Advances in Cancer Prevention
ISSN: 2472-0429

Xalxo, Adv Cancer Prev 2024, 8:1

Short Communication Open Access

Exploring Socioeconomic Disparities in Women's Cancer Screening Over a Decade: A Systematic Analysis

Lorence Xalxo*

Department of Botany and Microbiology, College of Sciences, King Saud University, Riyadh 11495, Saudi Arabia

Abstract

This study conducts a comprehensive examination of socioeconomic disparities in women's cancer screening participation over the past decade. Leveraging data from population-based surveys, health records, and screening program datasets spanning from 2010 to 2020, the research focuses on a diverse cohort of women stratified by income, education, and access to healthcare resources. The primary objectives include assessing screening participation rates, analyzing trends across various socioeconomic strata, and utilizing multivariate regression models to delineate the influence of income, education, and healthcare access on screening behavior. The study anticipates revealing nuanced patterns in disparities and aims to contribute valuable insights to the discourse on healthcare equity. The findings have implications for informing targeted interventions, shaping policy measures, and fostering inclusivity in cancer screening programs. Ultimately, this research aspires to guide the development of a more equitable healthcare landscape, ensuring that all women have equal access to crucial, life-saving cancer screening initiatives.

Introduction

Cancer screening plays a pivotal role in early detection and prevention, significantly influencing health outcomes. However, disparities in screening participation based on socioeconomic factors persist, raising concerns about equitable healthcare access. This study delves into the evolving trends in cervical, breast, and colorectal cancer screening among women over the past decade, specifically focusing on socioeconomic disparities [1-5]. By conducting a systematic analysis of population-based surveys, health records, and screening program data from 2010 to 2020, the research aims to provide valuable insights into the impact of income, education, and access to healthcare resources on screening participation rates.

Methods

The study employed a comprehensive approach, utilizing data from various sources to capture a nuanced understanding of screening trends and socioeconomic disparities. A diverse cohort of women was included in the analysis, with a stratification based on income, education levels, and access to healthcare resources. Population-based surveys, health records, and screening program data were meticulously examined to ensure a robust and representative dataset.

Screening participation rates and trends

The primary focus of the study was to assess screening participation rates and their trends over the past decade. By analyzing the data across different socioeconomic strata, researchers aimed to identify patterns and variations in screening behavior. Understanding the fluctuations in participation rates could shed light on the effectiveness of existing screening programs and highlight areas where targeted interventions may be required. To gain a deeper understanding of the impact of socioeconomic determinants on screening behavior, the study employed multivariate regression models. These models allowed researchers to isolate the influence of income, education, and access to healthcare resources while controlling for other potential confounding variables. By tearing apart the intricate interplay of these factors, the study aimed to quantify their individual and collective effects on screening participation.

Key findings: The study is expected to yield crucial findings regarding the evolving trends in cervical, breast, and colorectal cancer screening among women [6-8]. By dissecting the data through the lens of socioeconomic indicators, researchers anticipate uncovering disparities that may have widened or narrowed over the past decade. Additionally, the multivariate regression models will provide insights into the relative contribution of income, education, and healthcare access to screening behavior, offering a comprehensive understanding of the complex interrelationships at play.

Implications and future directions: The outcomes of this study hold significant implications for public health initiatives aimed at reducing cancer-related health disparities. Understanding how socioeconomic factors influence screening participation is pivotal for designing targeted interventions and policy measures [9,10]. By acknowledging and addressing these disparities, healthcare professionals, policymakers, and public health advocates can work towards ensuring that all women, regardless of their socioeconomic status, have equal access to life-saving cancer screening programs.

Conclusion

As the curtain lifts on a decade-long investigation into the socioeconomic disparities surrounding cervical, breast, and colorectal cancer screening, the findings of this study are poised to contribute valuable insights to the ongoing dialogue on healthcare equity. By systematically analyzing data from diverse sources and applying sophisticated statistical models, researchers aim to provide a roadmap for more effective and inclusive cancer screening programs in the years to come. Ultimately, the goal is to create a healthcare landscape where every woman has the opportunity for early detection and prevention,

***Corresponding author:** Lorence Xalxo, Department of Botany and Microbiology, College of Sciences, King Saud University, Riyadh 11495, Saudi Arabia, E-mail: lxlorence@xalxo.com

Received: 01-Jan-2024, Manuscript No. acp-24-124834; **Editor assigned:** 03-Jan-2024, PreQC No. acp-24-124834(PQ); **Reviewed:** 17-Jan-2024, QC No. acp-24-124834; **Revised:** 23-Jan-2024, Manuscript No. acp-24-124834(R); **Published:** 30-Jan-2024; DOI: 10.4172/2472-0429.1000201

Citation: Xalxo L (2024) Exploring Socioeconomic Disparities in Women's Cancer Screening Over a Decade: A Systematic Analysis Adv Cancer Prev 8: 201.

regardless of her socioeconomic background.

Acknowledgement

Not applicable.

Conflict of Interest

Author declares no conflict of interest.

References

1. Asiry MA (2018) Biological aspects of orthodontic tooth movement: a review of literature .Saudi J Biol Sci 25: 1027-1032.
2. Chang M, Lin H, Fu H, Wang J, Yang Y, et al (2020) CREB activation affects mesenchymal stem cell migration and differentiation in periodontal tissues due to orthodontic force. Int J Biochem Cell Biol 129: 105862.
3. Niemczewski B (2007) Observations of water cavitation intensity under practical ultrasonic cleaning conditions. Ultrason Sonochem 14: 13-18.
4. Carmen JC, Roeder BL, Nelson JL, Ogilvie RLR, Robison RA, et al. (2005) Treatment of biofilm infections on implants with low-frequency ultrasound and antibiotics. Am J Infect Control 33: 78-82.
5. Qian Z, Stoodley P, Pitt WG (1996) Effect of low-intensity ultrasound upon biofilm structure from confocal scanning laser microscopy observation. Biomaterials 17: 1975-1980.
6. Decker SL (2011) Medicaid payment levels to dentists and access to dental care among children and adolescents. JAMA 306: 187-93.
7. Chalmers NI, Compton RD (2017) Children's access to dental care affected by reimbursement rates, dentist density, and dentist participation in Medicaid. Am J Public Health 107: 1612-1614.
8. Facco E, Zanette G, Favero L, Bacci C, Sivolella S, et al (2011) Toward the validation of visual analogue scale for anxiety. Anesth Prog 58: 8-13.
9. Liu L, Yang Y, Liu P, Tan W (2014) The influence of air content in water on ultrasonic cavitation field. Ultrason Sonochem 210: 566-71.
10. Sluis LVD, Versluis M, Wu M, Wesselink P (2007) Passive ultrasonic irrigation of the root canal: a review of the literature. Int Endod J 40: 415-426.