



# New York State Behavioral Risk Factor Surveillance System Brief

The Behavioral Risk Factor Surveillance System 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 United States Territories. The New York Behavioral Risk Factor Surveillance System is administered by the New York State Department of Health 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 ages 50-74, 2023

#### Introduction

Breast cancer is the most diagnosed cancer after skin cancer and the second leading cause of cancer death among females in New York State (NYS), with nearly 18,000 new cases and 2,200 deaths each year.<sup>1</sup>

Screening for breast cancer can help find cancer early when treatment is most successful. In 2023, the United States Preventive Services Task Force (USPSTF) recommended average-risk women ages 50 through 74 years undergo biennial mammogram screenings.<sup>2</sup> While those recommendations were updated in 2024 to include average-risk women starting at the age of 40, this report describes screening reported by eligible females at the time of the 2023 Behavioral Risk Factor Surveillance System survey. Some organizations' recommendations differ from USPSTF recommendations and may include annual breast cancer screenings. The NYS Department of Health encourages all cisgender women, persons assigned female at birth (including transgender men and nonbinary persons), and transgender women who currently use or have taken hormones to be aware of their personal risk for breast cancer and decide, with their health care provider, when to start screening.

#### Health Equity

People who are not up to date with breast cancer screening may experience structural and personal barriers in accessing cancer screenings and preventive care due to societal factors including transportation, cost, and workplace support for cancer screening, alongside individual knowledge and trust in the medical system.<sup>3-6</sup>

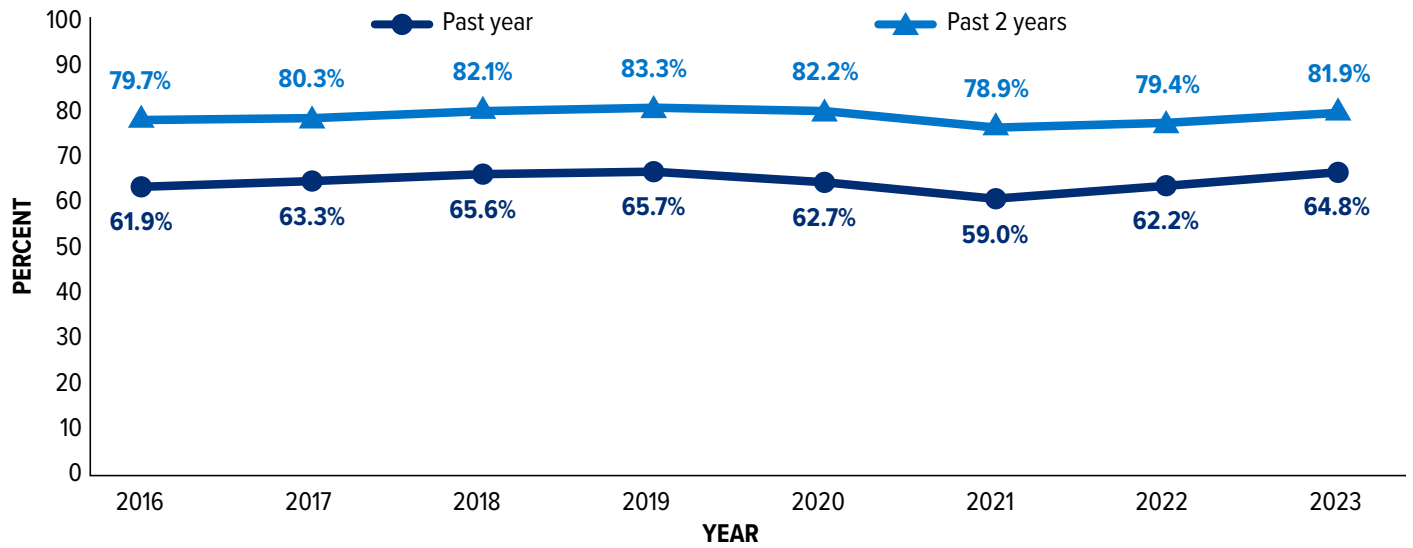
Non-Hispanic Black females experience disproportionately higher breast cancer mortality rates despite having comparable incidence rates to females of other racial and ethnic backgrounds.<sup>1</sup> Individuals identifying as part of the LGBTQ+ community are less often up to date with screening.<sup>7</sup> These facts demonstrate the need for equitable access to cancer screening, diagnostic care, and treatment for both communities. The NYS Department of Health is committed to removing barriers to breast cancer screening through its partnership with the NYS Cancer Consortium, supporting implementation of evidence-based interventions to increase cancer screenings in health center settings, and by providing screening for people without health insurance through the Cancer Services Program.<sup>8</sup>

