



The Harris Poll

Harris Insights & Analytics LLC, A Stagwell Company

ASCO 2020 National Cancer Opinions Survey

October 2020



Table of Contents

	Page
Research Methodology	3
Report Notes	4
Key Findings	5
Detailed Findings	
Attitudes About Cancer Risk	10
COVID-19 and Cancer Care	22
Access to Best Possible Care	31
Clinical Trial Myths	40
E-Cigarette Use & Perceptions	44
Affordability of Cancer Care	52
Cancer Management	59
Demographics	70
Cancer Profiles	75
Health Insurance Profiles	79
Appendix (Trended data)	82



Research Methodology

Mode:
Online survey



Length:
20 Minutes



Qualification Criteria:
General Population

- US residents
- Age 18+



Cancer Patients

- US residents
- Age 18+
- Ever diagnosed with cancer by a healthcare professional



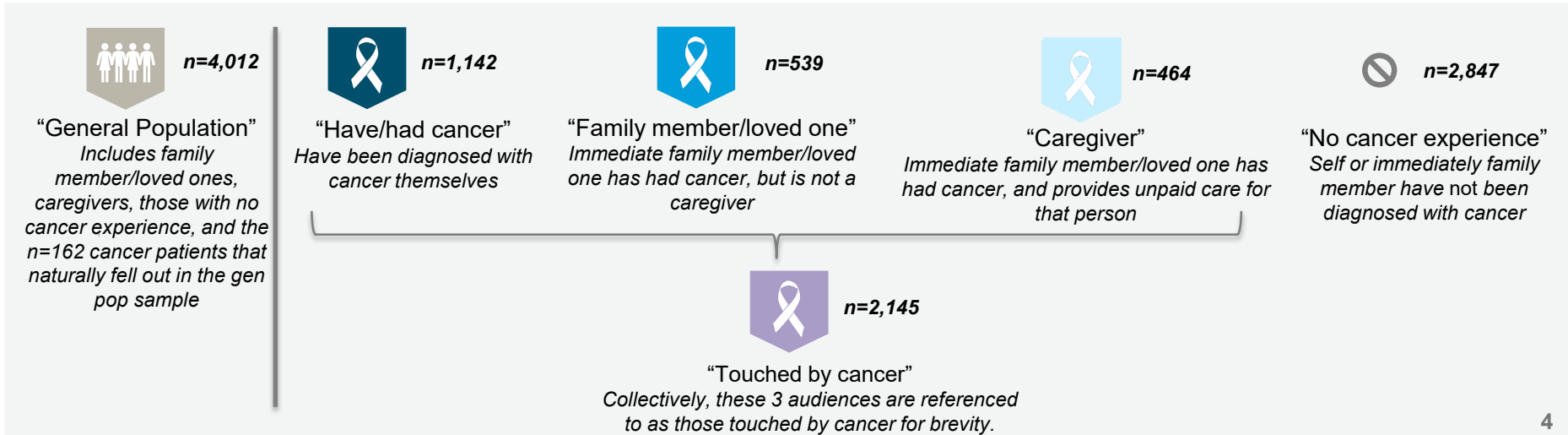
	General Population	Cancer Patients
Sample Size:	n=4,012* <i>*includes n=162 cancer patients (natural fallout)</i>	n=1,142** <i>**includes n=162 cancer patients from the gen pop natural fallout + an oversample of n=980</i>
Field Dates:	July 21 – September 8, 2020	

This survey was conducted online in the U.S. by The Harris Poll on behalf of ASCO between July 21 – September 8, 2020 among 4,012 US adults aged 18+ and an oversample of 980 adults 18+ with cancer for a total of 1,142 adults with cancer. For all US adults age 18+ figures for age by gender, education, region, household size, income, marital status, and employment status were adjusted, as needed to population distributions from the US Census Bureau, separately for Hispanic, Black/African American (not Hispanic) and all other (not Hispanic). Then each race/ethnicity group was combined into an overall total based on their proportion within the US adult population. The adults age 18+ with cancer were weighted separately, as needed, using population distributions from the CDC's NHIS for those diagnosed with cancer, using the same demographic variables as above.



Report Notes

- Percentages may not add up to 100% due to weighting and/or computer rounding and the acceptance of multiple responses.
- Unless otherwise noted, results for the Total (general population) are displayed.
- Statistical significance testing (at 95% confidence) is included where applicable – significant differences are noted throughout the report with letters (A,B,C, etc.).
- In certain instances, some subgroups may be too small to report quantitatively for PR. Anything too small to report quantitatively is noted with **Caution: small base (n<100). Results should be interpreted as directional only.* Subgroup sample sizes that are even smaller (<50 or <30), are noted with ***Caution, very/extremely small base (n<50/30), results should be interpreted as qualitative in nature.*
- Colors and icons differentiate which audience is being represented within the detailed findings as shown below.





Key Findings



Key Trended General Population Findings

Findings signal an increase in understanding of key risk factors – but may not actually be taking meaningful steps to reduce cancer risk

- When it comes to risk, people are more likely to say that they think smoking e-cigarettes (53% up from 42% in 2018) and alcohol (34% up from 30% in 2017) increases a person's risk of getting cancer
- Adults are more likely to say that they care deeply and incorporate cancer prevention into their daily life (27% vs. 24% in 2019)
- They are also more likely to say they talked with their doctor about what they can do to reduce their cancer risk (22% vs. 18% in 2019) – but at the same time are more likely to say they thought they had cancer based on information they found online (12% vs. 9% in 2019)
- However, when it comes to making actual changes, the only significant change in behavior was an increase in taking supplements to reduce risk (50% vs. 44% in 2017-2019) and also a drop in concern about getting cancer (54% down from 57% in 2019 and 63% in 2017) - which may be due to an increased focus on overall health due to the pandemic

Knowledge about the dangers of e-cigarettes seem to be growing though it is coupled with an increase in users

- Adults are less likely to say e-cigarettes are a healthier alternative to traditional cigarettes (34% vs. 39% in 2019) and to say that the long-term health effects of e-cigarettes aren't yet known (70% vs. 76% in 2019)
- And, there seems to be growing support for banning e-cigs (48% vs. 41% in 2019) and flavored e-cigs (55% vs. 46% in 2019)
- However, adults are more likely to say they have tried e-cigarettes (34% vs. 27% in 2019) and the proportion saying they use daily or recreationally has grown (15% vs. 13% in 2019)



The Pandemic Takes Its Toll on Patients and Prevention

Most patients are limiting contact with others because of COVID-19, leaving caregivers wishing they could do more

- Most patients (81%) are limiting their contact with others because they are scared of getting COVID-19 and half (49%) feel they have had to make a lot of sacrifices to their daily life because of their heightened risk for COVID-19
- Roughly two-thirds of family members and caregivers wish there was more they could do to support their loved one, both practically (69% and 71%, respectively) and emotionally (67% and 69%, respectively)
- For caregivers whose loved one's cancer is active or in partial remission, this is especially true - 84% wish there was more they could do to help and 77% wish there was more they could do to emotionally support their loved one during the pandemic

The pandemic causes major delays in cancer screenings – meanwhile, many are not taking basic steps of cancer prevention

- Nearly one in four adults (24%) delayed or cancelled routine cancer screening tests because of the pandemic
- Among those who delayed or cancelled, two-thirds of the time (66%) it was the patient who chose to delay/cancel
- More than six in 10 (63%) who delayed or skipped their appointment(s) are concerned about being behind on their cancer screening(s)
- At the same time, fewer than half of Americans report that they take important preventive actions to reduce their cancer risk such as using sunblock (48%), maintaining a healthy weight (47%), and limiting alcohol consumption (42%)



Awareness of Inequities Exists, but Unevenly Across Races

Americans acknowledge there are inequities – but - most are unaware of the impact race has on cancer care and survival

- Nearly three in five (59%) agree racism can impact the care a person receives within the U.S. healthcare system
- And, half of Americans (53%) feel Black Americans are less likely to have access to the same quality of cancer care as White Americans
- Despite this, only around a quarter of Americans (24%) say a person's race status affects the likelihood they will get the best possible cancer care and less than one in five (19%) believe race has an impact on a person's likelihood of *surviving* cancer

People of color are far more likely to be aware of inequities

- Non-white adults are more likely to agree racism can impact care within US health system (Black 76%, Hispanic 70%, and Asian (66%) compared to 53% of White adults)
- And, 71% of Black adults say that Blacks are less likely to have access to the same quality of care as Whites, compared to 47% of White adults
- Black and Hispanic adults are more likely than White adults to say race impacts both access to the best possible cancer care (Black 41% and Hispanic 28% compared to 20% of White adults) as well as survival (Black 27% and Hispanic 22% compared to 16% of White adults)



Most Do Not Understand Realities of Clinical Trials

There is a lack of understanding of clinical trials – even among cancer patients

- Only about half of U.S. adults (53%) say they are knowledgeable about clinical trials
- Even among those who have/had cancer, only 1 in 10 (11%) report being *very* knowledgeable
- Most adults (91%) feel that clinical trials involve some risk with about 1 in 5 (21%) believing there is a lot of risk
- But, nearly half of people (48%) believe cancer patients who participate in clinical trials are not receiving the best possible care and are just part of an experiment
- Further, three quarters of Americans (75%), including 87% of cancer patients, believe that some people who participate in cancer clinical trials receive a placebo rather than actual treatment

Despite a lack of understanding, most Americans say they would be willing to participate in a cancer clinical trial

- Three in four Americans (75%) say they would be willing to participate in a clinical trial for a cancer treatment if they had cancer
- And, nearly three quarters of adults (74%) agree participating in a clinical trail is worth the risks for benefit of greater good
- That said, two-thirds (67%) say they wish they knew more about how clinical trials worked

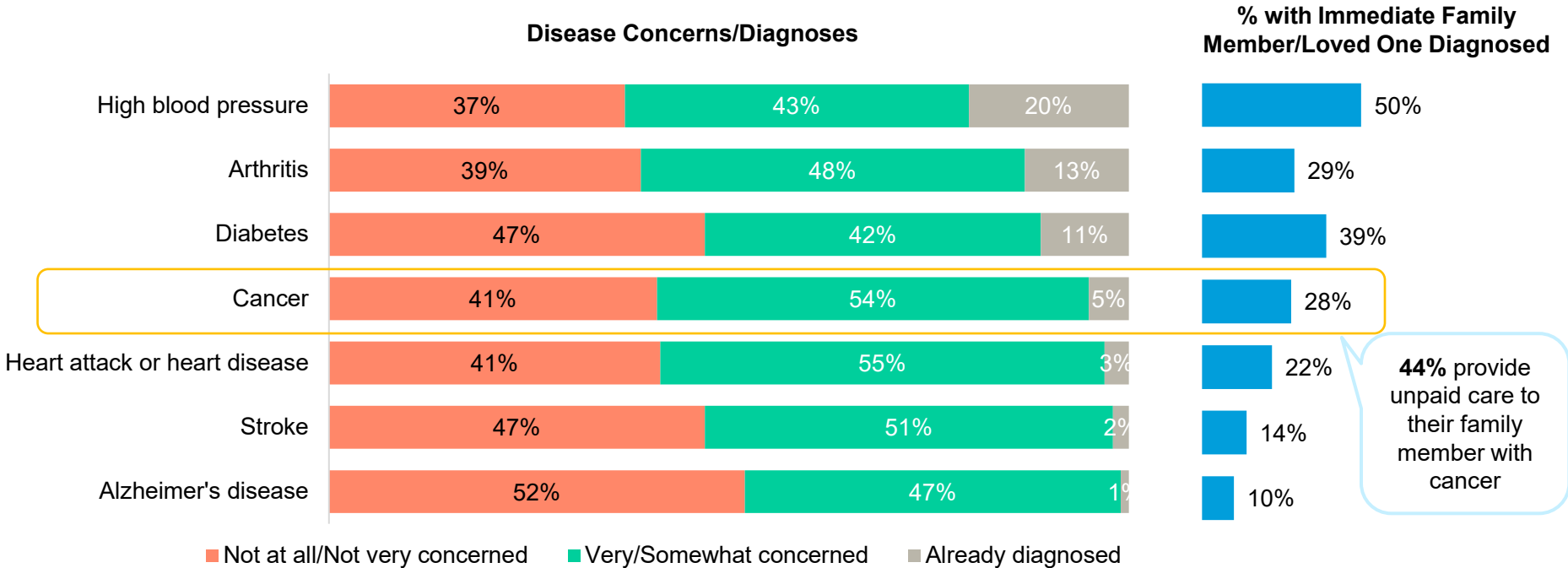


Attitudes About Cancer Risk



Most Adults Concerned About Developing Cancer in Their Lifetime

Concern for developing cancer second only to heart attack or heart disease



BASE: QUALIFIED RESPONDENTS (n=4012)

Q601 How concerned are you that you may develop the following diseases in your lifetime?

