New Study Finds Social Support Linked With Improved Cancer Screening in the U.S.; Strongest for Breast Cancer Screening

American Cancer Society researchers stress the role of social support in screening utilization

ATLANTA, October 17, 2024 — A new study led by researchers at the American Cancer Society (ACS) shows social support measures were associated with improved cancer screening to varying degrees by site and age in the United States. The report found women who reported never or rarely receiving social-emotional support were nearly 40% less likely to be up-to-date with mammogram screening compared to those receiving it always. Also, living with a spouse or partner, but not children, was associated with increased participation in screening for breast and colorectal cancer. The findings are published today in the journal *Cancer Causes & Control*.

“Social relationships can influence cancer screening in a variety of ways, like shaping access to emotional support and material resources. We were interested in looking at living arrangements and residential stability as structural sources of social support in the U.S.,” said Dr. Jordan Baeker Bispo, principal scientist, cancer disparity research at the American Cancer Society and lead author of the study. “These findings highlight the need for interventions that can help mobilize social support networks and address the unmet social needs of parents and caregivers.”

For the study, researchers analyzed data from the 2021 National Health Interview Survey. Participants were classified as up-to-date or not with female breast cancer (BC), cervical cancer (CVC), and colorectal cancer (CRC) screening recommendations. The analysis examined associations between screening and residential stability (<1 year, 1-3 years, 4-10 years, 11-20 years or >20 years), living arrangement (with spouse/partner only, children only, both, or neither) and perceived social support (rarely/never, sometimes, usually, or always available), overall and by sex (CRC) and age-group (CVC).

Study results showed the adjusted odds of screening were 39% lower for BC (odds ratio [OR] = 0.61, 95% CI = 0.45-0.81) and 24% lower for CVC (OR = 0.76, 95% CI = 0.60-0.96) among those who reported never/rarely vs. always having social support. The adjusted odds of BC (OR = 1.44, 95% CI = 1.22-1.70) and female CRC (OR = 1.42, 95% CI = 1.20-1.68; OR = 1.61, 95% CI = 1.35-1.90) screening were higher for those living with a spouse/partner only compared to those living with neither spouse/partner nor children. Several unique patterns were observed among females 21-34 years of age, for whom less residential stability and living with children were associated with increased CVC screening. In this group, upward social mobility and access to prenatal care likely enhance screening utilization.

Other ACS researchers contributing to the study include Dr. Hyunjung Lee, Dr. Ahmedin Jemal, and senior author Dr. Farhad Islami.

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About the American Cancer Society
The American Cancer Society is a leading cancer-fighting organization with a vision to end cancer as we know it, for everyone. For more than 110 years, we have been improving the lives of people with cancer and their families as the only organization combating cancer through advocacy, research, and patient support. We are committed to ensuring everyone has an opportunity to prevent, detect, treat, and survive cancer. To learn more, visit cancer.org or call our 24/7 helpline at 1-800-227-2345. Connect with us on Facebook, X, and Instagram.

For further information: FOR MORE INFORMATION, CONTACT: American Cancer Society, Anne.Doerr@cancer.org

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