#### Key Findings

- An estimated 81.9% of females aged 50-74 years were up to date with breast cancer screening recommendations, surpassing the Healthy People 2030 goal of 80.3% for the first time since 2020.<sup>9</sup>
- Breast cancer screening prevalence has increased since 2021, following healthcare disruptions due to the COVID-19 pandemic.
- Females with risk factors for breast cancer (i.e., binge or heavy alcohol consumption, current cigarette smoking, having overweight or obesity, or reporting no leisure time physical activity) reported being up to date with breast cancer screening recommendations at similar rates to those without risk factors (Table 1).
- Females not up to date with colorectal cancer screening<sup>10</sup> more often reported they were never or rarely screened for breast cancer (28.3%) compared with other females (6.0%; Figure 2). This may indicate common structural and personal barriers in accessing cancer screenings and preventive care.
- Among those not up to date with breast cancer screening recommendations, 96.9% (an estimated 427,000 females) were insured, and 95.1% (an estimated 434,000 females) had a regular healthcare provider (data not shown), representing missed opportunities for screening.

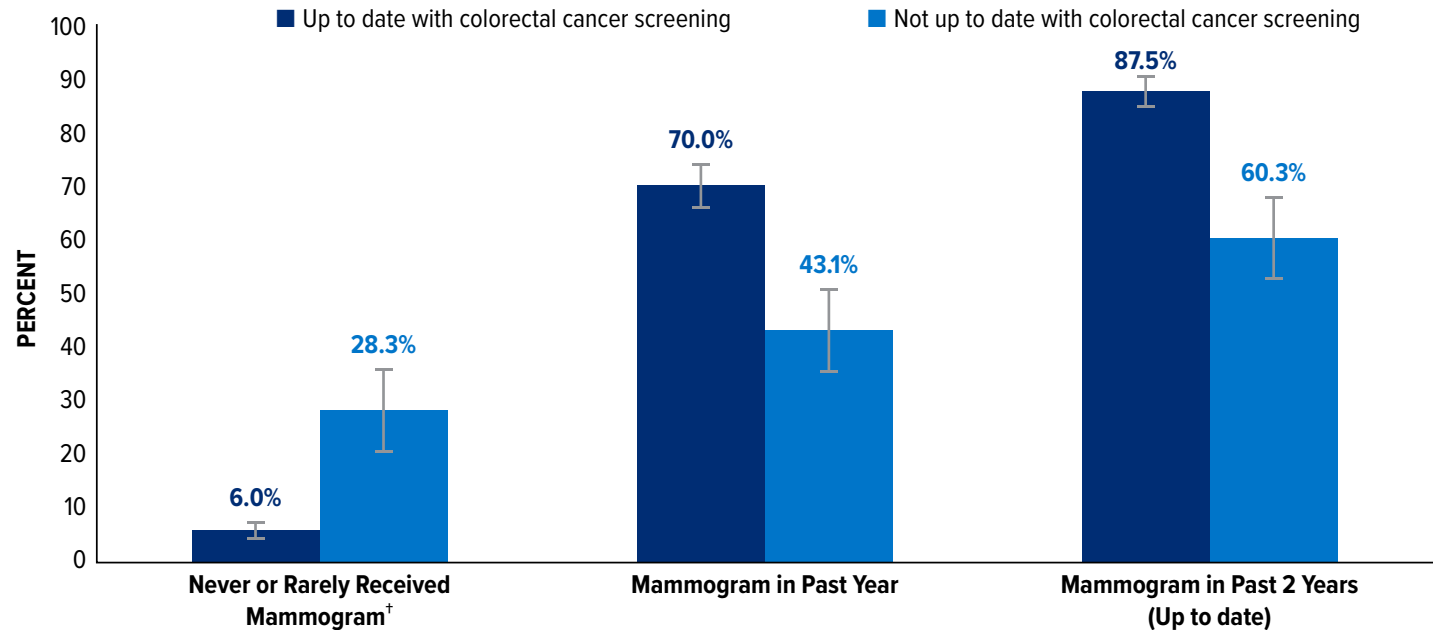


**Figure 1. Reported history of mammogram (within past year and past 2 years) among New York State females\* aged 50 to 74 years, Behavioral Risk Factor Surveillance System, 2016-2023**



\*Based on the respondent's sex at birth. If sex at birth is missing, then the respondent's sex is based on gender identity at time of the interview.

