our August webinar, *What's the Big Idea? Environmental Exposures and the State of Chemical Reform Policy*

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Thank you to our members across the country who organized and hosted screenings of *Pink Ribbons, Inc.* in their community. Thank you to:

- **Valerie Deering**, Kansas
- **Lori Wallace**, San Jose, CA
- **Nancy Bruning & Eileen Fuentes**, New York City
- **Fiona Barrett**, Marblehead, MA
- **Jenn Louie & Maryam Ghofraniha**, Mountain View, CA
- **Kylia Garver**, Boston, MA
- **Anastasia Prokos**, Iowa State University
- **Elisha Marr**, Grand Rapids, MI
- **Lebby Salinas**, McAllen, TX
- **Wendy Sellens**, Solana Beach, CA
- **Eleanor Barrett**, Los Angeles, CA
- **Laura Odoms**, Portland, OR
- **Raeah Sunn**, Seattle, WA
- **Bhavna Shamasunder**, Los Angeles, CA

AnneMarie Ciccarella – for participating on a panel discussion after a screening of *Pink Ribbons, Inc.* in New York City

Linda Burnett - for participating on a panel discussion after a screening of *Pink Ribbons, Inc.* in Boston, MA

Sandy Castillo – for participating virtually on a panel discussion after screenings of *Pink Ribbons, Inc.* in McAllen, TX

Yvonne Watterson – for her dedicated involvement through organizing *Pink Ribbons, Inc.* screenings, gathering Toxic Time is Up petition signatures, giving presentations at the University of Advancing Technology and writing a powerful blog post about her experiences.

Laurie Becklund - for participating on a panel discussion after a screening of *Pink Ribbons, Inc.* in Los Angeles, CA

Kellea Miller - for participating on a panel discussion after a screening of *Pink Ribbons, Inc.* in Los Angeles, CA

Lori Baralt - for participating on a panel discussion after a screening of *Pink Ribbons, Inc.* in Los Angeles, CA and organizing two events in October to bring attention to Breast Cancer Action and the Toxic Time is Up campaign

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Ellen Weinger – for providing BCAction materials at Grassroots Environmental Education’s screening of *Pink Ribbons, Inc.* in Rye, NY

Lynn Rosenbaum - for providing BCAction materials at Cambridge Health Alliance’s screening of *Pink Ribbons, Inc.* in Somerville, MA

Katherine Shea – For giving presentations at the Sisterhood of Soul conference in Oakland and at San Francisco State University

Alma Williams - For giving presentations at the Sisterhood of Soul conference in Oakland and at San Francisco State University

Erika Carlson – for staffing a table at the Louisville, CO farmers market and talking with market-goers about BCAction

Karym Urdaneta – for giving a powerful presentation at the Love Your Body event which incorporated BCAction and TB4UP’s Toxic Time Is Up campaign

Lori Marx-Rubiner – for giving a fabulous presentation about BCAction to staff and clients at the Maternal and Child Health Access organization in Los Angeles, CA

Robyn Stoetzel – for representing BCAction at Cancer Killers Education and Prevention Event and Celebrating Women’s Health and Beauty event

Michelle Garcia – for representing BCAction at the annual Breast Cancer Connections conference in Redwood Shores, CA

Maria Reyna – for giving a presentation about BCAction in Spanish to a Spanish-speaking patient group at San Francisco General Hospital

Sheila Kitts – for continuing to donate your time and talent to create powerful graphics for us

Vanessa Raditz & Qing York Williams – for their passionate activism, representing BCAction at the Global Frackdown in Oakland, CA in November

Adrienne Kernan – for her help in getting the word out about our Food For Thought event in October and for her help getting our invitations in the mail

Sara Brandon – for her flexible and unwavering administrative support

Qing York Williams – for being so willing to help wherever she can, be it program or development support

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The Fabulous Judy Brady – for offering her time and expertise on chemical policy activism during a brownbag presentation to the BCAction staff

Alan Kleinschmidt and the SF Choral Society for providing complimentary tickets to awesome performances for our staff, board, and volunteers.

Sofia Zander for the Toxic Time Is Up petition delivery photos and all her support and cheer.

