

NYS BRFSS Brief

The Behavioral Risk Factor Surveillance System (BRFSS) is an annual telephone survey of adults developed by the Centers for Disease Control and Prevention conducted in all 50 States, the District of Columbia, and several US Territories. The New York BRFSS is administered by the New York State (NYS) Department of Health (DOH) to provide statewide and regional information on behaviors, risk factors, and use of preventive health services related to the leading causes of chronic and infectious diseases, disability, injury, and death.

Breast Cancer Screening

New York State Adult Females, 2021

Introduction

Breast cancer is the most commonly diagnosed cancer except skin cancer and the second leading cause of cancer death among females in New York State, with nearly 16,700 new cases and 2,500 deaths each year. 1 Screening for breast cancer can help find cancer early when treatment is most successful. Females 50 to 74 years of age should be screened with a mammogram every two years. Females 40 to 49 years of age, those with a family history or other risk factors for breast cancer, and those who have any symptoms or changes in their breasts should talk to their health care provider about what screening schedule is right for them.² Although breast cancer screening recommendations may vary between organizations, all cisgender women, persons assigned female at birth (including transgender men and nonbinary persons), and transwomen who currently use or have taken hormones should be aware of their personal risk for breast cancer and decide, with their health care provider, when to start screening.

Health Equity

Risk of breast cancer increases with age and varies across racial groups. Black females are more likely to have breast cancer diagnosed at an advanced stage and die from the disease.3 Eliminating disparities starts with ensuring that all New Yorkers can access breast cancer screening and utilize services. The NYS Department of Health remains committed to removing barriers to screening and communicating the importance of routine screening with initiatives such as the Comprehensive Cancer Control Program and by funding screening for uninsured or underinsured individuals through the Cancer Services Program (CSP).

Key Findings



- ➤ An estimated 78.2% of females 50 to 74 years were up to date with screening recommendations, declining from prior years and falling below the Healthy People 2030 objective of 80.5%⁴ for the first time since 2016.
- The decrease in reported screening is consistent with national findings and is likely due to health-care disruptions caused by the COVID-19 pandemic.
- Disparities in reported screening were seen among those with the lowest household income, without health insurance, without a regular health care provider, and among those with a disability.
- Significant differences were also seen by known risk factors for breast cancer including lack of physical activity, and smoking.
- ➤ Of those who reported not having received a mammogram within the past two years, 95.2% (an estimated 500,600 females) were insured and 90.9% (an estimated 495,100 females) had a regular health care provider (data not shown), representing missed opportunities for screening.





Figure 1. History of mammogram (within past year and past 2 years) as reported by New York State females 50 to 74 years of age, by BRFSS survey year from 2014 to 2021

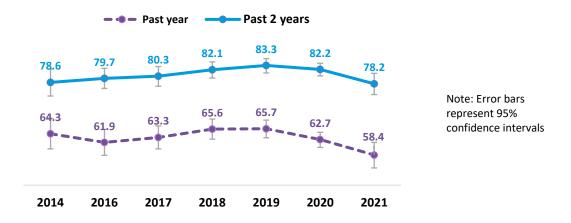


Figure 2. New York State females 50 to 74 years of age, reporting mammography within the past 2 years, by income, insurance, regular health care provider status and disability, BRFSS 2020 and 2021 survey years

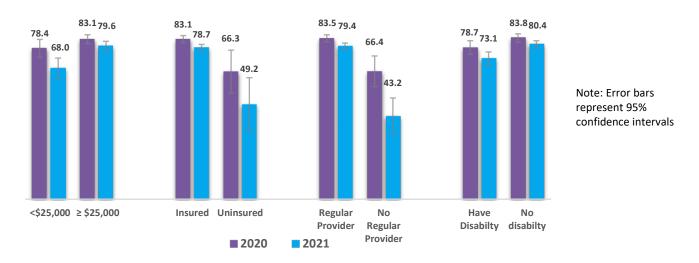


Figure 3. Percent of New York State females 50 to 74 years of age, reporting mammography screening within the past 2 years, by known risk factors for breast cancer, BRFSS survey year 2021

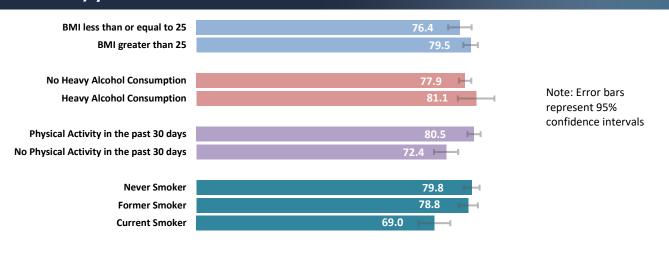


Table I. History of mammogram (ever, within past year, within past 2 years) as reported by New York State females 50 to 74 years of age, by selected characteristics, BRFSS 2021 survey.

