Assembly Concurrent Resolution No. 142

Introduced by Assembly Member Alejo

April 12, 2012

Assembly Concurrent Resolution No. 142—Relative to National Multicultural Cancer Awareness Week.

LEGISLATIVE COUNSEL'S DIGEST

ACR 142, as introduced, Alejo. National Multicultural Cancer Awareness Week.

This measure would designate the week of April 15 to 21, 2012, inclusive, as "National Multicultural Cancer Awareness Week," and would encourage the promotion of policies and programs that seek to reduce cancer disparities and improve cancer prevention, detection, treatment, and followup care for all Californians.

Fiscal committee: no.

WHEREAS, National Multicultural Cancer Awareness Week has been observed across the country each year since 1987 to bring attention to the disparities of cancer among medically underserved populations; and

WHEREAS, The American Cancer Society is participating in National Multicultural Cancer Awareness Week to point out the disparities in cancer burdens and to encourage public and private sector commitments in helping eliminate these disparities; and

WHEREAS, California is the most populous and ethnically and culturally diverse state in the country, and thus, is in a position to provide leadership for the nation to address the reduction of the incidence of cancer among all races and genders; and

WHEREAS, In California, disparities exist in knowledge about cancer, cancer survival, and access to early detection, high-quality treatment, health care coverage, and health care. Systemic inequities also exist, including differences in occupational hazards, environmental exposures to pollution and other toxins, access to education, nutrition, physical activity, safe neighborhoods, healthy foods, and other factors that contribute to an increased or reduced risk of cancer; and

WHEREAS, The risk of developing and dying from cancer varies considerably among different cultural populations in California. The medically underserved are often diagnosed at later stages, and with a higher incidence of cancers with higher mortality, like lung cancer, and are more likely to receive lower quality health care; and

WHEREAS, In California, African American males have the highest overall cancer incidence and mortality rates. African American women are more likely to die of breast cancer, although non-Hispanic white women are the most likely to be diagnosed with the disease. African Americans have substantially higher rates of cancers of the stomach, liver, larynx, myeloma, and Kaposi's sarcoma than non-Hispanic whites. African American men are at especially high risk for prostate cancer, more than any other racial and ethnic group; and

WHEREAS, In California, Asian and Pacific Islanders are the only racial and ethnic group within which cancer is the leading cause of death. Lung cancer is the most common cancer among Laotian women, while breast cancer is the most common cancer among women of all racial and ethnic groups. Lung cancer is the most common cancer among Cambodian, Laotian, and Vietnamese men, while prostate cancer is the most common cancer for men in most ethnic groups. Colorectal cancer incidence from 1988 to 2007 increased among Korean men and among Korean, Filipino, and South Asian women, while incidence among other Asian Americans declined. Asian and Pacific Islanders and Latinos have substantially higher rates of liver and stomach cancer than other groups. Cambodian, Laotian, and Vietnamese women have much higher rates of cervical cancer than non-Hispanic white women. Samoan and Tongan women have higher rates of cancers than non-Hispanic white women. Stomach and liver cancers are among the top five cancers in most Asian and Pacific Islander groups.

Asian Americans have among the lowest rates of screening for breast, cervical, and colorectal cancers. A significant number of Korean Americans have never heard of the pap smear test. There remains a lack of data about factors related to cancer, cancer control, and effective interventions among Asian and Pacific Islanders; and

WHEREAS, In California, Latinos have substantially higher rates of stomach and liver cancers than other Californians. Latinos have higher rates of acute lymphocytic leukemia, Kaposi's sarcoma, and cervical cancer than non-Hispanic whites. Cancer is the second leading cause of death for Latinos. Latinos have the highest likelihood of being uninsured. Latino women have the highest risk of developing cervical cancer, which is about twice as high as non-Hispanic white women, African American women, and Asian and Pacific Islander women; and

WHEREAS, Members of the lesbian, gay, bisexual, and transgender community are at greater risk for cancer, face specific challenges accessing quality health care because of insurance policies that fail to cover same-sex partners, and may hesitate to access health care because of previous discrimination in health care settings. Lesbians have fewer mammograms, pelvic examinations, and pap smear tests than heterosexual women. There remains a lack of data about factors related to cancer, cancer control, and effective interventions in the lesbian, gay, bisexual, and transgender community; now, therefore, be it

Resolved by the Assembly of the State of California, the Senate thereof concurring, That the Legislature declares the week of April 15 to 21, 2012, inclusive, as "National Multicultural Cancer Awareness Week," and encourages the promotion of policies and programs that seek to reduce cancer disparities and, as a result, improve cancer prevention, detection, treatment, and followup care for all Californians; and be it further

Resolved, That the Chief Clerk of the Assembly transmit copies of this resolution to the author for appropriate distribution.

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