Rocky Beach from Causes .com for helping our Toxic Time is Up petition reach new heights

Tania Katan for your commitment to ending pinkwashing, challenging the status quo and keeping us on our toes.

Antoinette Harris and Babe Barton for volunteering their time to join us at the Toxic Time is Up petition delivery in Oakland

Gael Treible, Chantal Chow and Donna Kaufman for volunteering to help collect petition signatures for Toxic Time is Up

Roberta Gelb for hosting a party to benefit BCAction and for collecting petition signatures for Toxic Time is Up

Tracy Weitz and Kris Hoehler for hosting a fabulous house party benefitting BCAction in Seattle.

Roberta Gelb for hosting a “sweet 16” party in New York and choosing BCAction as the beneficiary.

Molly Rosen for your strong support and invitation to present to Giving Circle

Women’s Voices for the Earth, Safer Chemicals, Healthy Families, Breast Cancer Fund, DES Action, Latinas Contra Cancer, Our Bodies, Ourselves, Silent Spring, Green Action, Massachusetts Breast Cancer Coalition, Circulo de Vida, Gayle Sulik, Center for Environmental Health, European Cancer Patient Coalition, Ms. In the Classroom, and all the other organizations and individuals who helped to make Toxic Time is Up successful.

Amy Firman for redesigning our Think Before You Pink buttons and designing our powerful anti-fracking logo.

3rd Annual *Action Speaks Louder Than Pink – Food for Thought*

Thank you to everyone who made the event such a success!

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Honorary Hosts: Anne and Larry Wheat,
owners of Millennium Restaurant

Participating Chefs:

Charlie Ayers, *Calafia*

Chris Johnson, *Haven*

Eric Tucker, *Millennium*

Susanne Stampke & Sascha Weiss, *The
Plant Café Organic*

Jonathan Sutton & Tony Ferrari, *Hillside
Supperclub*

Emcee: Marcia Gagliardi of
tablehopper.com, you guided us through
the evening with such style and grace.
Additionally, thank you for sharing the
event with your network.

Entertainment: The Cello Street Quartet

Event Sponsors

Geoffrey Biddle & Jane Gottesman

Lee Ann Slinkard & Maria Morris

Mechanics Bank

Plumline, Coaching & Consulting, Inc.

Righteously Raw

Event Committee & Support

Abigail Arons

Michelle Garcia

Christina Loff

Julie Morgan

Invitation and Graphic Design: Ryder
Goodwin

Video Production: Dennis Tzeng

Publicity Volunteer: Katie Kanagawa

Event Volunteers:

Sara Brandon

Maron Demissie

Mara Meaney-Ervin

Vanessa Raditz

Angeles Rios

Kristen Taylor

Diana Tordoff

Qing York Williams

California Culinary Academy students

12 Hot Dates & A Silent Auction

Tori Freeman – Thank you for hosting your annual event to benefit BCAction. You never cease to amaze us—your generous and creative spirit paired with your supportive community makes for a successful event every year.

Date Auction Volunteers:

Clarence Eddie

Marilyn

Alfred

Elizabeth

Joey

Betsy

Vic

Jamie

Miranda

Matt

Jason

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Suhail

DJ: Jennifer "Junkyard" Morris

Event Emcee: Jennifer Devine, you did a phenomenal job captivating the audience and talking up the bids.

Event Volunteers:

Alyx Dao
Erin Parsons-Wright
Vanessa Raditz

Music: The MegaFlame Combo

Thanks to all the in-kind donors who participated in the silent auction.

Pittsburg High School Leadership – Thank you for selecting BCAction to be the beneficiary of your school carnival event. You're all very inspiring young activists.

Pirates of a Cure-a-Being – Special thanks for fundraising on behalf of BCAction. What a great community, what a great themed event!

Cathy Ritter, Tomboy Tools – Many thanks for fundraising and friend-raising for BCAction. Your tireless effort to share our work with your community is inspirational.

We are grateful for the continued partnership and support of our **business partners:**

Natural Contours

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DONATIONS IN HONOR

BCAction gratefully acknowledges donations made in honor of the following individuals between June 25, 2013 and November 4, 2013.