Q615 Has a doctor, nurse, or other health professional ever told an immediate family member (child, parent, sibling) or loved one that they have any of the following? Please select all that apply.

BASE: IMMEDIATE FAMILY MEMBERS HAVE/HAD CANCER (n=1098)

Q13 You indicated that an immediate family member or loved one has been diagnosed with cancer. Have you provided unpaid care to this person?



Concern Over Developing Cancer Continues to Decline This Year

Patterns of declining concern from 2017 seen across many health conditions

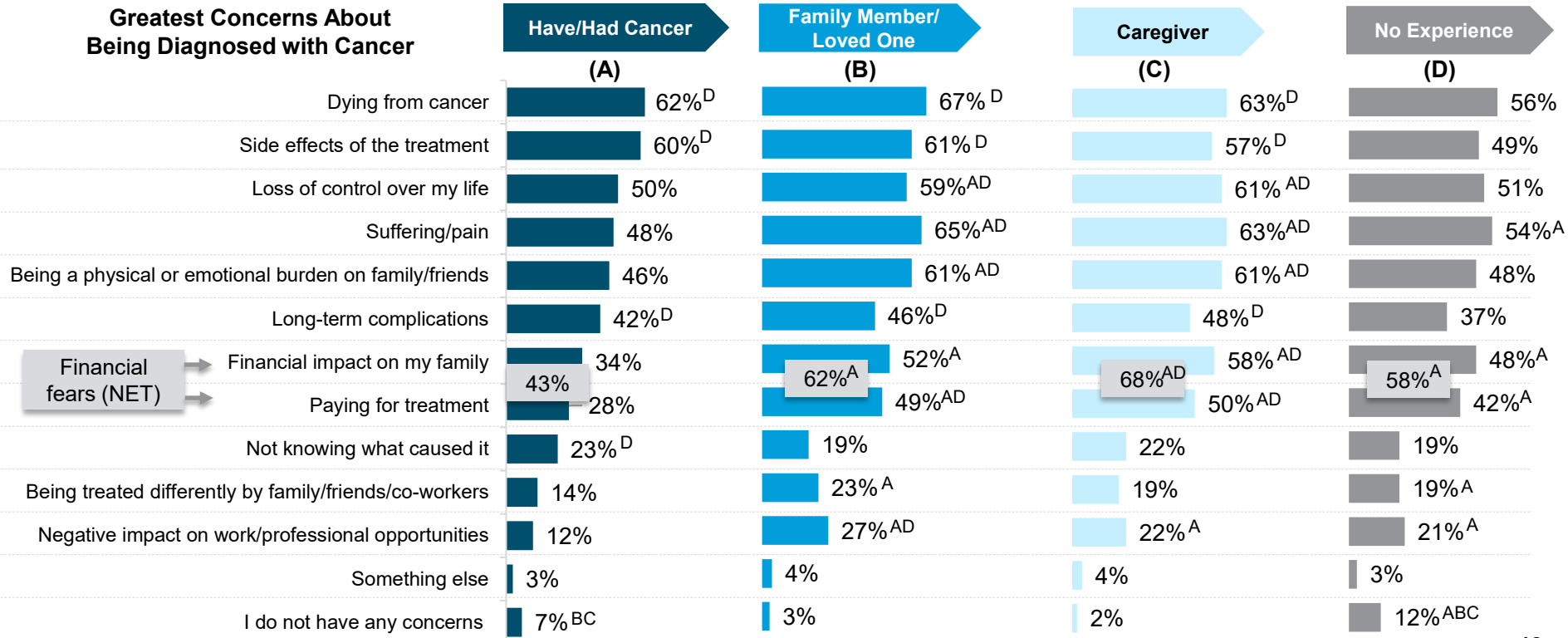
Trended Disease Concern
(% Very/Somewhat Concerned)

	2017 (A)	2018 (B)	2019 (C)	2020 (D)
Heart attack or heart disease	62% BCD	55%	57%	55%
Cancer	63% BCD	58% D	57% D	54%
Stroke	57% BCD	51%	53%	51%
Arthritis	51% BC	47%	45%	48%
Alzheimer's disease	56% BCD	49%	50%	47%
High blood pressure	44%	42%	43%	43%
Diabetes	46% D	44%	43%	42%



Those with Cancer Least Likely to Say Greatest Concerns are Financial

Family members/loved ones and caregivers are more likely than those who have/had cancer to be concerned with losing control over their lives and being a burden on their family or friends



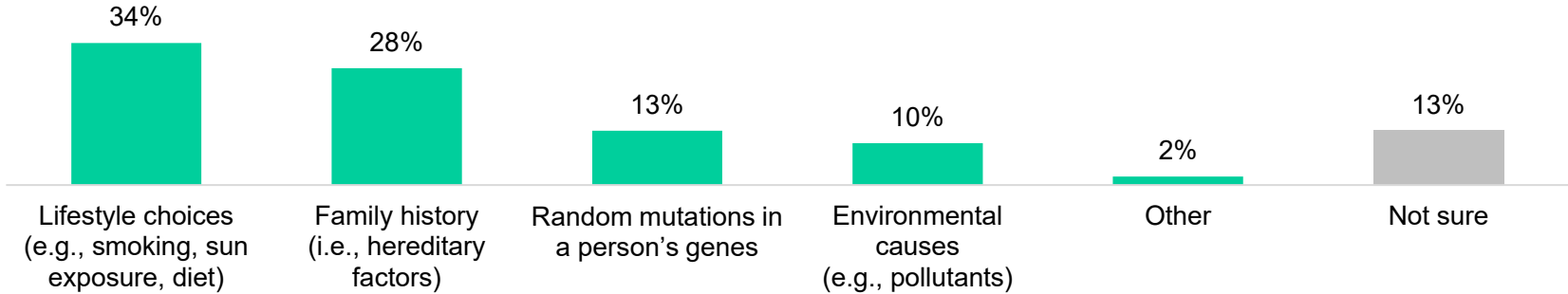
BASE: QUALIFIED RESPONDENTS (n=4012; HAVE/HAD CANCER (n=1142), FAMILY MEMBER/LOVED ONE (n=539), CAREGIVER (n=464), NO EXPERIENCE (n=2847))
 Q770 What are/were your greatest concerns about being diagnosed with cancer? Please select all that apply.



One-Third Feel Most Cancers Are Caused By Lifestyle Choices

Around 1 in 4 believe cancers are caused by family history

Beliefs About Causes of Cancer

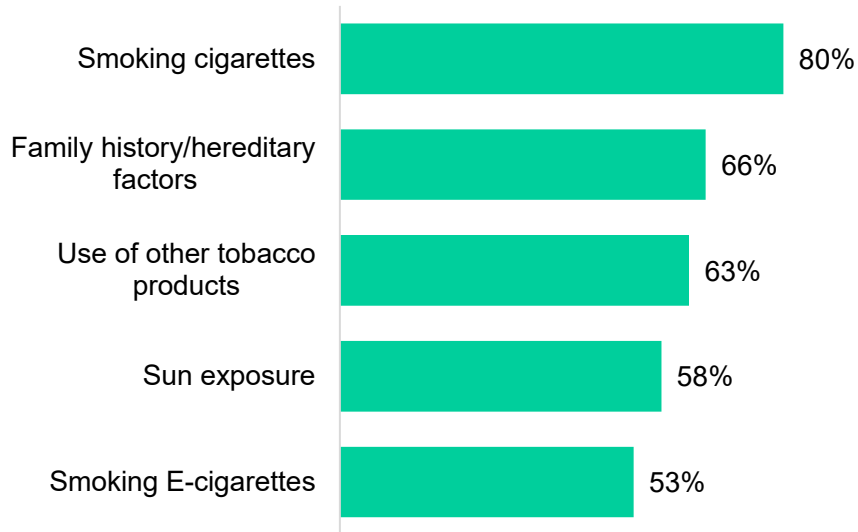




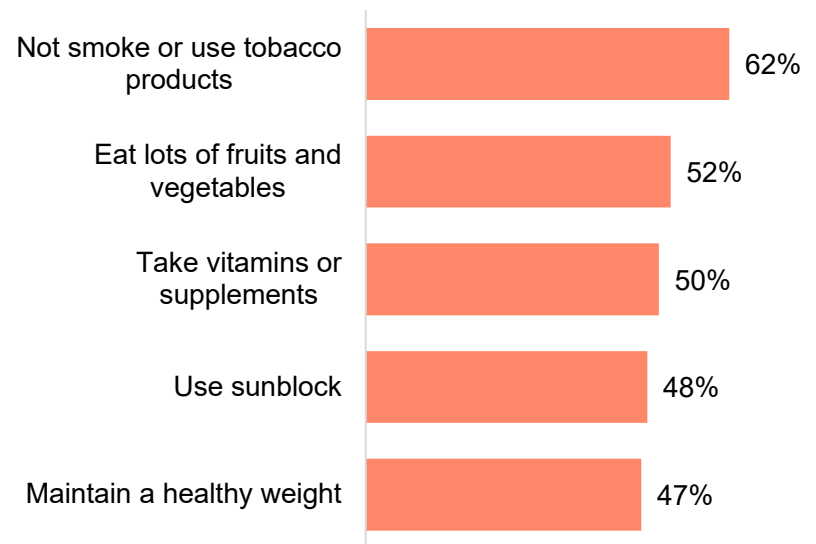
Smoking Cigarettes Remains Most Commonly Known Risk Factor

The use of other tobacco products and e-cigarettes also land on the list of the top 5 most common cancer risk factors, and not smoking or using tobacco products remains the top cancer reduction behavior taken

Top 5 Beliefs About Cancer Risk Factors



Top 5 Cancer Risk Reduction Behaviors Practiced



BASE: QUALIFIED RESPONDENTS (n=4012)

Q705 Which of the following do you think increases a person's risk of getting cancer? Please select all that apply.

Q715 Which of the following describes what you currently do to reduce your risk of getting cancer [again or getting another type of cancer]? Please select all that apply.



Adults More Likely to Believe Smoking E-Cigarettes Increases Cancer Risk

Trended Beliefs About Cancer Risk Factors

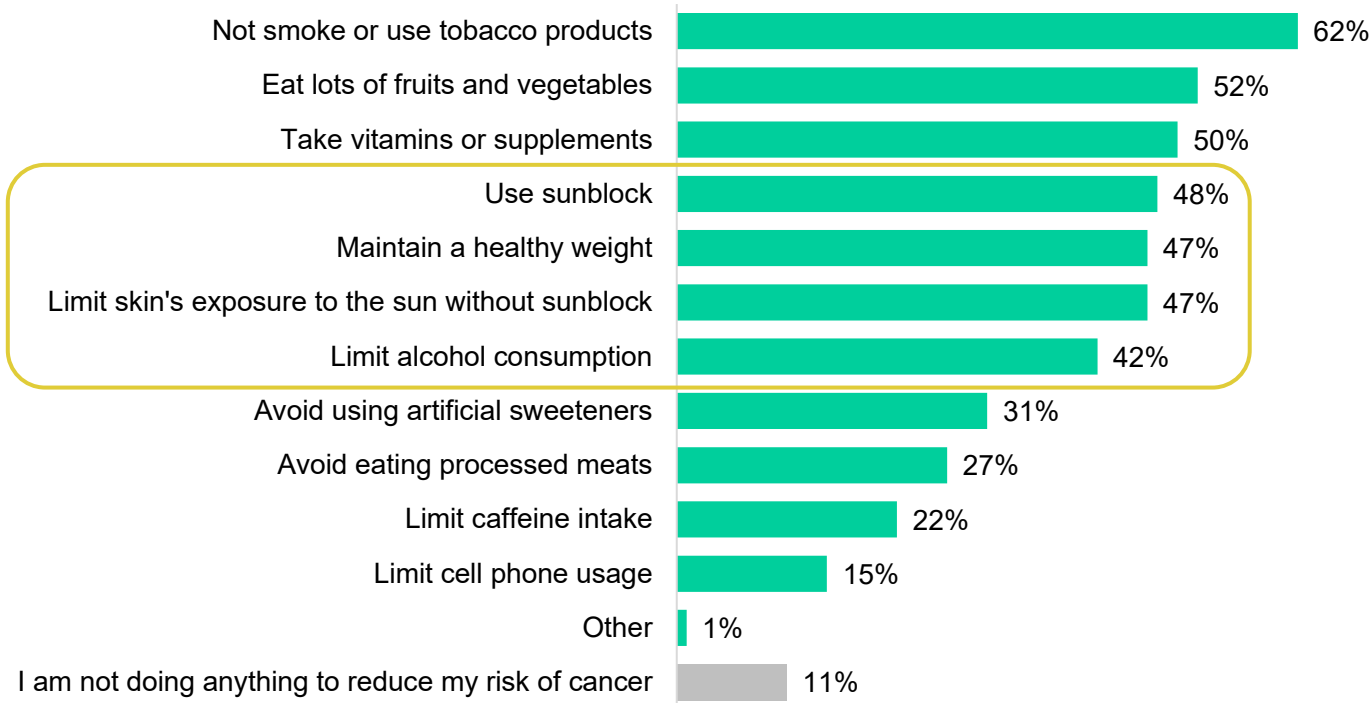
	2018 (B)	2019 (C)	2020 (D)
Smoking cigarettes	80%	81%	80%
Family history/hereditary factors	69% D	69% D	66%
Use of other tobacco products (e.g., cigars, pipes, chewing tobacco, etc.)	64%	66%	63%
Sun exposure	62% D	63% D	58%
Genetic mutations	48%	48%	46%
Smoking e-cigarettes	42%	50% B	53% BC
Obesity	35%	36%	34%
Alcohol	31%	31%	34% B
Processed meats	32% D	33% D	26%
Artificial sweeteners	28% D	28% D	23%
Certain viral infections	24%	23%	22%
Cell phones	16%	16%	14%
Caffeine	8%	9%	9%
Other	2% D	2%	1%
Not sure	5%	4%	4%
I don't think anything increases a person's risk of getting cancer	3%	4%	3%



