



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control
and Prevention (CDC)

Memorandum

Date: March 22, 2021

To: Jin Qin, ScD, Epidemiologist, Division of Cancer Prevention and Control, National Center for Chronic Disease Prevention and Health Promotion, CDC

Subject: Uses of National Survey of Family Growth (NSFG) Data

From: Anjani Chandra, PhD, Project Officer, NSFG, National Center for Health Statistics (NCHS), CDC

In collaboration with our colleagues from the National Center for Health Statistics (NCHS), the Division of Cancer Prevention and Control have supported the development and addition of cancer-related questions to the National Survey of Family Growth (NSFG) since 2011. These questions assess personal cancer history, family history of breast cancer, knowledge of cancer risk factors, and breast and cervical cancer screening practices. These data are being used to estimate prevalence of mammography use and cervical cancer screening among women aged <49 years. The NSFG is the only nation-wide survey with detailed data on men and women's experience with marriage, relationships, cohabitation, and family issues such as infertility and use of infertility services, and as such, the survey represents a unique resource to examine multiple cancer-related topics.

Survey questions about breast cancer risk and screening address congressional interest in breast cancer awareness for young women. While mammography is not generally recommended for the average woman prior to the age of 40, it may be indicated for those with certain family history. We have used NSFG data to examine mammography use and awareness of breast cancer risk factors among young women. The questions on breast cancer screening, family history, and knowledge about risk factors provide timely national estimates on behaviors and knowledge among young women and are vital for education and intervention efforts, such as CDC's *Bring Your Brave* campaign.

Survey questions on cervical cancer screening assess adherence to revised guidelines. Issues of interest include age at which screening is begun, screening test(s) used, time interval between screening tests, and impact of sexual history on receipt of screening. We also are measuring what cancer screening services are being provided to women.

The NSFG is an ideal survey to ask these kinds of questions given its focus on reproductive-aged people and the inclusion of a variety of measures that other surveys (e.g., BRFSS and NHIS) do not measure such as sexual history and use of reproductive health services.

A handwritten signature in black ink, appearing to read "Jin Qin".

Jin Qin
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