Abigail Arons
from Lean Maddock

from Bonnie K. Sullivan

Barbara Brenner
from Suzanne and Michael Ziegler

Sabita D'Costa
from Catia Confortini

Carole Burton
from Lorraine Burton

Sally Downs
from Terri Morris Downs

Jodi Davi

Lise Faillettaz
from Robert Nesheim

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Tori Freeman
from Crystal O'Keefe

Kay Giese
from Jeannine M. Collins and John M.
Workman

Cindy Goldstein
from Lucille and Bernard Herr

Allison Guettner
from Colleen Holland

Kristin Herndon
from Katharine Herndon

Sahru Keiser
from Women's Cancer Resource Center

Deborah W. Laftis
from Cythnia Benson

Lisa Marks
from Linda Marks and Rafael Lopez

Carol Jenkins and Martin Sochet
from Alice Abarbanel

Debbie Miller
from Hannah Klein Connolly

Mary Woloson
from Pamela Srigley-Starr

Abigail
from Terry Holzman

The Work We Are Doing
from Nancy W. Rossen and Joel N.
Rossen

Julie Smith
from Kristen Wennberg

DONATIONS IN MEMORY

BCAction gratefully acknowledges donations made in memory of the following individuals between June 25, 2013 and November 4, 2013

Madeline Albers Burnham
from Marilyn McBride

Pat Anesi
from Lauri E. Fried-Lee

Barbara Brenner
from Leslie Bernstein Saul Bernstein
from Barbara B. and Joseph Blumenthal
from Patricia De la Fuente and Robert
Karasiewicz
from Gary R. Enschede
from Gayle Friedman

from Eileen Goldman and Robert
Gabriner
from Susan R. Hester
from Charlotte and Michael Horstein
from Uma Kahn
from Lucille Karr
from Elizabeth Katz
from Helen Love
from Sarah R. Moore and David Begler
from Patricia A. Murphy
from Diana Oswald
from Judith A. Patrick
from Janette Sherman
from Virginia S. Tarika

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from Lisa Wanzor
from Carolyn and Stanley Wiener
from Carol Yaggy and Mary Twomey
from Betty and Martin Slavney
from Luita and Arthur Persyko

Alma Borenstein Ohly
from Barbara B. and Joseph Blumenthal

Donna Drabble
from Laurie Drabble

Judith Effron
from Helen Effron

Sue Fine
from Joyce Bichler and Michael
Kimbarow

Barbara Garlock
from Rebecca A. Fontaine
from Christy L. Greene
from Karen Palmer

Lita Jans
from Steven L. Mayer and Randy Milden
from Kathleen S Padden

Elizabeth Leary Walsh
from Suzanne Walsh

Nancy Leventhal
from Joan and Steve Goldblatt

Lynne Matarrese
from Rivkin Radler, LLP

Donna Meyers
from Jeff Meyers

Carolyn Schultz
from Lisa Schultz

Mimi Shoemaker
from Michelle Gannon

Pat Singer
from Katanya Jackson-Henry

Barbara Glines Standley
from Elisabeth S. Smith

Pat Stocking Brown
from Joanne McCartan

Susan Tyzel
from Ellen Sue Jacobson

Moira Vilardo
from Kirsten Walters

BCAction gratefully acknowledges online donations made in honor of the following individuals between June 25, 2013 and November 4, 2013.

Abigail Arons
from Cathie Ragovin

Ann Brick
from Rachel Brick

Betsy Cardis
from Kate & Troy Sheets

Charlie and Elana Silver
from May Lynn Tan

Cindy McGuckin
from Michelle Pomerleau

Connie Gemson and Tim Greene
from Jenny Goldsmith

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Deb Cohan
from Debbie Bamberger

