

# Approaches to Increase Adherence to Cancer Screening

Multifactorial reasons lead to disparities in adherence to routine cancer screening, and thus require multipronged approaches to increase the uptake of cancer screening among eligible individuals. Below are examples of some of the strategies that have proven not only to increase cancer screening adherence among eligible individuals but also to decrease or, in some cases, even eliminate mortality from the cancer type for which the screening approach was developed:



## COMPREHENSIVE PUBLIC HEALTH CAMPAIGNS

The Citywide Colon Cancer Control Coalition, a comprehensive public health campaign in New York City, **increased the number of those receiving timely colonoscopy** from 35 percent in 2003 to 72 percent in 2016 for Black residents and from 48 percent in 2003 to 67 percent in 2016 for White residents.



## ACCESS TO HEALTH INSURANCE

Between 2017 and 2019, **lung cancer screening increased** by 16.2 percentage points among men who became eligible for Medicare at the age of 65 compared to men who were slightly younger than age 65 and were not eligible for Medicare.



## CULTURALLY TAILORED INTERVENTIONS AND COMMUNITY ENGAGEMENT

De Casa en Casa, a culturally tailored approach to increase the uptake of cervical cancer screening among Hispanic women along the U.S.-Mexico border, **increased the likelihood of getting screened by 14 times** among those who received the intervention compared to those who did not.



## REDUCTION OF STRUCTURAL BARRIERS

A campaign that eliminated the need for eligible individuals to visit a clinic for routine colorectal cancer screening **increased the completion of screening by nearly 10-fold**. Intervention participants received a series of reminder texts and a free fecal immunochemical test to use at home compared to those in the control group who only received a single text message reminding them that they were overdue for colorectal cancer screening.



## IMPROVED PATIENT-PROVIDER COMMUNICATION

Use of email between patients and providers for communication about the importance of breast, cervical, and colorectal cancer screening **increased the likelihood of getting screened** for breast cancer by 32 percent, cervical cancer by 11 percent, and colorectal cancer by 55 percent compared to those who did not use email for communication.