In the past 35 years, there have been significant improvements in treatment and overall breast cancer care. Unfortunately, improvement has not been equal among all populations. Many still suffer inequities, or disparities, from breast cancer and its effects, including high death rates.

Disparities do not describe all health differences, but are caused by inequities due to discrimination or social disadvantages including, but not limited to, health care gaps associated with race/ethnicity, ancestry, cultural factors, socioeconomic status, age, sexual orientation, geography, disability or other characteristics related to social inequality or discrimination.

**What We're Investigating**

- Identifying the genetic differences that contribute to higher rates of triple negative breast cancer (TNBC) in African-American and Ghanaian women
- Determining how patient navigation affects patient acceptance of recommended breast cancer treatment in minority populations
- Testing a health care delivery program to optimize care and improve outcomes for African-American and low-income women

**Our Research Investment 1982–2017**

More than $110 million in over 270 research grants and 160 clinical trials focused on breast cancer inequities

**Graduate Training in Disparities Research**

Komen has dedicated numerous resources to eliminating breast cancer inequities, including support of early career researchers through a dedicated grant mechanism - the Graduate Training in Disparities Research (GTDR) grant - which supports the training of graduate students who are pursuing a research career focused on breast cancer disparities.

**Komen has funded:**

- 26 grants that have supported more than 80 students pursuing careers focused on breast cancer disparities research.

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**African-American & Hispanic/Latina women** are more likely to be diagnosed with advanced breast cancer than **white women.**

**Mammography screening rates among **American Indian** and **Alaska Native** women are lower than rates among **white, African-American and Asian-American** women.

**Uninsured** women have lower rates of breast cancer screening and have more advanced breast cancer at diagnosis compared to women with **health insurance.**

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