**Figure 2. Reported history of mammogram by reported history of colorectal cancer screening\* among New York State females\*\* aged 50 to 74 years, Behavioral Risk Factor Surveillance System, 2023**



**Note:** Error bars represent 95% confidence intervals.

\*Colorectal cancer screening recommendations at the time of this survey were based on those of the United States Preventive Services Task Force, updated May 2021.

\*\*Based on the respondent's sex at birth. If sex at birth is missing, then the respondent's sex is based on gender identity at time of the interview.

<sup>†</sup>Respondents were categorized as Rarely or Never Screened if they never received a mammogram or last received a mammogram 3 or more years prior to the survey.

**Table 1. Reported history of mammogram (never or rarely,<sup>a</sup> within past year, within past 2 years) among New York State females<sup>b</sup> 50 to 74 years of age, by selected characteristics, Behavioral Risk Factor Surveillance System, 2023**

New York State [n=1,156]	Estimated Population Size	Never or Rarely Screened <sup>a</sup>		Mammogram within past year		Mammogram within past 2 years (Up to Date)	
		%	95% CI	%	95% CI	%	95% CI
New York State Statewide	2,640,000	10.5	8.0 - 13.0	64.8	60.8 - 68.8	81.9	78.7 - 85.2
<b>Age</b>							
50-64 years	1,648,000	12.0	8.4 - 15.5	64.9	59.7 - 70.2	80.2	75.8 - 84.7
65-74 years	992,000	8.1	5.1 - 11.0	64.5	58.4 - 70.5	84.8	80.4 - 89.1
<b>Race/Ethnicity</b>							
Black, non-Hispanic	328,000	8.4	3.5 - 13.3	76.6	68.0 - 85.1	87.8	81.8 - 93.8
Hispanic	423,000	5.6*	1.9 - 9.3	62.5*	52.4 - 72.7	85.2	78.3 - 92.0
White, non-Hispanic	1,463,000	10.6	7.7 - 13.5	65.0	60.3 - 69.7	82.1	78.3 - 85.9
All other race groups combined <sup>c</sup>	380,000	14.8*	3.6 - 26.0	58.0*	43.2 - 72.9	74.8*	61.4 - 88.2
<b>Annual Household Income</b>							
Less than \$25,000	501,000	9.3	4.6 - 14.1	63.0	53.5 - 72.5	81.2	74.2 - 88.2
\$25,000 - \$49,999	482,000	14.7	8.2 - 21.1	67.4	58.8 - 75.9	79.4	72.1 - 86.7
\$50,000 and greater	1,188,000	9.5	6.6 - 12.4	66.3	61.1 - 71.5	83.7	79.6 - 87.8
Missing <sup>d</sup>	469,000	9.9*	1.3 - 18.6	60.0*	48.0 - 72.0	80.8*	70.3 - 91.4
<b>Education Attainment</b>							
Less than high school	337,000	8.4*	2.8 - 14.0	64.0*	52.2 - 75.8	84.2	76.2 - 92.2
High school or GED	464,000	9.6	5.4 - 13.7	64.9	55.8 - 73.9	82.7	76.1 - 89.3
Some post-high school	732,000	8.8	4.4 - 13.2	62.8	54.6 - 71.0	80.6	73.6 - 87.6
College graduate	1,088,000	12.4	7.8 - 16.9	66.2	60.2 - 72.1	82.0	77.0 - 86.9
<b>Healthcare Coverage</b>							
Private	1,102,000	10.3	5.9 - 14.7	70.3	64.4 - 76.3	83.4	78.3 - 88.4
Medicare	783,000	12.7	8.1 - 17.3	59.5	52.8 - 66.2	79.9	74.2 - 85.5
Medicaid	303,000	8.6	3.9 - 13.2	69.0*	57.8 - 80.2	85.4	78.1 - 92.7
Other insurance	261,000	7.5*	1.9 - 13.2	66.9*	54.7 - 79.2	84.0*	73.6 - 94.5
No insurance	§	§	§	§	§	§	§
<b>Disability<sup>e</sup></b>							
Yes	833,000	8.7	5.3 - 12.1	59.5	52.1 - 66.9	83.0	78.0 - 88.0
No	1,781,000	11.2	7.9 - 14.5	67.7	62.9 - 72.4	82.0	77.8 - 86.1
<b>Residence</b>							
New York City (NYC)	970,000	11.1	7.4 - 14.8	68.9	62.9 - 75.0	82.6	78.0 - 87.3
New York State exclusive of NYC	1,670,000	10.2	6.8 - 13.5	62.3	57.1 - 67.5	81.5	77.2 - 85.8
<b>Colorectal Cancer Screening Status<sup>f</sup></b>							
Up to date with screening	2,019,000	6.0	4.2 - 7.8	70.0	65.7 - 74.4	87.5	84.4 - 90.6
Not up to date with screening	533,000	28.3	19.3 - 37.3	43.1	33.8 - 52.5	60.3	50.9 - 69.7
<b>Alcohol Consumption<sup>g</sup></b>							
Binge or heavy drinking	280,000	12.9*	5.3 - 20.5	65.0*	52.7 - 77.3	79.9	70.2 - 89.7
No binge or heavy drinking	2,318,000	10.1	7.4 - 12.8	64.9	60.6 - 69.2	82.3	78.8 - 85.8

