



# BARRIERS TO SCREENING

To help motivate individuals to get screened, it is important to first understand the barriers that prevent them from being screened. Although unscreened and screened people have similar beliefs, attitudes, and behaviors, unscreened people report a unique set of barriers to screening.

## Barriers to Screening



### Procrastination

This is the leading barrier to screening across many unscreened groups. Unscreened people may be knowledgeable about colorectal cancer screening but tend to prioritize other life demands over the need for screening.

### Unpleasantness

Unscreened people often have a basic understanding of colorectal cancer screening. But they typically have strong beliefs about the unpleasantness of the test procedure. They describe the test as embarrassing and invasive.

### Cost

Unscreened people have a common perception that colorectal cancer screening is not affordable.

### No Family History

Many unscreened people believe that colorectal cancer is primarily hereditary. Since they have no symptoms or family history, they feel that the need for screening doesn't apply to them.



## Notable Barrier Differences Among the Unscreened

Barriers to screening are similar for whites, Hispanics, and African Americans, with procrastination leading. Top barriers for Asians included no symptoms, no family history, and no recommendation from a doctor.

**Whites** – More likely to cite unpleasantness of prep

**Young 50** – More likely to cite procrastination

**Asians** – More likely to cite that doctor didn't recommend or not thinking they were of age

**Rural Dwellers** – More likely to cite they don't want to know if they have cancer

**Marketplace Insured** – More likely to cite they can't afford out-of-pocket costs

**Women** – More likely to cite unpleasantness of prep and no family history



## How to Break Through Barriers

Doctors and other medical professionals can help individuals to break through barriers to screening. They are the most trusted resources for screening information. They can collaborate with members of the medical neighborhood to create effective pathways for screening.

Consider these ways of helping unscreened individuals overcome their barriers to screening.



**Medical visits are critically important.** Many of the unscreened have not visited a doctor for a physical examination within the past year. Still, 69% of respondents have visited a doctor's office for one reason or another (e.g. prescription refill, illness, etc.). Members of the medical neighborhood can work together to deliver consistent screening messages at various touch points such as sick visits, flu shot visits, or even visits with specialty providers or pharmacists. Screening messages can be delivered by nurses, medical assistants, lab technicians, and other medical professionals.



**Encourage conversations with family members.** Family members are significant influencers for the unscreened. They can help motivate their family members to take steps to get screened.

## How to Overcome Procrastination

Procrastination is the leading barrier affecting colorectal cancer screening. Many unscreened individuals procrastinate because of pressing issues in their lives that are not related to screening. Examples include caring for family, maintaining hectic work schedules, and dealing with financial issues. Some individuals also procrastinate because they fear abnormal screening results.

Consider these messaging tips to help procrastinators move forward.



**Focus on the "why" of screening.** Show individuals why they should get screened by connecting screening to the things that are most important to them. For example, many unscreened individuals report that family is important to them. So, messages that link screening to the family are likely to be more effective.



**Break the screening process into small tasks.** Planning a colorectal cancer screening procedure can feel overwhelming to some individuals. You can help them to manage the process by identifying a series of small tasks that feels more manageable to them. For example, a first small step could be scheduling a doctor's appointment.

Helping people take small steps can help them overcome procrastination and move along the path toward screening.