Less than Half of Adults Taking Important Steps for Cancer Prevention

Using sunblock, limiting exposure to sun without sunblock, maintaining a health weight, and limiting alcohol consumption are key cancer prevention steps being taken by less than half of adults

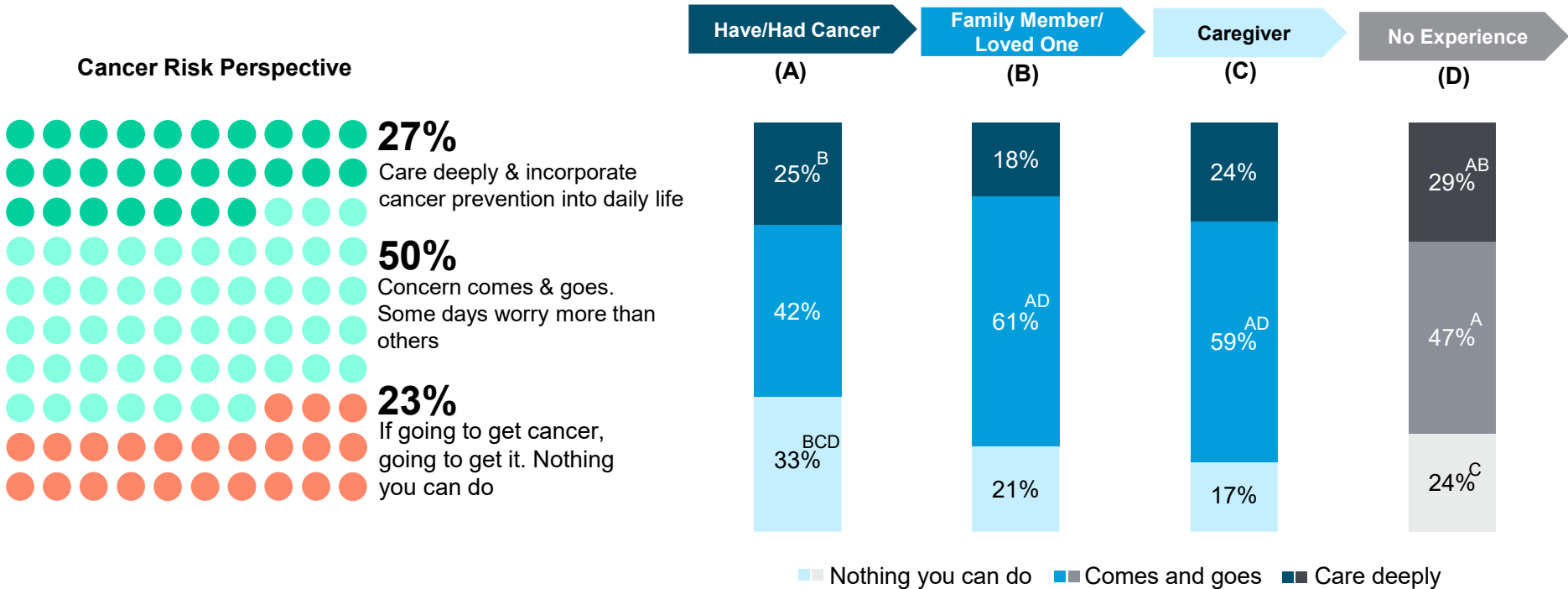
Cancer Risk Reduction Behaviors Practiced





Just Over 1 in 4 Incorporate Cancer Prevention Into Their Daily Life

Those who have/had cancer are most likely to say that prior to diagnosis, they felt there was nothing they could do to prevent getting it

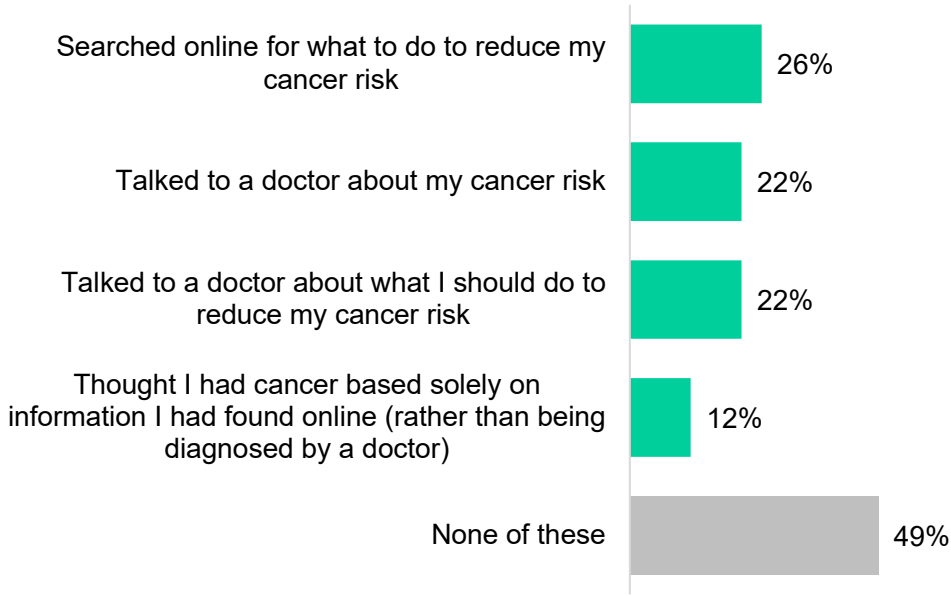




A Minority of Adults Have Talked to a Doctor About Cancer Risk/Prevention

Gen Z is least likely to have talked to a doctor about their risk; younger generations are more likely than their older counterparts to have thought they had cancer based solely on information they found online

Action Taken Regarding Cancer Risk



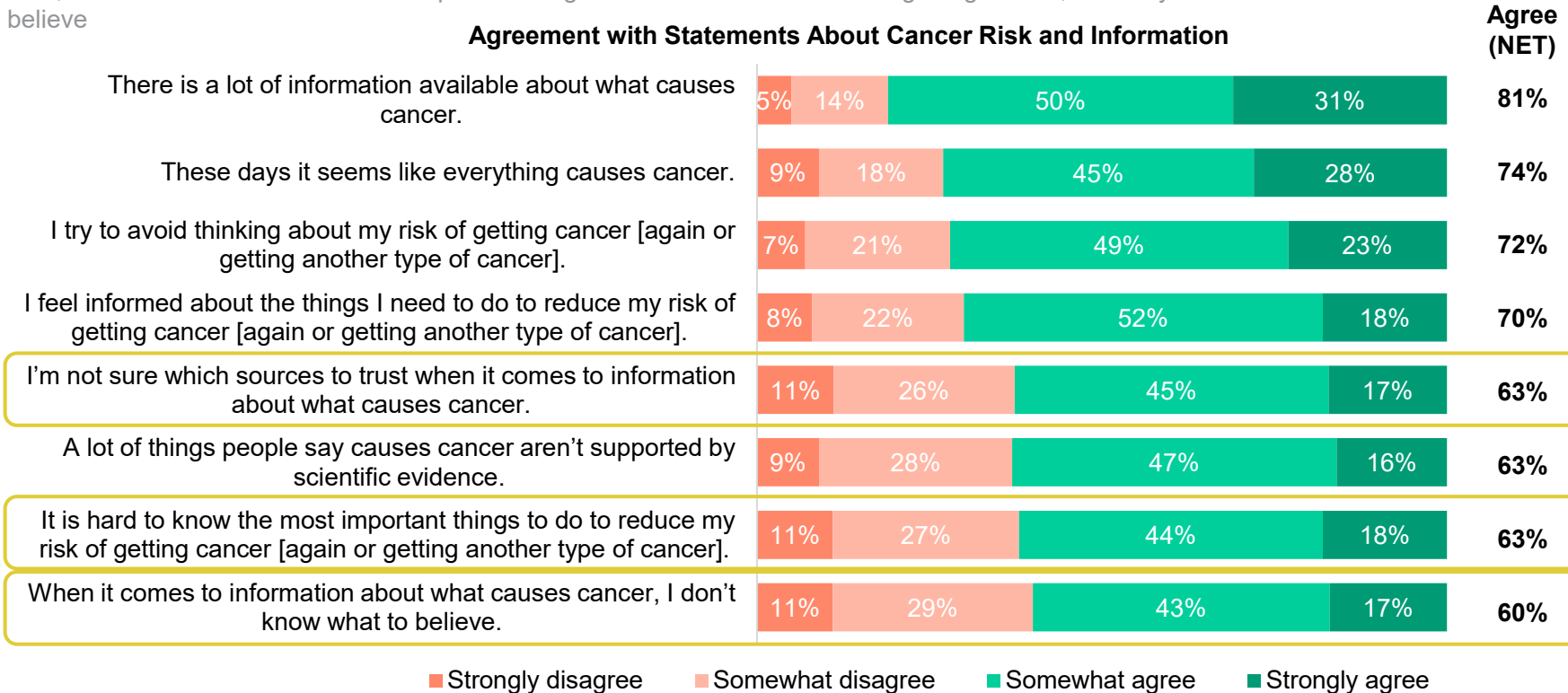
	Gen Z (18-23) (A)	Millennials (24-39) (B)	Gen X (40-55) (C)	Boomers (56-73) (D)	Silent (74+) (E)
Searched online for what to do to reduce my cancer risk	21% E	34% ADE	31% ADE	18% E	9%
Talked to a doctor about my cancer risk	13%	21% A	27% AB	24% A	19%
Talked to a doctor about what I should do to reduce my cancer risk	11%	24% AE	27% ADE	21% AE	10%
Thought I had cancer based solely on information I had found online (rather than being diagnosed by a doctor)	20% CDE	17% DE	13% DE	6%	1%
None of these	53% BC	40%	44%	59% BC	70% ABCD



Many Unsure What Information to Trust, Believe About What Causes Cancer

While the majority of adults agree that there is a lot of information on this available, 6 in 10 or more say they aren't sure which sources to trust, that it's hard to know the most important things to do to reduce their risk of getting cancer, and they don't know which information to believe

Agreement with Statements About Cancer Risk and Information





However, More Certainty Around Which Sources to Trust and What Information to Believe Compared to Last Year

Trended Agreement with Statements About Cancer Risk and Information
(% Strongly/Somewhat Agree)

	2019 (C)	2020 (D)
There is a lot of information available about what causes cancer.	81%	81%
These days it seems like everything causes cancer.	81% D	74%
I try to avoid thinking about my risk of getting cancer [again or getting another type of cancer].	69%	72% C
I feel informed about the things I need to do to reduce my risk of getting cancer [again or getting another type of cancer].	71%	70%
I'm not sure which sources to trust when it comes to information about what causes cancer.	66% D	63%
A lot of things people say causes cancer aren't supported by scientific evidence.	67% D	63%
It is hard to know the most important things to do to reduce my risk of getting cancer [again or getting another type of cancer].	64%	63%
When it comes to information about what causes cancer, I don't know what to believe.	66% D	60%



