

## DISPARITIES IN CANCER SCREENING

There are disparities in adherence to United States Preventive Services Task Force cancer screening recommendations among certain segments of the U.S. population. These disparities include (113, 114):

SIGNIFICANTLY MORE LIKELY

**64%** VERSUS **48%**

Whites are significantly more likely to be up to date with colorectal cancer screening than **American Indians/Alaska Natives**, 64% versus 48%.

**97%** VERSUS **59%**

Women in the highest income bracket are significantly more likely to be up to date with cervical cancer screening than **women in the lowest income bracket**, 97% versus 59%.

**77%** VERSUS **35%**

Women who have private health insurance are significantly more likely to be up to date with breast cancer screening than **women who are uninsured**, 77% versus 35%.

**76%** VERSUS **58%**

Adults in Massachusetts are significantly more likely to be up to date with colorectal cancer screening than those in **Wyoming**, 76% versus 58%.

**83%** VERSUS **75%**

Straight women are significantly more likely to be up to date with cervical cancer screening than **gay women**, 83% versus 75%.

**72%** VERSUS **54%**

U.S.-born women are significantly more likely than **foreign-born women who have lived in the United States for less than 10 years** to be up to date with breast cancer screening, 72% versus 54%.

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