**Table 1. Reported history of mammogram (never or rarely,<sup>a</sup> within past year, within past 2 years) among New York State females<sup>b</sup> 50 to 74 years of age, by selected characteristics, Behavioral Risk Factor Surveillance System, 2023**

New York State [n=1,156]	Estimated Population Size	Never or Rarely Screened <sup>a</sup>		Mammogram within past year		Mammogram within past 2 years (Up to Date)	
		%	95% CI	%	95% CI	%	95% CI
<b>Current Cigarette Smoking</b>							
Yes	258,000	16.0	7.4 - 24.6	57.4*	45.3 - 69.4	75.1	65.3 - 84.9
No	2,365,000	9.9	7.3 - 12.5	65.5	61.2 - 69.7	82.7	79.2 - 86.2
<b>Weight Status<sup>b</sup></b>							
Have overweight or obesity	1,551,000	9.4	6.7 - 12.0	64.1	59.0 - 69.1	82.2	78.1 - 86.3
Do not have overweight or obesity	899,000	12.9	7.4 - 18.4	65.3	58.0 - 72.7	81.1	75.1 - 87.1
<b>Past 30-day Leisure Time Physical Activity</b>							
Yes	1,922,000	9.5	7.1 - 11.8	67.8	63.4 - 72.3	84.3	81.0 - 87.6
No	715,000	13.4	6.6 - 20.1	56.6	48.1 - 65.0	75.8	68.1 - 83.5

**Notes:** <sup>a</sup>Respondents were categorized as Rarely or Never Screened if they never received a mammogram or last received a mammogram 3 or more years prior to the survey. <sup>b</sup>Based on the respondent's sex at birth. If sex at birth is missing, then the respondent's sex is based on gender identity at time of the interview. <sup>c</sup>Asian, American Indian, Alaskan Native, Native Hawaiian or other Pacific Islander, Other, or Multiracial. <sup>d</sup>Missing category included because more than 10% of the sample did not report income. <sup>e</sup>Based on report of at least one of the following disabilities: cognitive, ambulatory, vision, hearing, self-care, or independent living. <sup>f</sup>Colorectal cancer screening recommendations at the time of this survey were based on those of the United States Preventive Services Task Force, updated May 2021. <sup>g</sup>Binge drinking is defined as consuming 4 or more drinks for women and 5 or more drinks for men on a single occasion. Heavy drinking is defined as consuming 8 or more drinks per week for women and 15 or more drinks per week for men. <sup>h</sup>Based on categories of body mass index (BMI), calculated as weight in kilograms divided by the square of height in meters. Having overweight or obesity is defined as a BMI of greater than or equal to 25 kg/m<sup>2</sup>. <sup>i</sup>Estimates are suppressed when there are less than 50 observations in the denominator or less than six observations in the numerator. <sup>j</sup>Estimates that have a confidence interval with a half-width of greater than 10, or when the relative standard error (RSE) is greater than 30% are unstable and should be used with caution. % = weighted percentage; CI = confidence interval; When comparing estimates, the 95% confidence interval (95% CI) provides the statistical range containing the true population percentage with a 95% probability. Although a 95% confidence interval is not a test of statistical significance, categories whose 95% confidence intervals do not overlap can be considered significantly different.

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## Behavioral Risk Factor Surveillance System Questions



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?

## Suggested Citation



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## Program Contributions



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