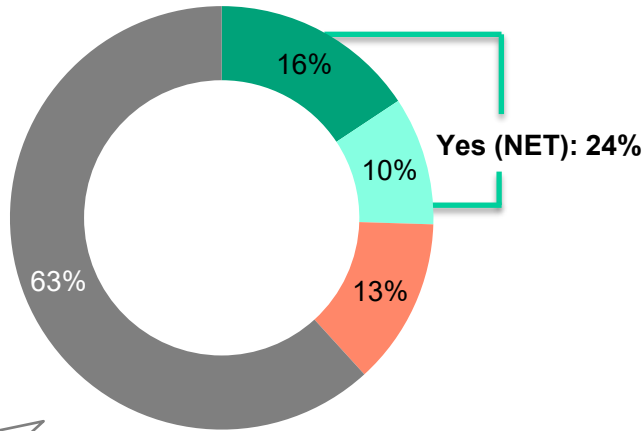
COVID-19 and Cancer Care



1 in 4 Delayed/Cancelled Routine Cancer Screening Tests Due to Pandemic

Among those who were scheduled for a routine cancer screening test during the pandemic, nearly two-thirds say they delayed or cancelled, most commonly by their own volition

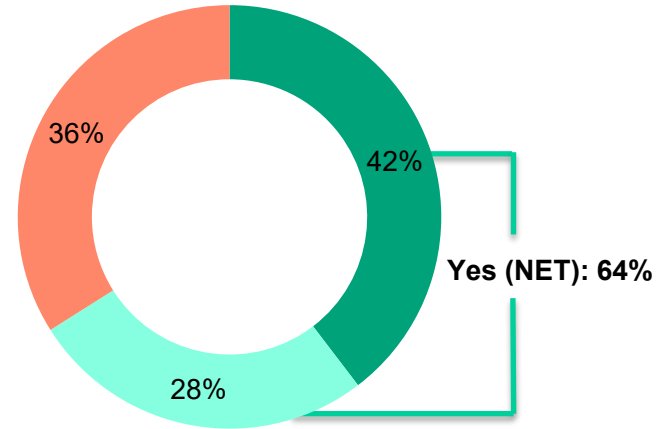
Delayed/Skipped Routine Cancer Screening Tests



Black adults are more likely than White adults to have not been scheduled for any cancer screening tests during the pandemic (68% vs. 61%)

- Yes, I chose to delay/cancel
- Yes, my provider delayed/ cancelled
- No, had tests as planned
- N/A, was not scheduled for any

Delayed/Skipped Routine Cancer Screening Tests
Among those who were scheduled for a screening test during the pandemic



- Yes, I chose to delay/cancel
- Yes, my provider delayed/ cancelled
- No, had tests as planned

BASE: QUALIFIED RESPONDENTS (n=4012)

Q11n2020 As a result of the COVID-19 pandemic, have you had to delay or cancel any routine cancer screening tests such as a mammogram, colonoscopy, lung scan, skin check, or PAP/HPV test?

BASE: SCHEDULED FOR CANCER SCREENING DURING PANDEMIC (n=1587)

Q11n2020 As a result of the COVID-19 pandemic, have you had to delay or cancel any routine cancer screening tests such as a mammogram, colonoscopy, lung scan, skin check, or PAP/HPV test?

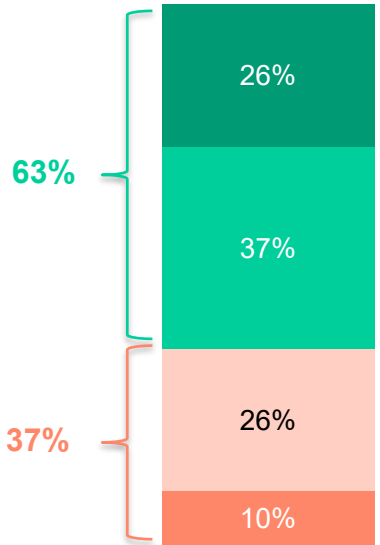


More Than 3 in 5 Who Delayed or Skipped Routine Cancer Screenings Concerned

Regardless of whether the delay was a personal choice or HCP requested, the concern remains the same

Concern About Being Behind on Cancer Screening(s)

Among those who delayed or skipped



Top 2 Box Concern	Among those who personally delayed or skipped	Among those whose HCP requested delayed or skip
Very concerned	64%	64%
Somewhat concerned		

- Not very concerned
- Not at all concerned

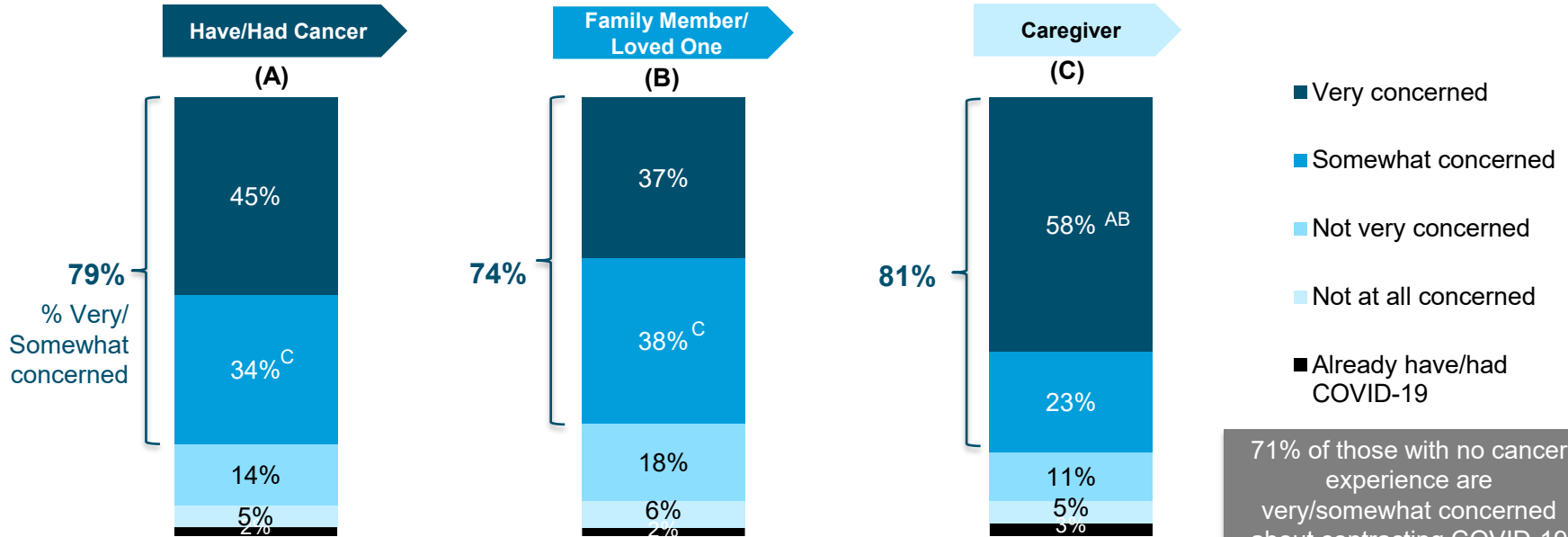
BASE: DELAYED OR SKIPPED ROUTINE CANCER SCREENINGS (n=1066); PERSONALLY DELAYED (n=704), HCP REQUESTED DELAY (n=451)
 Q12n2020 How concerned are you about being behind on your cancer screening(s)?



Majorities Concerned About Themselves, Loved Ones Contracting COVID-19

8 in 10 of those who have/had cancer are concerned about contracting the virus and a similar proportion of caregivers are concerned their loved one will get COVID-19

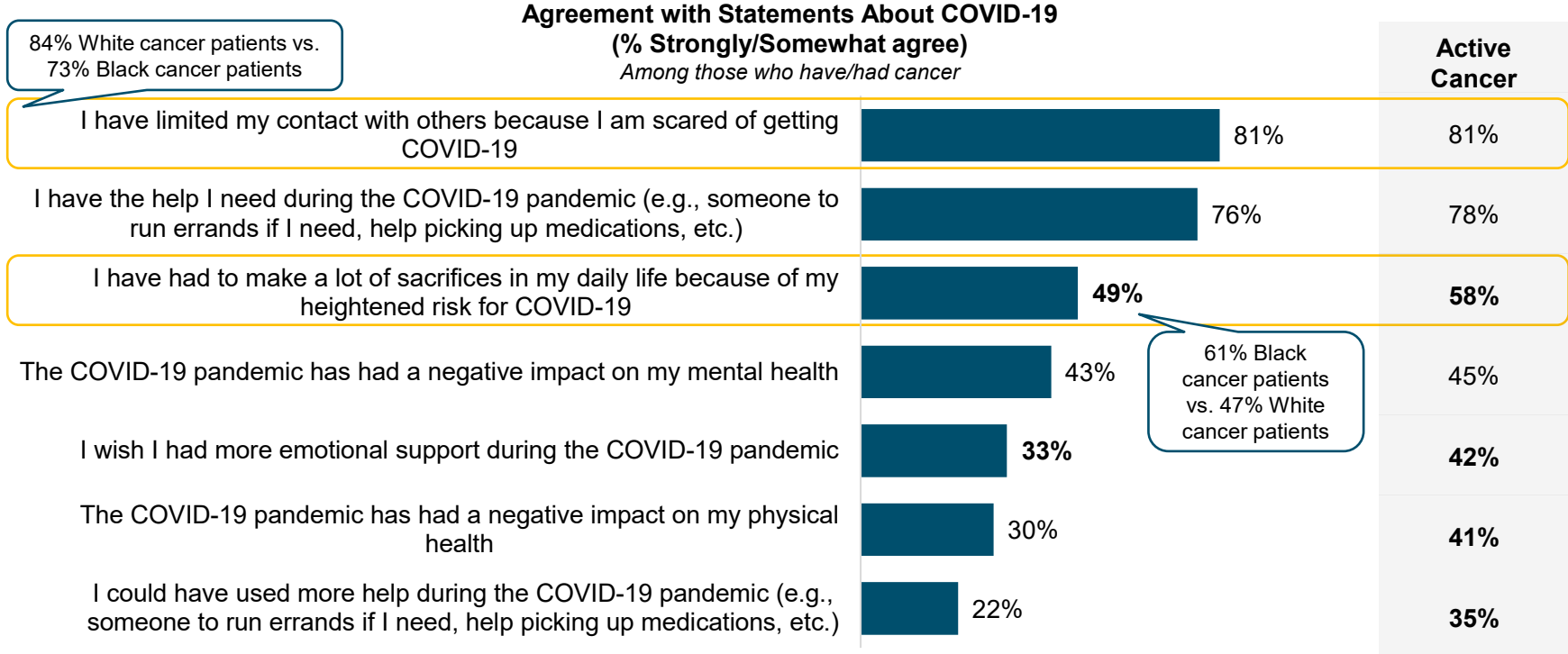
Concern About [Loved One] Contracting COVID-19
Among those who have/had cancer or whose loved one is not deceased





Most Limiting Contact With Others, With Half Feeling They Had to Make Sacrifices Because of Their Heightened Risk for COVID-19

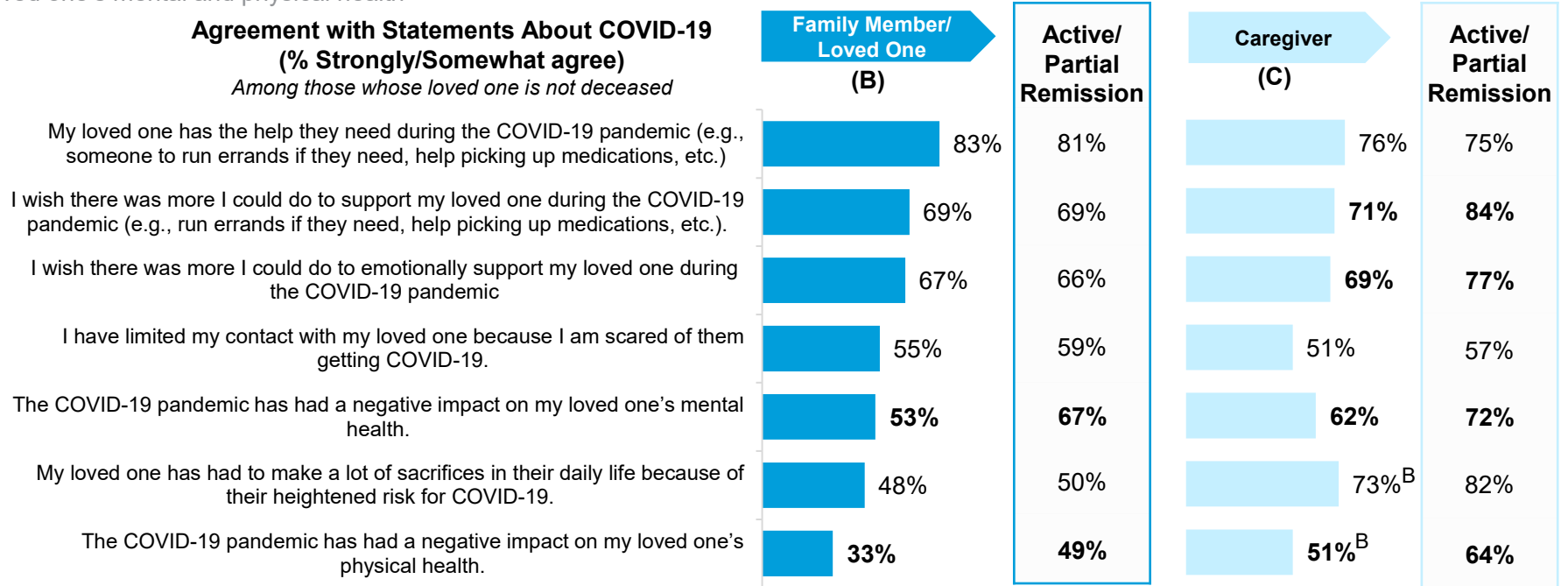
Those with active cancer are particularly likely to agree they have had to make a lot of sacrifices in their daily life, that they wish they had more emotional support, could have used more practical support, and that the pandemic has had a negative impact on their physical health





Around Half of Family Members and Caregivers Have Limited Contact With Their Loved One, With Many Wishing There Was More They Could Do To Help

Roughly two-thirds of family members/loved ones and caregivers wish there was more they could do to support their loved one, both practically and emotionally. For caregivers whose loved one has active cancer or is in partial remission this is especially true. Those whose loved one's cancer is active or they are in partial remission are particularly likely to say the pandemic has had a negative impact on their loved one's mental and physical health



BASE: FAMILY MEMBER/LOVED ONE AND PERSON IS NOT DECEASED (n=284); ACTIVE/PARTIAL REMISSION (n=113); CAREGIVER AND LOVED ONE IS NOT DECEASED (n=259); ACTIVE/PARTIAL REMISSION (n=137)
Q7n2020 To what extent do you agree or disagree with the following statements?