		Ever		Within past year		Within past 2 years	
	Estimated Population Size ^a						
	#	% ⁵	95% CI ^b	% ^b	95% CI ^b	% b	95% CI ^b
Total [n=10,265]	3,041	95.4	94.6-96.3	58.4	56.4-60.3	78.2	76.5-79.8
Age Group							
50-64	1,996	94.8	93.6-96.0	56.9	54.4-59.5	77.6	75.5-79.8
65-74	1,045	96.6	95.5-97.7	61.0	57.8-64.1	79.2	76.6-81.8
Race/Ethnicity			<u>'</u>				
Asian, non-Hispanic	199	90.5	81.8-99.2	52.7	37.4-67.9	78.9	66.6-91.2
Black, non-Hispanic	420	95.3	93.0-97.7	57.1	51.7-62.5	79.2	74.8-83.7
Hispanic	410	95.3	92.8-97.7	53.9	47.9-60.0	76.9	71.9-81.9
Other race, multiracial, non-Hispanic ^c	44	92.8	85.6-99.9	55.0	44.8-65.2	69.1	59.2-78.9
White, non-Hispanic	1,895	96.1	95.3-96.9	60.1	58.0-62.3	78.4	76.5-80.2
Annual Household inc	ome						
< \$25,000	395	90.9	86.9-94.9	47.4	41.9-52.8	68.0	62.8-73.3
\$25,000 - <\$50,000	566	96.5	94.9-98.1	57.3	52.9-61.7	79.7	76.2-83.I
≥ \$50,000	655	96.2	94.9-97.6	61.3	57.3-65.3	79.5	76.2-82.8
Missing d	862	95.5	93.8-97.2	57.6	53.4-61.8	78.4	74.8-81.9
Educational Attainme	nt		<u>'</u>				<u>'</u>
Less than high school	342	92.7	89.4-95.9	48.7	41.3-56.1	73.7	67.5-79.8
High school or GED	722	95.7	94.2-97.1	58.8	54.8-62.8	77.9	74.7-81.2
Some post-high school	886	95.9	94.4-97.3	55.8	52.1-59.6	76.5	73.2-79.8
College graduate	1,074	95.7	94.1-97.4	63.0	60.0-66.0	80.9	78.4-83.4
Healthcare Coverage							
Medicaid	335	92.0	87.1-96.9	51.5	44.1-58.8	74.2	67.6-80.7
Medicare	887	96.6	95.4-97.7	59.1	55.7-62.5	78.6	75.8-81.5
No insurance	62	68.9	55.8-81.9	31.0	17.9-44.2	49.2	35.3-63.I
Other insurance	259	97.1	95.5-98.7	59.2	52.8-65.6	78.2	73.2-83.2
Private insurance	1,363	96.1	95.0-97.2	61.4	58.5-64.3	79.9	77.4-82.3
Regular Health Care I	Provider						
Yes	2,920	96.1	95.2-96.9	59.3	57.3-61.3	79.4	77.7-81.1
No	105	77.7	69.4-86.0	31.4	22.4-40.3	43.2	33.8-52.6
Disability ^e							
Yes	902	94.8	92.9-96.7	53.7	49.9-57.4	73.1	69.7-76.4
No	1,906	95.7	94.8-96.7	60.4	58.0-62.7	80.4	78.6-82.3
Residence							
New York City (NYC)	1,164	94.4	92.5-96.3	55.5	51.6-59.4	77.1	73.8-80.4
NYS excluding NYC	1,876	96.1	95.3-96.9	60.1	58.0-62.3	78.8	77.0-80.6

^a Estimated population size based on weighted frequencies from BRFSS, in thousands. Excludes individuals with missing data.

^b %=Percentage; 95% CI=Confidence Interval. Percentages are weighted to population characteristics.

^c American Indian, Alaskan Native, Native Hawaiian or other Pacific Islander, Other, or Multiracial.

 $^{^{\}rm d}$ "Missing" category included because more than 10% of the sample did not report income.

e Based on report of at least one of the following disabilities: cognitive, ambulatory, vision, hearing, self-care, or independent living. Note: Estimates are deemed unstable when a confidence interval has a half-width greater than 10, use caution when interpreting.



References

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- Screening for Breast Cancer: U.S. Preventive Services Task Force Recommendation Statement, Rockville, MD, updated in Jan. 2016. Available at https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/breast-cancer-screening
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Breast Cancer Screening

1. A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

[If "yes"]

2. How long has it been since you had your last mammogram?

Program Contributions



New York State Department of Health

Bureau of Chronic Disease Evaluation and Research

Bureau of Cancer Prevention and Control







Contact Information

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