Breast Cancer Risk among Black Women in the United States of America
Student's Name

Institution

Introduction

Cancer is a medical condition in which cells within the affected tissues spreads and multiplies in an abnormal way and cause tumors that are extremely difficult to treat. Cancer exists in different forms ranging from breast, lung lymphatic, skin, cervical, and prostate cancer among many other types. The method of treatment of cancerous tumors may involve surgery, chemotherapy, and radiation. However, a patient may be required to undergo more than one of the methods to completely get cured. In the United States cancer is one of the most deadly diseases that causes a high number of deaths especially at the later ages of 40 and above.

Scientifically, these cancerous conditions are associated with the old ages especially almost and after menopause, however, a recent research result has associated young women to the early development of breast cancer. It is, therefore, important for the younger women to attend earlier cancer screening and diagnosis. This research paper will explore the risk factors associated with breast cancer specifically within the New York's Bronx County with an accurate examination of the black women in the ages ranging from 40 to 65.

Breast Cancer Risk Factors among the Black Women

Bronx County is one that has been profoundly affected by breast cancer epidemic with much effect on the aging women. Demographically, Bronx women population is estimated at 725,817 with an average of about 777 cases of cancer infections annually. Moreover, the deaths are estimated at 174 patients yearly, further, the number of new infections for the late diagnosis of 40 years of age and above is estimated at 310 new patients (Braithwaite, 2009). United States Department of medical statistics in 2011 estimate that cancer increased incidences of late diagnosis was recorded in black women as compared to white women. The argument is that

white women are medically informed and conscious as compared to black ladies. Awareness of cancerous conditions was high among the white women than the blacks. Furthermore, the socio-economic status was also noted as a hindrance to the black women access to health facilities because cancerous conditions are expensive to monitor and control.

The U.S Cancer Statistics Working Group estimates that inclusive lifetime prevalence of African American women to contracting cancer is estimated is lower that the white race. However, the five-year survival chances are 77% in Black race as compared to 90% of the White race. Centre for disease control has indicated that African American women have 44% high mortality risk as a result of cancer infection as compared to white women. The cancer risk factors can be categorized into two broad groups, the modifiable and the non-modifiable factors. The non-modifiable factors include age, cancerous family history, age at first birth, late menopause, and early menarche. The modifiable factors may include alcohol consumption, use of post-menopausal hormones and physical inactivity.

Late Diagnosis

Scientists have associated aging with the highest risk of contracting cancerous cells than any other known preconditions for cancer development. Medical statistics for Bronx County indicates that black women above 40 years' experience a lower rate of cancer infection as compared to white women of the same age group. However, the mortality rate has shown an inverse relationship between the same conclusions due to inequality in socioeconomic condition as indicated by the differences between the races. Most of the cancerous hormones are produced in the ages starting from 40 at an increasing rate. The difference in black women is that they

diagnose at a later age as compared to the counterpart black women who do cancer screening more frequently.

Medical Information Awareness

Research shows that black American women living in the Bronx take long to diagnose and start treatment for cancer. Breast cancer has been found to develop in young African women at their early life stages, and the type of breast cancer affecting black women in the Bronx is the aggressive type. The high costs of maintenance in the cancerous condition have significantly barred the low-income earners from seeking medical attention, awareness, and information gathering relating to cancer (Braithwaite, 2009). Consequently, when they reach menopause, many complications occur, and the stage of the cancerous cells development is typically advanced for rapid treatment. This fact justifies the argument that black women, though, their rate of contracting cancer in generally lower, the mortality rate is significantly higher compared to the white race. Awareness is a function of the level of interaction with the current information status, the small rate of awareness to cancer information among the aging women is an important risk factor for cancer infection. This Awareness is caused by little exposure, lack of medical insurances and medical provider and all these is caused by little income levels.

Cancerous Family History

It is approximated that black American women develop a triple negative category of breast cancer as compared to any other race in the Bronx and the United States in entirety. This is an aggressive type that has very minimal possibilities for care and treatment (Williams, 2006). Again, cancerous cells are also transferred genetically and carried along to new generations of progenies'. Statistics has shown that African American women are highly susceptible to cancer;

therefore it is logical to conclude that many cases of cancer-causing cells are transferred from one generation to another. The cancerous cells could be highly noticed at early stages; however, little screening is done among African American women. Consequently, cancer cases are realized late among the black American women. The later detection of cancerous condition among the African American women is a factor of financial stability among them and contributes to the thesis that the lower socioeconomic status is a factor too high risk.

Mammography Screening

Mammography screening is the main way to detect the cancerous condition in women. Statistics Center for Disease Control shows that lack of mammography screening is the main cause of escalated cancer conditions among African-American women. For example, in the Bronx, women with health insurance are susceptible to getting screened compared to those who are not covered by medical insurers. It has been noted that 72% of women with health insurance were tested in 2012 against the 32% of those without health insurance. Analytically, the medical facts indicate that those covered by insurances are screened frequently than those without health insurances (Johnson, 1999). Further, income level is a factor for medical cover insurance coverage and having noted that the level of revenue among the African American women living in the Bronx is lower; it is logical to make assumptions that the adverse effect of cancer in African American women is contributed to largely by lower socioeconomic conditions.

Obesity and Physical Health

Statistics by Centre for Disease Control indicates that obesity and lack of body exercise are some of the health preconditions that contribute to cancerous conditions. For instance, obesity has been discovered to relate positively with high blood pressure and high cholesterol

conditions. African American women in Bronx County have shown high rates of obesity, especially after first child delivery (Johnson, 1999). Obesity is associated with unhealthy consumption of junk foods as in the case with the low-class residents of Bronx. This medical condition is a precondition and exposes the African American to cancer development. Similarly, lack of physical body activities especially at the later stages in health exposes an individual to high chances of contracting cancer. Black women have been associated with high rates of obesity and lack of physical activity over time, a health condition that has exposed them to high rates of developing cancer; this deduction is also coherent with low socioeconomic status and justifies this low-income thesis.

Conclusion

Prevalence of cancer is high in African American women as compared to any other race in America. In Bronx County, lower economic status among the African American women is a leading exposure to cancer preconditions. The cost of medical insurance is high and is not accommodative to the black women society; moreover, late diagnosis has been noted among black women in the Bronx due to inaccessibility to medical facilities. Further, the level of awareness has been observed to contribute to the time to which the women seek medical attention, and the African American women have been associated with advanced knowledge. Body weight and physical practices are small among the African American women due to low living conditions. All these factors are contributed to by the low living standards among the black women in the Bronx hence it satisfies the thesis statement.

References

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