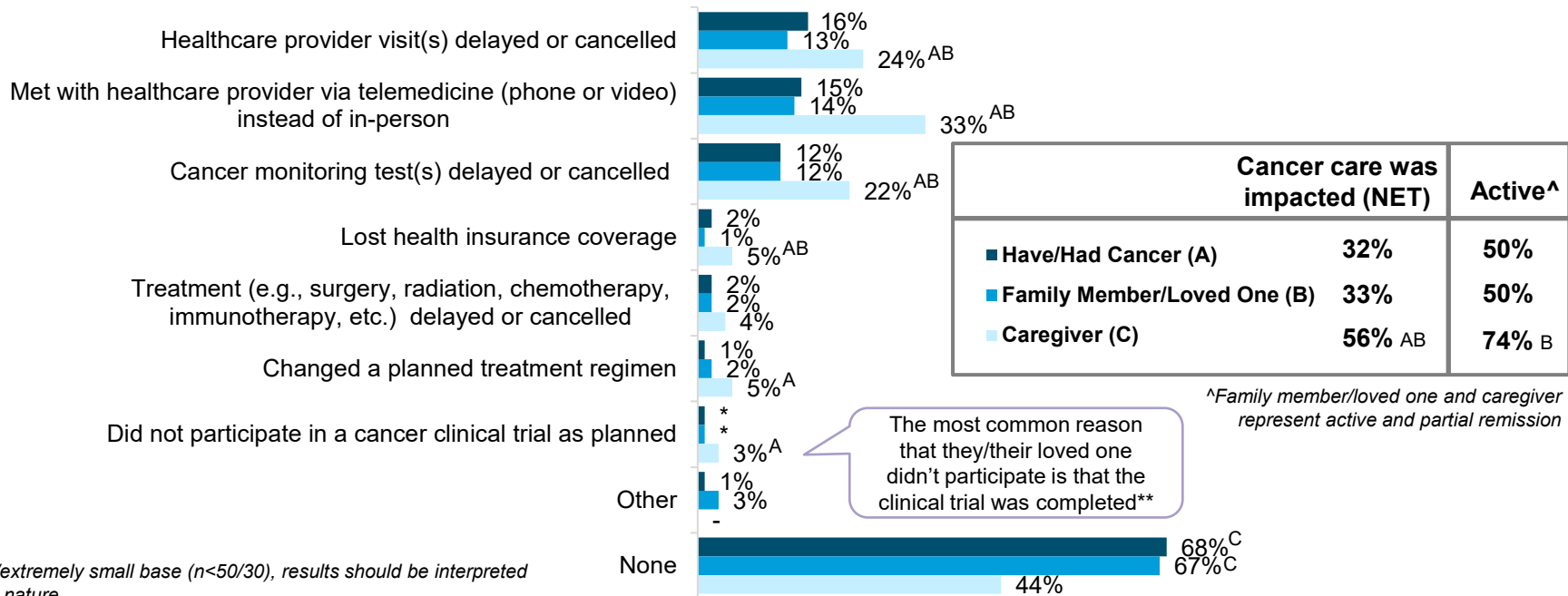


Cancer Care Impacted by Pandemic for at Least 1 in 3 Touched By Cancer

The most common impacts relate to HCP visits being delayed or done via telemedicine instead of in-person. Caregivers are much more likely than those who have/had cancer or family members/loved ones to report COVID-19 has impacted their loved one's cancer care

COVID-19 Impact on Cancer Care

Among those who have/had cancer or whose loved one is not deceased



**Caution, very/extremely small base (n<50/30), results should be interpreted as qualitative in nature.

BASE: HAVE/HAD CANCER OR IMMEDIATE FAMILY MEMBER HAS/HAD CANCER AND PERSON IS NOT DECEASED; HAVE/HAD CANCER (n=1142); ACTIVE (n=148); FAMILY MEMBER/LOVED ONE (n=284); ACTIVE/PARTIAL REMISSION (n=113); CAREGIVER (n=259); ACTIVE/PARTIAL REMISSION (n=137)

Q4n2020 In which of the following ways, if any, has [your/your loved one's] cancer care been impacted by the COVID-19 pandemic? Please select all that apply.

BASE: DID NOT PARTICIPATE IN CLINICAL TRIAL (n=16**)

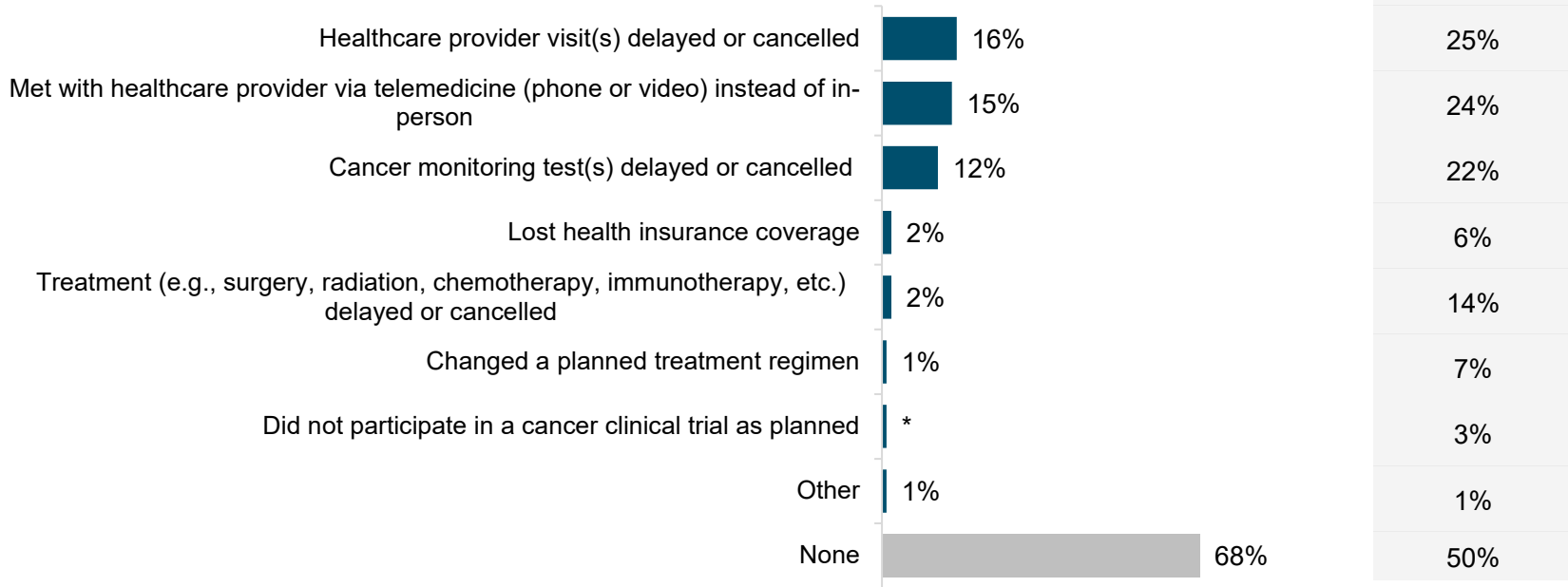
Q4An2020 You mentioned [you/your loved one] did not participate in a clinical trial as planned because of the COVID-19 pandemic. Which of the following reasons best describes why [you/your loved one] did not participate?



Those with Active Cancer Most Likely to Report Impacts to Care Due to Pandemic

Half of those with active cancer report some impact on their cancer care. Comparatively, the proportion of those who have/had cancer overall reporting impacts is roughly a third

COVID-19 Impact on Cancer Care
Among those who have/had cancer



BASE: HAVE/HAD CANCER (n=1142), ACTIVE (n=148)

Q4n2020 In which of the following ways, if any, has your cancer care been impacted by the COVID-19 pandemic? Please select all that apply.

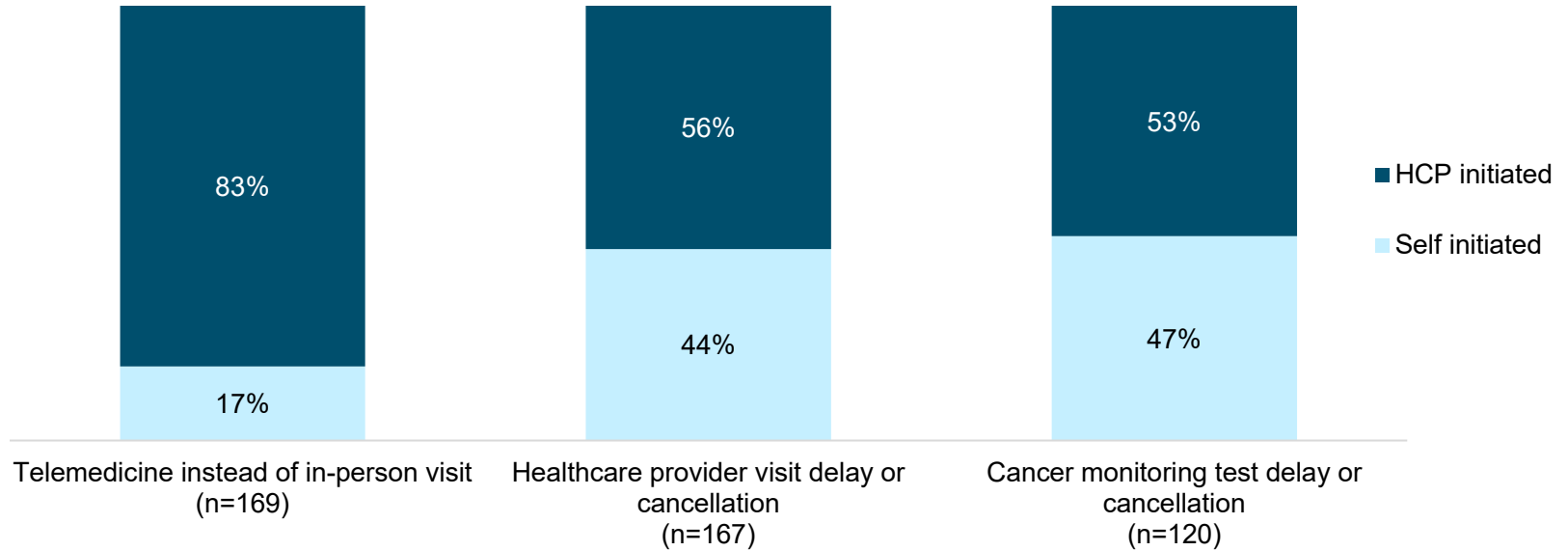


Majority Who Met HCP Via Telemedicine During Pandemic Say HCP Initiated

However, only about half report delays or cancellations of HCP visits and cancer monitoring tests were HCP initiated, with more being self initiated compared to telemedicine visits

Who Initiated Delay or Cancellation

Among those who have/had cancer and their cancer care was impacted



■ HCP initiated
■ Self initiated

Note: Treatment delay or cancellation (n=18) and Change of planned treatment regimen (n=10) have not been included due to extremely small base sizes.

