

# Mammography use up for US immigrants

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While mammography rates have improved among foreign-born women residing in the United States, these women are still less likely to have undergone breast cancer screening than native-born U.S. women.

These study results were presented at the Fourth AACR Conference on The Science of Cancer Health Disparities, held Sept. 18-21, 2011, in Washington, D.C.

Researchers at Pennsylvania State University believe that lack of access to health insurance and a regular source of health care are important factors related to the lower percentage of mammography screening among U.S. immigrants.

"There is progress, overall, in use of mammography among foreign-born women in the United States, but there is still a lot of work to do to improve their use of recommended [breast cancer screening](#)," said the study's lead researcher Nengliang (Aaron) Yao, a doctoral student in health policy and administration.

Yao and colleagues used data from the 2000 and 2008 National [Health Interview Survey](#), conducted by the National Center for Health Statistics and administered by the U.S. [Census Bureau](#), to look at mammography screening among immigrants and factors associated with use. Information on immigrants' legal status was not included in the survey.

[Screening rates](#) among immigrants increased from about 60.2 percent in 2000 to 65.5 percent in 2008, and disparities in the use of

mammography between immigrants and native women narrowed from 11.2 percent in 2000 to 3.4 percent in 2008.

Immigrants who resided in the United States a decade or longer had markedly higher mammography rates compared to those who had been in the country less than a decade (64.7 percent versus 39.3 percent in 2000; 67.9 percent versus 55.7 percent in 2008).

Insurance coverage played an important role in predicting who would receive screening. By 2008, immigrant women with [public insurance](#) had odds of receiving a mammogram that were twice those of uninsured immigrant women, Yao said, and those with [private insurance](#) had odds more than 2.5 times higher than uninsured women.

In addition, having a regular source of health care also became a more important predictor of mammography use over time. In 2008, women with a regular source of care had odds of receiving screening that were more than twice as high as those for women without a regular source of care.

Yao added that there has been an increase in "culturally and linguistically appropriate subsidized programs," such as those developed by the CDC's National Breast and Cervical Cancers Early Detection Program that encourage foreign-born women to seek a mammogram, which may have led to increased use of the test.

"As much progress as we have made, we still need to improve access to mammography screening for [immigrant women](#), as well as for women overall," he said.

Provided by American Association for Cancer Research

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