Margot Friedman
from Elizabeth Zitrin

Doctors, Nurses, Administration
from Julie Goldman

Michelle Garcia
from Ann Lewnes

Donald Sherak
from Judith Kummer

Minda Morton
from Nora Fraser

Erlinda Baraan
from Emily Baraan

My 12 Hot Dates Event
from Tori Freeman

Galen Joseph
from Beth Freedman

Nikki Sims
from Lee Bartholomew

Heather and Dave
from Tracy Spencer

Priscilla Rosenwald
from Julie Becker

Holly Downing
from Jane Nielson

Roberta Gelb
from Pamela McDonald

Irma Hypes
from Sean Cacho
from Jennifer Eis

Roxanne Cohn & Lisa Greenwald-Swire
from Michael Swire

Joanne and Ellie
from Amanda Yeaton-Massey

Susan Liroff
from Marie Kochaver

Joey Hayes
from Michelle McKenzie

The Fabulous BCA Staff!
from Adrienne Torf

Julie Morgan
from Daniel Horn
from Jo Ann Morgan

Tori Freeman's Event
from Melissa White
from Elizabeth Cardis

Karuna Jaggar
from Heather Phillips

Tracy Weitz
from Sara Ainsworth

Linda Burnett
from Ellen Grubert

Trish McMenimen
from Gail Carpiello

Wendy James
from Joseph Lyou

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Barbara Bosma Garlock
from Cathi Clark
from Nancy Cottingham
from Caroline Yang

Joni Howkins
from Gina Parrado

Barbara Brenner
from Rachel Brick
from Estelle Disch
from Tori Freeman
from Julie Ohnemus
from Bryan & Kristin Gardner
from Jocie Sobieraj
from Robbie Lipsman

Judy Hansen
from Carol Matson

Laurel Hedley
from Mary Hedley

Caron Grin
from Silvia Vaher

Lita Jans
from Shary Nunan
from Susanna Levin
from Barbara Jans
from Linda S. Knox
from Steven and Catherine Freemire
from Gina Jans
from Melinda Wheeler

Eileen Noonan
from Annie Noonan

Liz Torok
from Stephanie Horne

Elyce Mee
from Melissa Mee

Lori Hoover
from James Butler

Erlinda B. Baraan
from Eliseo Baraan

Marcy Libster
from Rachelle Fox

Florence Jacobson
from Sarina Schick

Mary
from Tracy Spencer

Gretchen Wyler
from Nora Fraser

Maureen Guzzetti
from Kara Guzzetti

Howard J Gilby
from Barbara Gilby

Michelle Bison
from Joseph Lyou

Jari Vandenberg
from Ralph Smith

Mila Barton
from Babe Barton

Jean Payton
from Valerie Deering

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Rita Arditti
from Estelle Disch

from Justin Kamen
from Benjamin Kreisman

Susan Winkler Rosen
from Eric Solomon
from Matthew Bichler

Suzi Dodd
from Nancy Kelly

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We know that underserved communities experience extreme health disparities in many diseases and breast cancer is no exception. The rate of most diseases is higher among poorer communities that are predominantly comprised of people of color; however, the reverse is true for breast cancer. There are actually higher rates of breast cancer in higher income communities. However, the greater disparity lies in breast cancer after diagnosis. African American women have a 40% higher chance of dying from breast cancer than white women. These disparities are rooted in a complex interplay of economics, power, racism and discrimination that lead to a variety of social injustices, including major inequities in healthcare.

This factsheet describes the landscape of breast cancer disparities from diagnosis through treatment, survival and mortality to understand how inequities, social injustices – political, economic, and racial inequalities – lead to disparities in breast cancer incidence and outcomes.

Breast Cancer Action (BCAction) recognizes that a number of diverse communities, including young, old, gay, transgender, disabled, immigrants, and under-educated, are disproportionately and uniquely impacted by breast cancer. However, the lack of available data on inequities in these diverse communities limits the focus of factsheet primarily to race and class.

Incidence

Breast cancer incidence rates show white women with the highest rate, followed by African American women. Asian American/Pacific Islander, Hispanic, and Native-American women show a lower risk of developing breast cancer.ⁱ Unfortunately, for some of these communities, the true disparities in incidence rates are masked by aggregating smaller groups into larger categories and ignoring regional variations.