BASE: HAVE/HAD CANCER AND CANCER CARE WAS IMPACTED (n=variable)

Q5n2020 For each of the following, please indicate whether the delay or cancellation was requested by you/your loved one or your/their healthcare provider?



Access to Best Possible Care

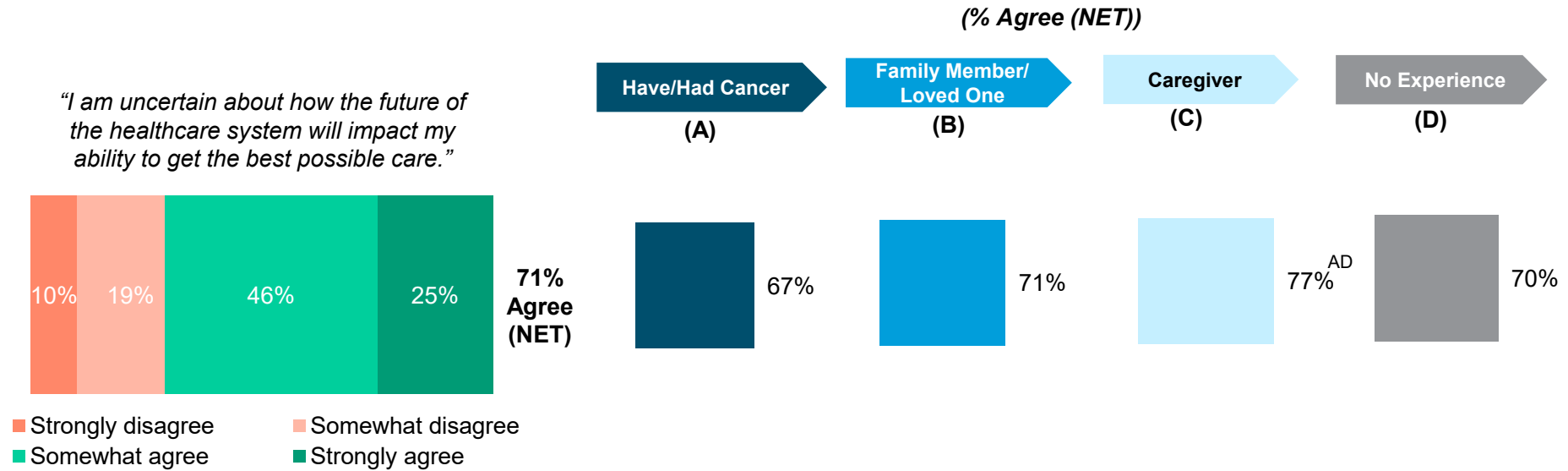


Many Uncertain About How Future of Healthcare Will Impact Care

Caregivers are more likely to agree with this than those who have/had cancer or those with no experience

Agreement with Statement About Future of Healthcare

"I am uncertain about how the future of the healthcare system will impact my ability to get the best possible care."

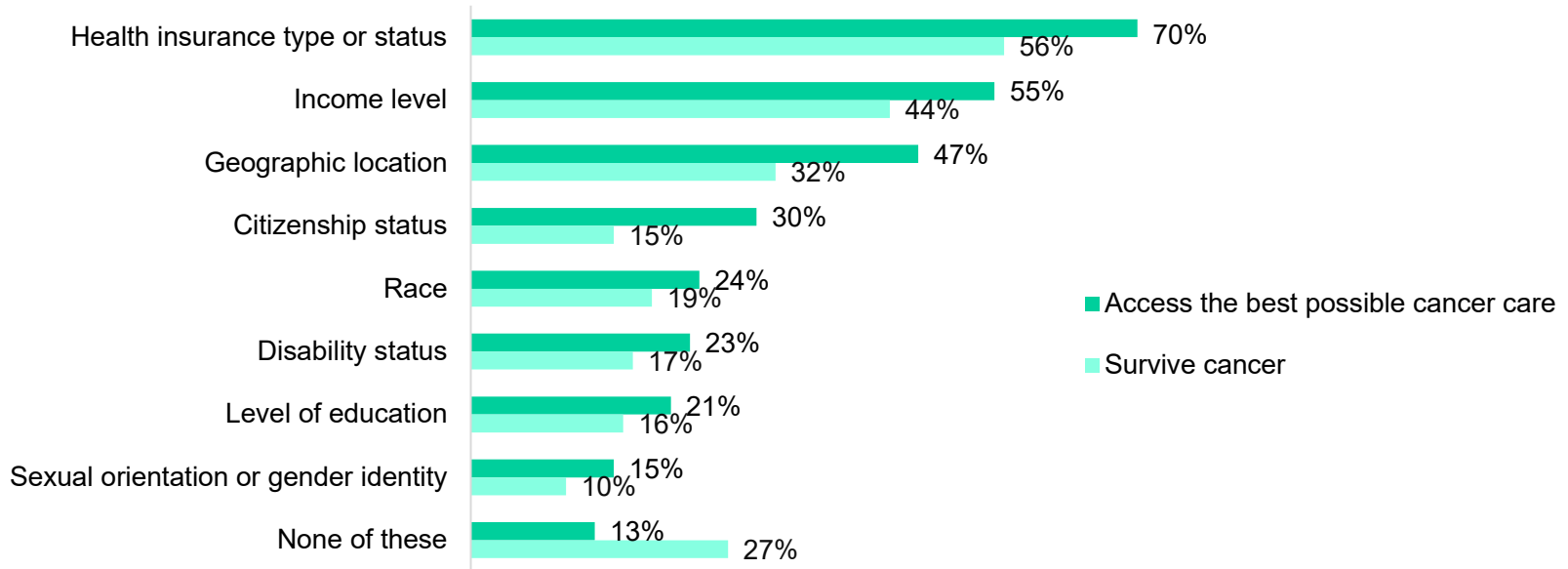




Majorities Believe Certain Demographics Impact Cancer Access and Survival

For both, the most common impact is believed to be health insurance type or status, followed by income level and geographic location.

Items that Impact Likelihood a Person Is Able to...



BASE: QUALIFIED RESPONDENTS (n=4012)

Q1n2020 Which of the following, if any, do you believe impacts the likelihood that a person is able to access the best possible cancer care? Please select all that apply.

Q2n2020 And, which of the following, if any, do you believe impacts the likelihood that a person will survive cancer? Please select all that apply.

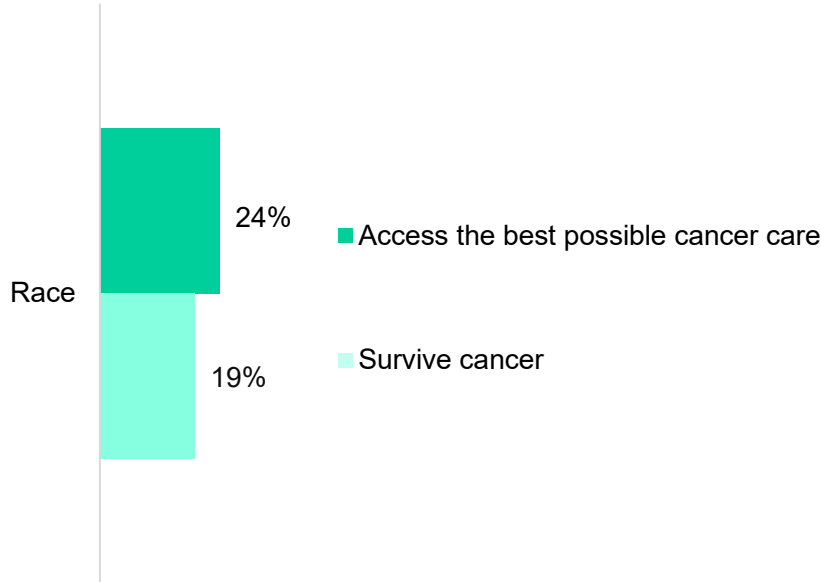


Black Adults More Likely Than Any Other Race to Say Race Impacts Access

Black adults are twice as likely as White and Asian adults to say race impacts access to the best possible cancer care. Black and Hispanic adults are more likely than White adults to say race impacts both access to the best possible cancer care as well as survival.

Among all respondents

Items that Impact Likelihood a Person Is Able to...



	White (A)	Black (B)	Hispanic (C)	Asian (D)	White Cancer Patients (E)	Black Cancer Patients (F)
Access the best possible cancer care	20%	41% ACD	28% AD	20%	19%	41% E
Survive cancer	16%	27% A	22% A	21%	20%	35% E

BASE: QUALIFIED RESPONDENTS (n=4012; WHITE (n=1999), BLACK (n=552), HISPANIC (n=982), ASIAN (n=327); WHITE PATIENTS (n=900), BLACK PATIENTS (n=125)

Q1n2020 Which of the following, if any, do you believe impacts the likelihood that a person is able to access the best possible cancer care? Please select all that apply.

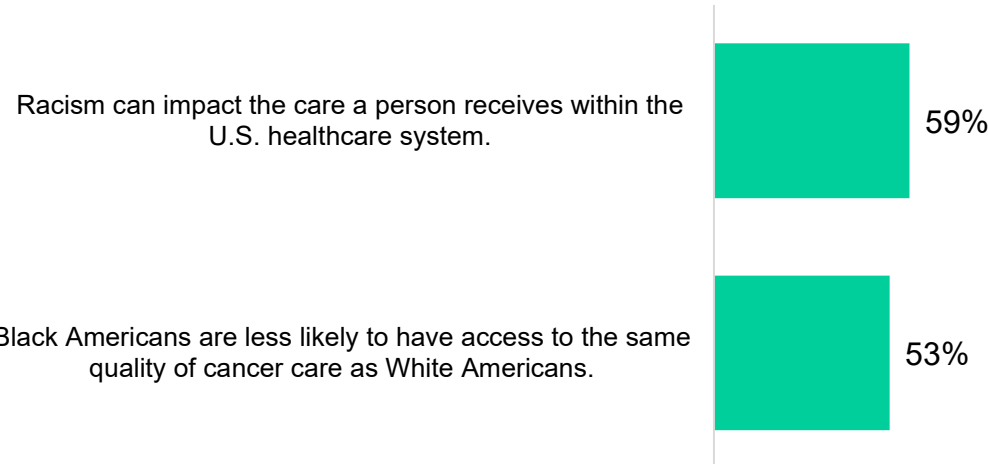
Q2n2020 And, which of the following, if any, do you believe impacts the likelihood that a person will survive cancer? Please select all that apply.



Three in Five Agree Racism Can Impact the Care a Person Receives within the U.S. Healthcare System

Non-White adults are also more likely to believe Black Americans are less likely to have access to the same quality of cancer care as White Americans.

Agreement with Statements About Access to Cancer Care (% Strongly/Somewhat agree)



	White (A)	Black (B)	Hispanic (C)	Asian (D)
Racism can impact the care a person receives within the U.S. healthcare system.	53%	76% AD	70% A	66% A
Black Americans are less likely to have access to the same quality of cancer care as White Americans.	47%	71% ACD	60% A	60% A

Black cancer patients are more likely than White cancer patients to agree with these statements

BASE: QUALIFIED RESPONDENTS (n=4012; WHITE (n=1999), BLACK (n=552), HISPANIC (n=982), ASIAN (n=327)
Q3n2020 To what extent do you agree or disagree with the following statements?

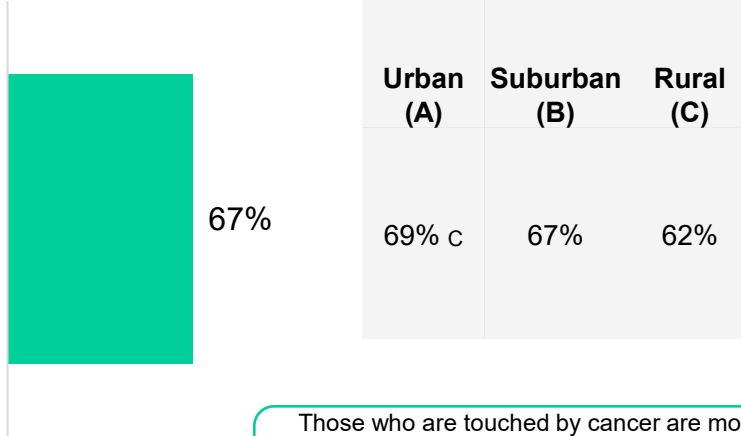


Two-Thirds Believe People in Rural Areas Are Less Likely to Have Access to Same Quality Care as Those in Urban or Suburban Areas

Those in urban areas more likely than those in rural areas to agree. Those touched by cancer are more likely than those with no cancer experience to agree there are geographical inequities.

Agreement with Statements About Access to Cancer Care (% Strongly/Somewhat agree)

Someone living in a rural area is less likely to have access to the same quality of cancer care as someone living in an urban or suburban area.

