Asian and Pacific Islander (API): APIs are an extremely diverse population in terms of geographic origin, language, acculturation, and socioeconomic status. This heterogeneity is reflected in the striking variation in cancer incidence rates, which ranges in men, for example, from 217 (per 100,000) in Asian Indians/Pakistanis to 527 in Samoans. Unfortunately, most cancer data are currently only available for this group in aggregate, masking these differences. As a group, APIs have the lowest overall cancer incidence and death rates, but among the highest liver and stomach cancer rates, about double those among non-Hispanic whites (Table 9). Like Hispanics overall, lung cancer rates in APIs as a group are about half those in non-Hispanic whites because of historically low smoking rates. However, some Hispanic and API subgroups with higher smoking rates, such as Cubans and Native Hawaiians, have lung cancer rates approaching those of non-Hispanic whites. See the Cancer Facts & Figures 2016 Special Section on Cancer in Asian Americans, Native Hawaiians, and Pacific Islanders, available online at cancer.org/statistics, for more information.

American Indian and Alaska Native (AIAN): AIANs have the highest kidney cancer incidence and death rates of any racial or ethnic population – 3 times higher than those among APIs, who have the lowest rates (Table 9 and Table 10). However, like other broad racial and ethnic groups, cancer rates vary greatly within the AIAN population because of differences in behaviors that influence disease risk. For example, kidney cancer death rates are twofold higher among AIAN men living in the Northern and Southern Plains than in those living in the East and Pacific Coast regions, likely because of differences in the prevalence of smoking, obesity, and hypertension. Variations in smoking patterns are also reflected in lung cancer rates among AIAN men, which are about 50% higher than whites among persons living in the Northern Plains or Alaska, but less than half those in whites among persons living in the Southwest.

For information about American Cancer Society advocacy efforts dedicated to reducing the cancer burden among minority and medically underserved populations, see “Advocacy” on page 66.