New ACS Report Finds Smoking Rates, Alcohol Use, Physical Inactivity Decreased During COVID-19; Worsening Trends in Obesity, Cervical Cancer Screening

Latest American Cancer Society Prevention and Early Detection study also shows disparities persisted during pandemic

 ATLANTA, May 2, 2023 – In a new report, American Cancer Society (ACS) researchers discovered both favorable and unfavorable changes in major cancer risk factors, preventive behaviors and services, and screenings in the United States during the COVID-19 pandemic. Between 2019 and 2021, current smoking, physical inactivity, and heavy alcohol consumption declined, and human papillomavirus vaccination and stool testing for colorectal cancer screening uptake increased. In contrast, obesity prevalence increased, while cervical cancer screening declined during the same timeframe. Additionally, disparities by racial/ethnic and socioeconomic status persisted.

The findings were published today in the journal Cancer Epidemiology, Biomarkers & Prevention, a publication of the American Association for Cancer Research, as well as in the biennial ACS report Cancer Prevention and Early Detection Facts & Figures, 2023-2024. The review is one of the only sources that looks at major modifiable cancer risk factors, HPV and HepB vaccinations, and cancer screening test use.

“These latest findings give us a mixed bag concerning progress in the fight to help reduce the cancer burden in adults in the U.S.,” said Dr. Priti Bandi, scientific director, cancer risk factors & screening surveillance research at the American Cancer Society and co-author of the study. “As more years of data are collected, it will be clearer whether these contrasting changes are transient or not.”

For the study, ACS researchers analyzed data from the National Health Interview Survey, the Behavioral Risk Factors Surveillance System, and the National Immunization Survey to study changes in major modifiable cancer risk factors, preventative behaviors, and screenings during the COVID-19 pandemic from 2019-2021.

Forty-five percent of the 609,820 cancer deaths to occur in the U.S. in 2023 are expected to be attributable to modifiable cancer risk factors, such as cigarette smoking, excess body weight, alcohol intake, physical inactivity, unhealthy diet, and obesity, and potentially, all avoidable through lifestyle changes. Cancer screening tests can further prevent thousands of additional cancer cases and deaths.

Findings showed Improvements in select cancer risk factors and screenings:

- Cigarette smoking prevalence in adults declined from 14% in 2019 to 12% in 2021, an estimated 5.7 million decline in the number of adults who currently smoke. By state, smoking prevalence between 2019 and 2021 declined in 17 of 50 states and the District of Columbia.
- Physical inactivity prevalence among adults declined from 26% in 2019 to 23% in 2021, or an estimated 3.2 million fewer persons reporting physical inactivity.
- Heavy alcohol consumption prevalence among adults declined from 7% in 2019 to 6% in 2021, or an estimated 1.4 million fewer persons reporting heavy drinking.
- Prevalence of home-based stool testing for colorectal cancer increased from 7% in 2019 to 10% in 2021, which translated to an estimated additional 3.6 million persons.

There were also unfavorable trends reported:

- Obesity prevalence among adults increased from 43% in 2019 to 49% in 2021, or an estimated 3.1 million more persons who are overweight or obese.
- Cervical cancer screening declined from 81% in 2019 to 78% in 2021, or an estimated 500,000 fewer persons who received a routine cervical cancer screening.

Additional findings include:

- Prevalence of home-based stool testing for colorectal cancer increased from 7% in 2019 to 10% in 2021, which translated to an estimated additional 3.6 million persons.
- Prevalence of Pap testing for cervical cancer screening increased from 53% in 2019 to 58% in 2021, or an estimated 200,000 more persons who received a Pap test.
- Prevalence of mammography for breast cancer screening increased from 80% in 2019 to 82% in 2021, or an estimated 2.6 million more persons who received a mammogram.
- Prevalence of testing for hepatitis B vaccination increased from 6% in 2019 to 8% in 2021, or an estimated 800,000 more persons who received a hepatitis B vaccine.

“While there are encouraging signs of progress, there are also areas where we need to do more to reduce the cancer burden in adults in the U.S.,” said Dr. Priti Bandi. “We need to continue to improve access to cancer screenings and vaccinations, and address disparities in care.”

Findings also highlighted disparities by racial/ethnic and socioeconomic status, with disparities persisting during the COVID-19 pandemic. For instance:

- Prevalence of smoking among African American adults was 21% in 2019 and 19% in 2021.
- Prevalence of physical inactivity among Hispanic adults was 28% in 2019 and 25% in 2021.
- Prevalence of heavy alcohol consumption among White adults was 6% in 2019 and 5% in 2021.
- Prevalence of obesity among Asian adults was 41% in 2019 and 43% in 2021.
- Prevalence of cervical cancer screening among Black adults was 73% in 2019 and 71% in 2021.
- Prevalence of mammography among Hispanic adults was 80% in 2019 and 81% in 2021.
- Prevalence of testing for hepatitis B vaccination among White adults was 8% in 2019 and 9% in 2021.

“Disparities persist across all racial/ethnic and socioeconomic groups, and we need to continue to work to address these disparities,” said Dr. Priti Bandi.

Findings also showed that disparities by race/ethnicity and socioeconomic status persisted during the COVID-19 pandemic, with disparities in smoking, physical inactivity, and heavy alcohol consumption.

“Disparities in cancer risk factors and preventive behaviors persist during the COVID-19 pandemic, and we need to continue to address these disparities,” said Dr. Priti Bandi.

For more information on the ACS report and findings, visit cancer.org/prevention.
The median obesity prevalence across U.S. states increased from 32% to 34%. Obesity prevalence in adults increased in 18 of the 50 states and remained unchanged in the remaining states.

Recommended fruit consumption in adults declined from 30% in 2019 to 29% in 2021, which translated to an estimated decline of 4.5 million adults reporting recommended fruit consumption.

Up-to-date cervical cancer screening declined amongst eligible women from 75% in 2019 to 73% in 2021.

Yet, disparities by racial/ethnic and socioeconomic status persisted:

- Persons with less than a high school education did not experience any changes in smoking prevalence or quit ratio between 2019-2021, further entrenching persistent socioeconomic disparities in smoking. Lower educated persons (<HS, HS/GED educated) are between 4 to 5 times more likely to smoke than college-educated persons in 2021.
- Uninsured persons are between 28% to 60% less likely to be up to date with recommended cancer screenings compared to privately insured persons in 2021, with the largest disparity for colorectal cancer and breast cancer screenings. This access disparity persisted at similar levels since 2019.

“Ongoing efforts to reduce modifiable risk factors and improve receipt of screening are warranted,” said Dr. Ahmedin Jemal, senior vice president, surveillance and health equity science at the American Cancer Society and senior author of the study. “We also must target our interventions among individuals of racially/ethnically diverse groups and socioeconomic position who continue to be greatly affected by cancer.”

“The pandemic put a spotlight on the criticality of maintaining health and access to free preventive services, including cancer screening, HPV vaccination, and tobacco cessation is more important than ever,” said Lisa A. Lacasse, president of the American Cancer Society Cancer Action Network, ACS’s advocacy affiliate. “We urge lawmakers at all levels of government to protect and advance policies that prioritize cancer prevention.”

Jessica Star is lead author of the report. Other ACS researchers contributing to the study include: Dr. Farhad Islami, Dr. Nigar Nargis, Dr. Robin Yabroff, Adair Minihan, and Dr. Robert Smith.

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