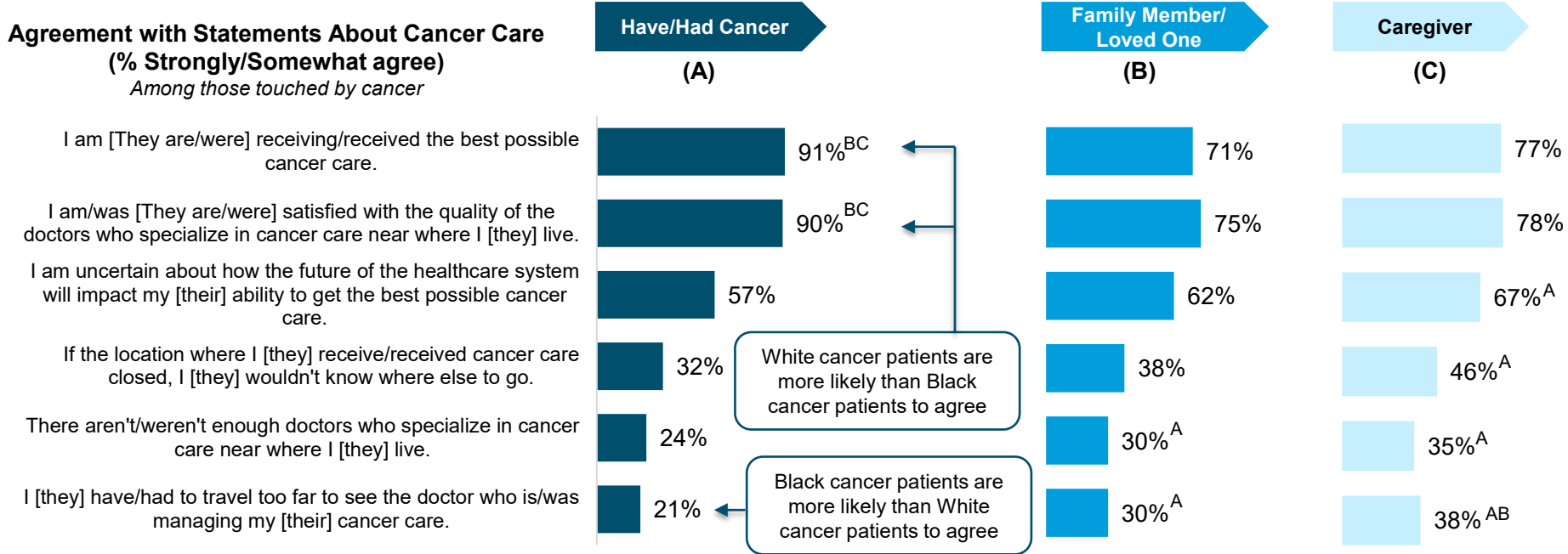


Those who are touched by cancer are more likely than those with no cancer experience to agree (70% patients, 72% family member/loved one, 71% caregiver vs. 64% no experience)



Those with Cancer Hold More Positive Attitudes Towards Care Received

Family members/loved ones and caregivers are less likely to say their loved one is receiving the best possible care and that they are satisfied with the doctors near where they live



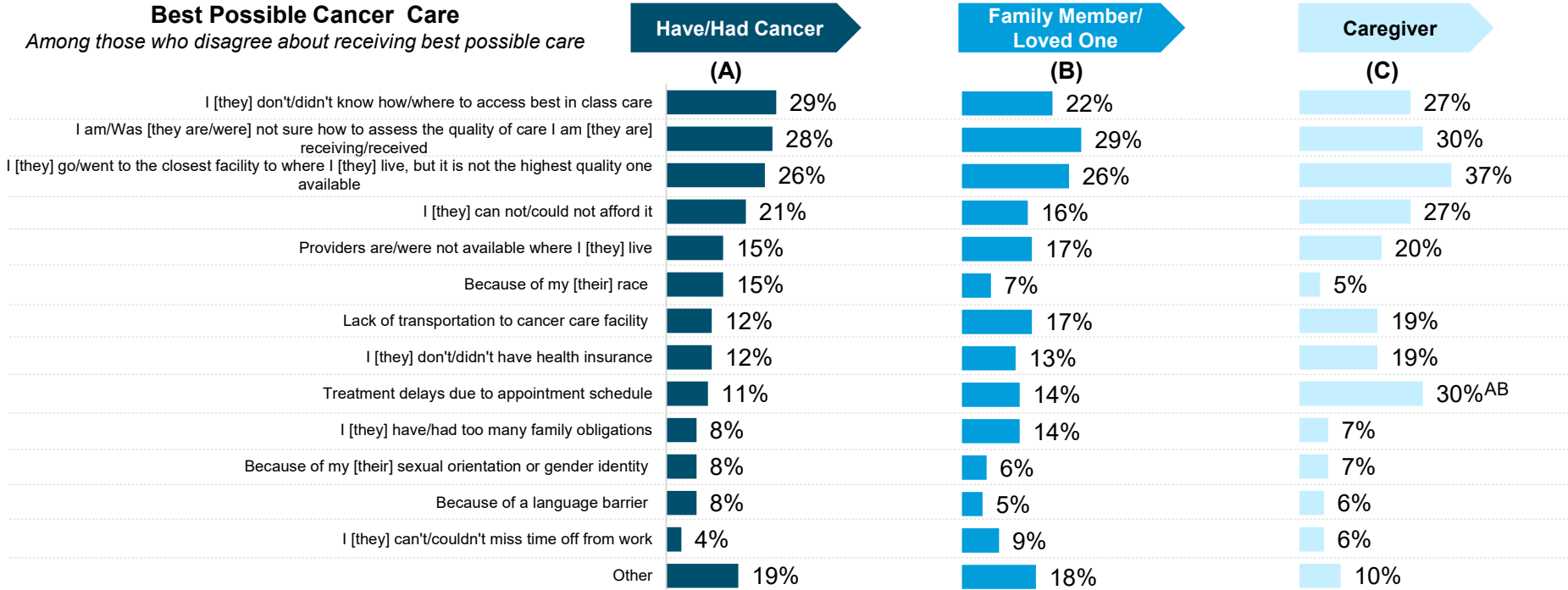


Lack of Perceived Quality Stems from Uncertainty of How to Access, Assess Care

Nearly 1 in 6 who have/had cancer that don't believe they receive(d) the best possible care say it is because of their race

Reasons for Felt Did Not Receive Best Possible Cancer Care

Among those who disagree about receiving best possible care

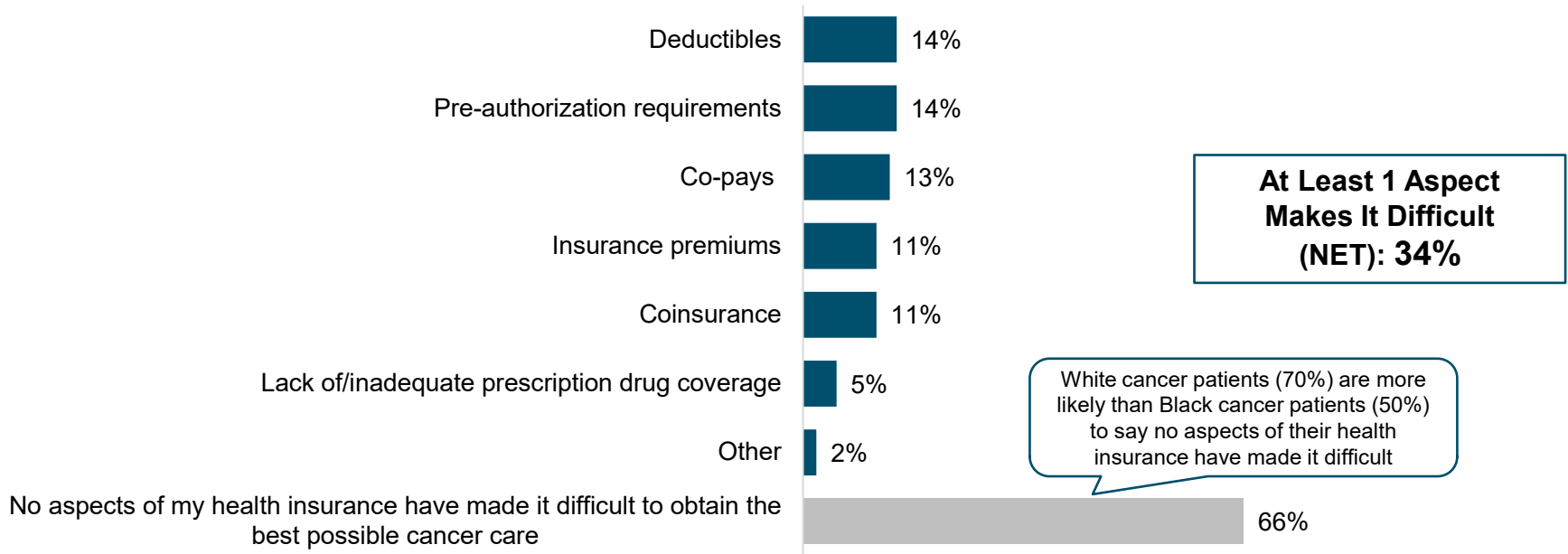




One-Third Say Insurance Makes it Difficult to Obtain Best Care

Deductibles, pre-authorization requirements, and copays are the most common aspects of health insurance coverage that made it difficult for those who have/had cancer to obtain the best possible care

Aspects of Health Insurance that Make It Difficult to Obtain Best Possible Care
Among those who have/had cancer and have health insurance





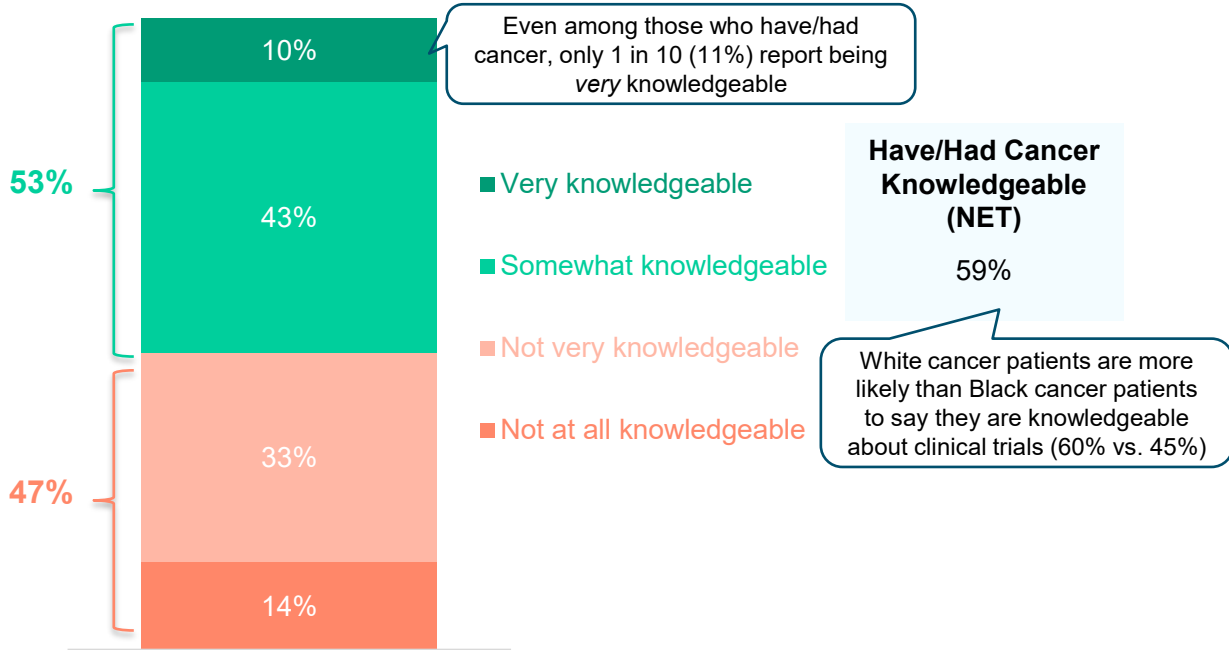
Clinical Trial Myths



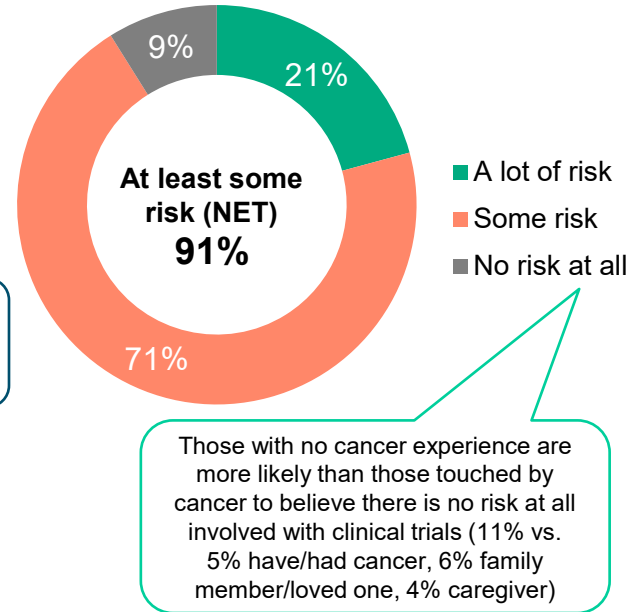
Only About Half of Adults Say They Are Knowledgeable About Clinical Trials