For example, the large racial category of Asian and Pacific Islander encompasses many smaller ethnic groups that are highly diverse in terms of socioeconomic status, educational attainment and other social determinants of health. These large categories obscure important ethnic differences. For example, trends show that breast cancer incidence is on the rise for Asian American communities; yet this data does not reflect accurately the increase in incidence rates occurring among Japanese women.ⁱⁱ For example, while Laotian women have a low rate of breast cancer incidence (35.9/100,000) compared to white women, Japanese and Hawaiian women have a

very high rate at 126.5 and 175.8 per 100,000 respectively.ⁱⁱⁱ

When positive gains in breast cancer treatment are announced and celebrated, these gains are not shared across all communities. For example, rates of non-invasive breast cancer for Latina women are decreasing at a slower rate compared to white women.^{iv} Latina women also present with more advanced breast cancer at earlier ages and are 20% more likely to die of breast cancer than white women.^v

Failure to identify where women live is an additional way in which important information on incidence and mortality rates can be masked. For example, American Indian/Alaska Native women (AI/AN), who generally have lower overall rates of breast cancer (although they are more frequently diagnosed with late stage breast cancer) suggest geographical differences in breast cancer rates. Alaska Native women have rates as high as 139.5/100,000 (similar to non-Hispanic white women),^{vi,vii} while AI/AN women who live in the Southwest have incidence rates as low as 50.4/100,000^{viii} (see table).

These examples illuminate the ways in which national data on breast cancer presented through large racial categories can mask the true disparities of this disease in smaller ethnic communities.

Incidence & Mortality Rates of Breast Cancer by Race/Ethnicity		
Race/Ethnicity	Incidence Rate per 100,000	Mortality Rates of Breast Cancer
White ^{ix}	123.3	22.4
African American	118	31.6
Hispanic/Latina	93	14.9
Asian American	85.9	11.9
• Hawaiian ^x	175.8	33.5
• Japanese	126.5	15.1
• Filipina	100.4	17.2
• Samoan	102.5	36.2
• Tongan	118	*
• Laotian	36.9	*
• Kampuchean	38.2	*
American Indian/Alaska Native	89.1	16.6
• Alaska Native ^{xi}	139.5	*
• Native American ^{xii} (Southwest region)	50.4	*

* Data is not available

Screening & Diagnosis

After decades of focus on awareness and screening to promote early detection, we now see that screening rates are similar among women of different races/ethnicities (regardless of age), with 67% of white women, 66% of African American women and 69% of American Indian/Native American women having undergone a mammogram in the past two years.^{xiii} However, statistics show women of color being diagnosed at an earlier age than white women and with more aggressive breast cancers than their white counterparts, suggesting that early detection is not impacting late stage breast cancer diagnoses.^{xiv} A continued focus on screening access to remedy inequities in breast cancer is insufficient to reduce disparities.

There are no evidence-based screening recommendations for women of color. Current evidence to date evaluating the impact of mammography on breast cancer mortality is based on 40 years of randomized clinical trials.^{xv} Very few women of color were included in these clinical trials. As a result, conclusions from the research that has been conducted to date around screening and breast cancer have not been shown to be applicable to women of color.

Treatment

While creating healthcare access for all increases *who* gets care, the simple expansion of services without a

focus on differences in the quality and delivery of these services *does not* eliminate health inequities.

Treatment is one area where disparities are very clear. Institutionalized barriers prevent many women from fully utilizing healthcare and can result in subpar care. Subpar care includes inadequate or insufficient treatment (under-treatment), excessive treatment (over-treatment) or the wrong/incorrect treatment (mis-treatment).

We see that even when access to healthcare is equal, African American women receive chemotherapy, hormonal therapy and radiation with breast conserving surgery at different rates than white women.^{xvi} Certain Asian American communities, such as Chinese women, are also less likely to receive adjuvant radiation after breast-conserving surgery^{xvii, xviii} and breast-conserving treatment instead of mastectomy.^{xix, xx, xxi, xxii, xxiii}

Fewer women of color start treatment in a timely manner (within 60 days of diagnosis) compared to white women.^{xxiv, xxv}

Similar delays in time between diagnoses and cancer treatment are also evident among American Indian and Alaska Native women and the delays are at least two times greater than among White women.^{xxvi}

