

Housing Assistance Programs Increase Access to Important Breast Cancer Screening for Some Lower Income Women

The association is strongest for younger women and women in urban areas.

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New findings led by [American Cancer Society](#) (ACS) researchers show that breast cancer screening is higher for some low-income women who receive government housing assistance compared to those who do not. The odds of breast cancer screening were 30% higher for housing assistance recipients in urban areas, and two-fold higher for recipients aged 45-54 years and those of Hispanic ethnicity. The findings are published today in the American Journal of Preventive Medicine (AJPM).

“Receiving housing assistance has been associated with several positive health outcomes and health behaviors in past research, and our findings suggest it can also support cancer screening in some medically underserved groups,” said [Dr. Jordan Baeker Bispo](#), principal scientist, cancer disparity research at the American Cancer Society and lead author of the study. “But we also found more needs to be done to further level the playing field for everyone to be able to access critical screenings for cancer.”

For the study, researchers analyzed data from the 2019 and 2021 National Health Interview Survey. Eligible respondents were classified as up-to-date or not with breast cancer, cervical cancer and colorectal cancer screening guidelines. Scientists compared guideline-concordant screening between those who did and did not receive government housing assistance, overall and by urban-rural status, race/ethnicity, and age. Government housing assistance includes programs like public housing, housing choice vouchers, and multifamily assisted housing.

Results for the report showed there was no difference in cervical cancer screening by housing assistance status, but screening for breast cancer and colorectal cancer was higher among those who received assistance compared to those who did not receive assistance. In models adjusted for sociodemographic characteristics, health status and insurance, the association between housing assistance and breast cancer screening persisted among certain subgroups, including women in

urban areas, Hispanic women and women 45-54 years of age, but the association for colorectal cancer screening was not statistically significant.

“Despite the promising evidence for these groups, improving housing affordability may not be sufficient to eliminate socioeconomic disparities in cancer screening,” added Baeker Bispo.

“Programs that address other key determinants, like access to routine care providers and health literacy, are still needed to enhance access to screening for everyone and help detect cancer early to save lives.”

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