Furthermore, many women of color do not participate in clinical trials and are not offered information on support services that might meet their needs.^{xxvii, xxviii} Reasons for lack of participation in clinical trials stems from both the individual and the researchers. On the one hand, a long history of medical mistreatment in communities of color has developed into a culture of mistrust and suspicion; and on the other hand research investigators set research parameters that often determine how accessible a trial is to a specific community of participants as well as which patients are deemed "good subjects" for trials.^{xxix}

These treatment inequalities, particularly in the first few years after diagnosis, play a role in worse outcomes and increased mortality. Adequate and appropriate care play an enormous role in health outcomes, but the ability to effectively utilize available healthcare depends on numerous factors including, but not limited to, cultural appropriateness of care, trust, additional medical issues and other life circumstances.

Mortality

We know that breast cancer is not one single disease but rather a collection of diseases with distinct features. Furthermore, we know that not all breast cancers are created equal. Unfortunately, if you are diagnosed with an aggressive breast cancer, you are more likely to die regardless of who you are. Although women from all communities are diagnosed with different breast cancer subsets, women of color have a higher rate of more aggressive breast cancers (i.e. triple negative) and harder to treat breast cancers and are diagnosed at younger ages. There is a large gap in the research explaining why this is and how to address it.

As with incidence rates, the overall mortality rate for breast cancer has slowly declined since 1990, but rates of decline have not been equal for all populations.^{xxx} In some communities, death rates continue to rise. In California, for example, the breast cancer death rate for Asian American/Pacific Islander women is going up.^{xxxii} However, when we look more closely at this large group, we see that breast cancer mortality rates are also increasing among Native Hawaiian women.^{xxxii, xxxiii}

We see a similar pattern in survival rates. While white women have a 5-year survival rate^{xxxiv} of 91%, American Indian/Alaska Native women have the lowest survival rate of 63%. Furthermore, Samoan women have the worst survival rates for breast cancer and they tend to be diagnosed younger with a more advanced stage of breast cancer.^{xxxv, xxxvi} This data tells us that although incidence, mortality and survival rates vary among different communities, all communities of color present with more advanced or aggressive breast cancer at younger ages with much lower survival rates.^{xxxvii} As these rates continue to decline or increase at different speeds, the survival gap between white women and communities of color continues to widen.

Even when research controls for age, stage of breast cancer, socio-economic status (SES) and treatment, African American women continue to have worse outcomes.

When these isolated pieces of information around risk, diagnosis, treatment and survival are connected,

we see a picture of disadvantage for women of color at nearly every stage of the breast cancer continuum.

Living with Breast Cancer

After going through the emotional and physical toll of a breast cancer diagnosis, treatment and the numerous side effects that accompany treatment, there are a host of physical and psychosocial experiences that women continue to live with. These experiences can profoundly impact quality of life. They include anxiety and depression, reproductive health problems, early menopause, weight gain and sexuality.^{xxxviii, xxxix, xl} They can also have repercussions on a woman's employment status, long term health, relationships, financial situation and more.

For communities of color, there may be a more profound impact. Some studies note higher rates of reproductive health problems.^{xli} There may also be higher rates of anxiety and depression, although sample sizes to date have not been representative.^{xlii}

We must bridge the large gap in knowledge surrounding how to meet the specific needs of women of color living with and dying from breast cancer.

Conclusion

From existing research and knowledge, we clearly see strong evidence that major disparities in breast cancer exist. Women of color have differences in disease presentation – with more aggressive breast cancers developing at earlier ages – and lower survival rates compared to white women.^{xliii}

These disparities are an indicator of larger social inequalities. We need a systemic approach that addresses the underlying inequities if we are to attempt to address breast cancer disparities.

Inequities in breast cancer – political, economic and racial inequalities – are the invisible, underlying forces that drive the disparities we see in this breast cancer epidemic. These disparities are increasingly apparent at every step of the way along the breast cancer-care continuum: from diagnosis and treatment through end of life and living with breast cancer whatever the outcome.

Breast Cancer Action is a national grassroots education and advocacy organization committed to its role as the watchdog of the breast cancer movement. Our mission is to carry the voices of people affected by breast cancer to inspire and compel the changes necessary to end the breast cancer epidemic.

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