Few feel very knowledgeable - even those who have/had cancer. 7 in 10 perceive there is some risk involved with clinical trials, with 1 in 5 believing there is a lot of risk

Knowledge of Clinical Trials



Perception of Risk Involved with Clinical Trials

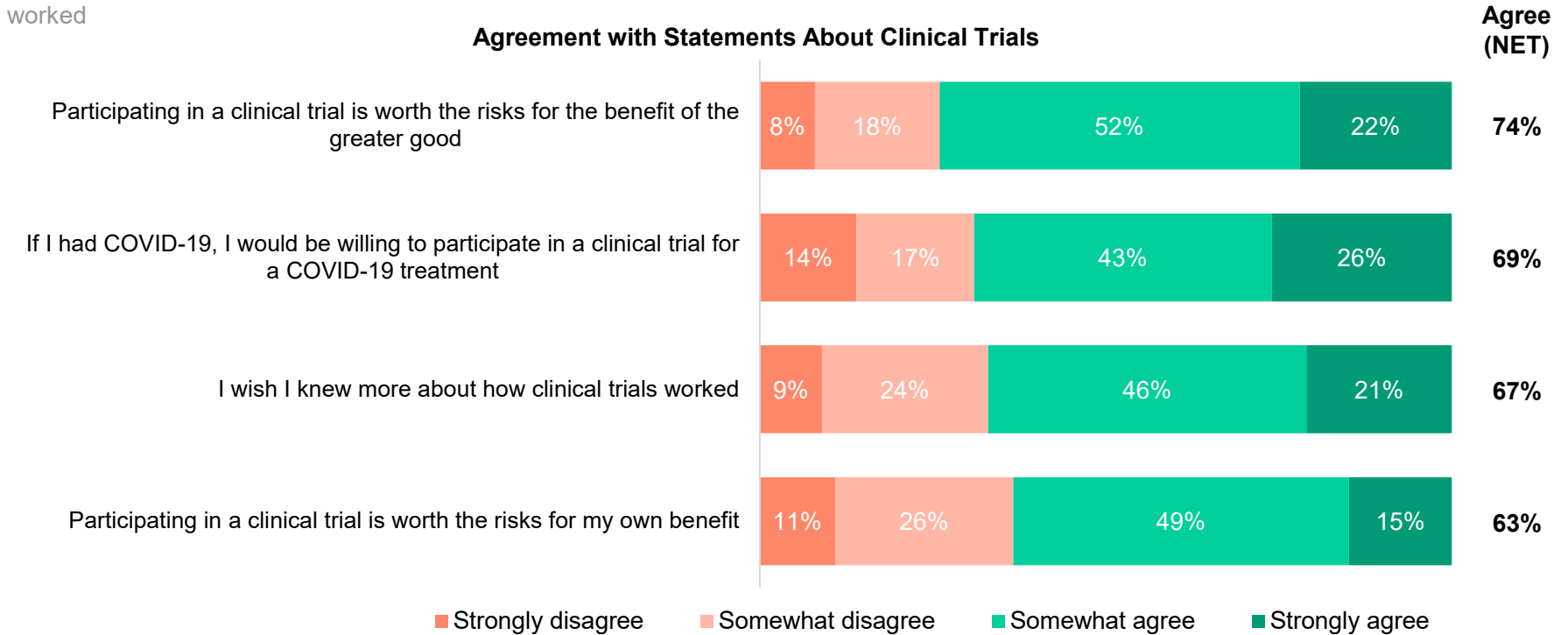




Three-Quarters Agree Participating in a Clinical Trial is Worth the Risks for Benefit of Greater Good

Fewer, though still a majority, agree the risks are worth it for their own benefit and two-thirds wish they knew more about how clinical trials worked

Agreement with Statements About Clinical Trials



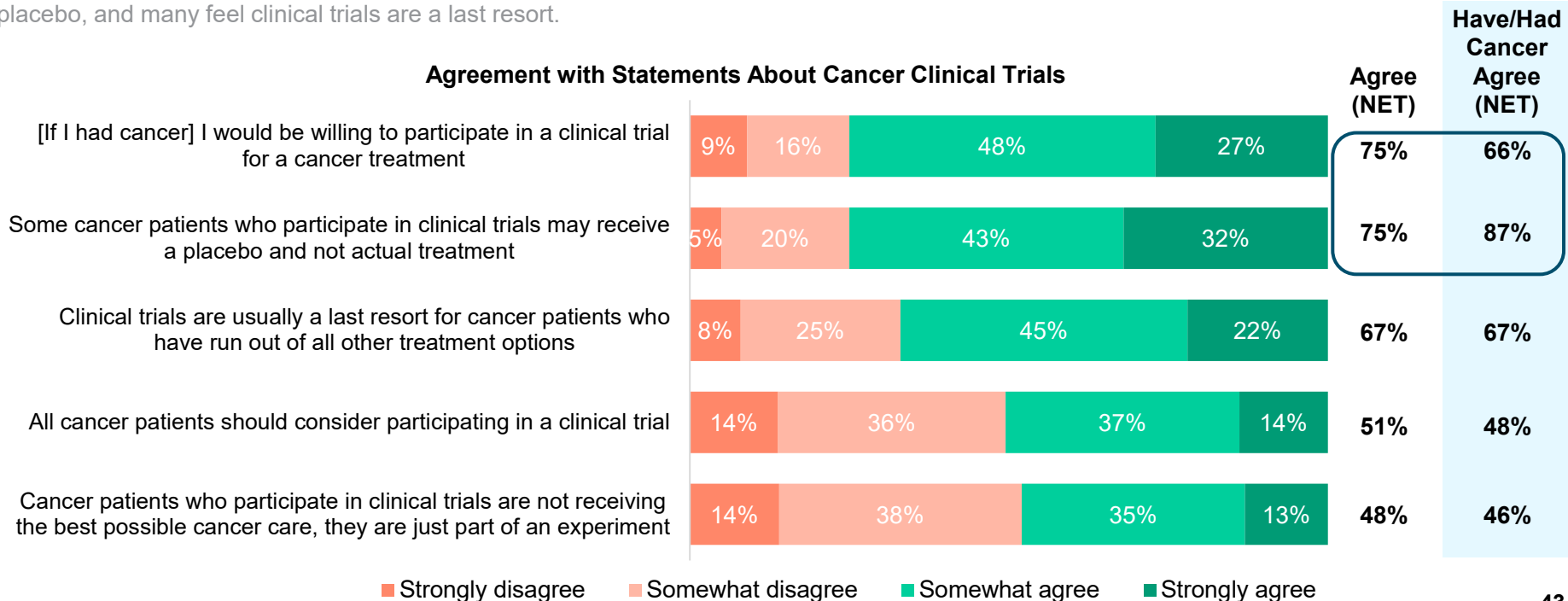
■ Strongly disagree
 ■ Somewhat disagree
 ■ Somewhat agree
 ■ Strongly agree



Despite Majority Reporting They Would Be Willing to Participate in Cancer Clinical Trial, Many Hold Inaccurate Beliefs About Them

Three-quarters of U.S. adults would be willing to participate in a cancer clinical trial, despite a similar proportion saying some patients receive a placebo and half saying cancer clinical trial participants are just part of an experiment and are not receiving the best possible care. Only two-thirds of those who have/had cancer would be willing to participate, perhaps because nearly 9 in 10 believe that they might receive a placebo, and many feel clinical trials are a last resort.

Agreement with Statements About Cancer Clinical Trials



■ Strongly disagree
 ■ Somewhat disagree
 ■ Somewhat agree
 ■ Strongly agree



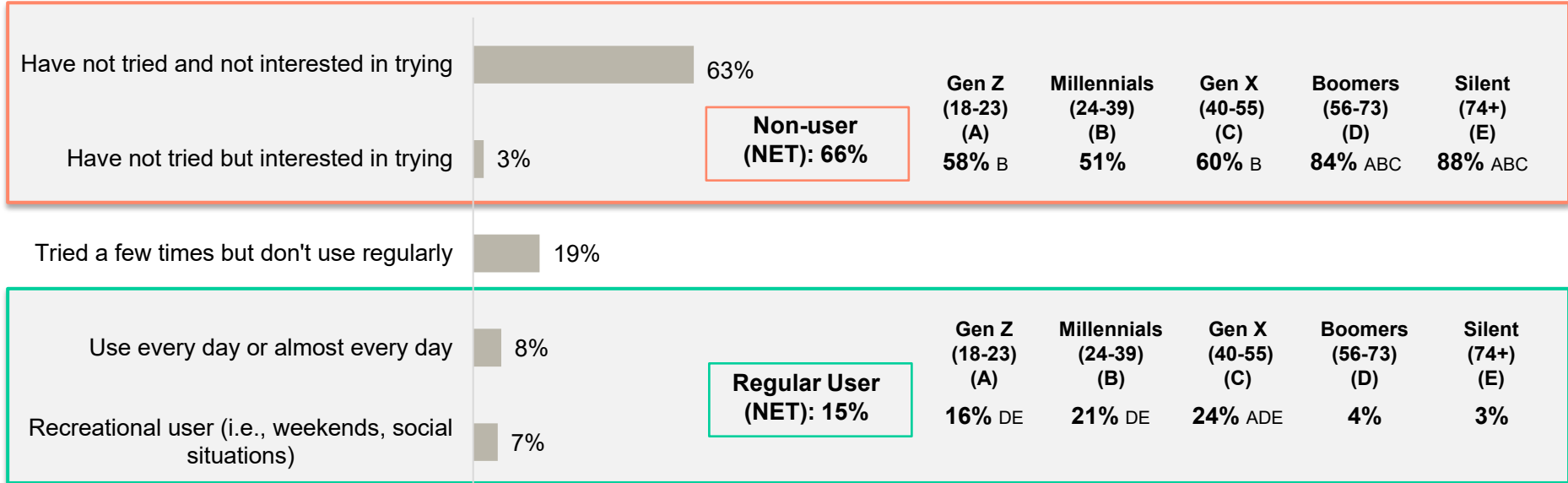
E-Cigarette Use & Perceptions



Nearly 1 in 6 Adults Report Regularly Using E-Cigarettes

Use is highest among Gen X – with 1 in 4 saying they are a regular user

Self-Reported E-Cigarette Use





Reported Daily Use, Trial of E-Cigarettes Have Increased Since 2019

Increase in trial driven Millennials, Boomers, and Older adults, while increase in daily use driven by Gen X

Trended Self-Reported E-Cigarette Use

	2019 (C)	2020 (D)
DAILY OR RECREATIONAL USER (NET)	13%	15%^c
I use them every day or almost every day.	6%	8% ^c
I am a recreational user (i.e., use them in social situations, on weekends, etc.).	7%	7%
I have tried them a few times but do not use them regularly.	15%	19% ^c
NEVER TRIED (NET)	73%^D	66%
I have not tried them, but I am interested in trying them.	4%	3%
I have not tried them, and I am not interested in trying them.	69% ^D	63%

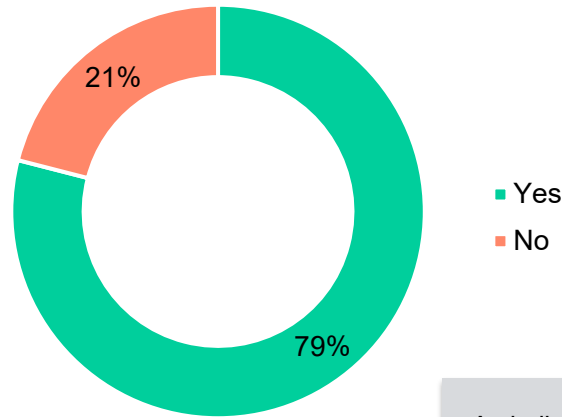
Gen X (7% 2019 vs. 15% 2020)

Millennials (19% 2019 vs. 28% 2020)
 Boomers (9% 2019 vs. 12% 2020)
 Older (2% 2019 vs. 9% 2020)



Majority of Parents of 9-17 Year Old's Say They Have Talked to Them About the Dangers of E-Cigarettes

Ever Talked to Child(ren) 9-17 About E-Cigarettes
Among parents of pre-teen/teens



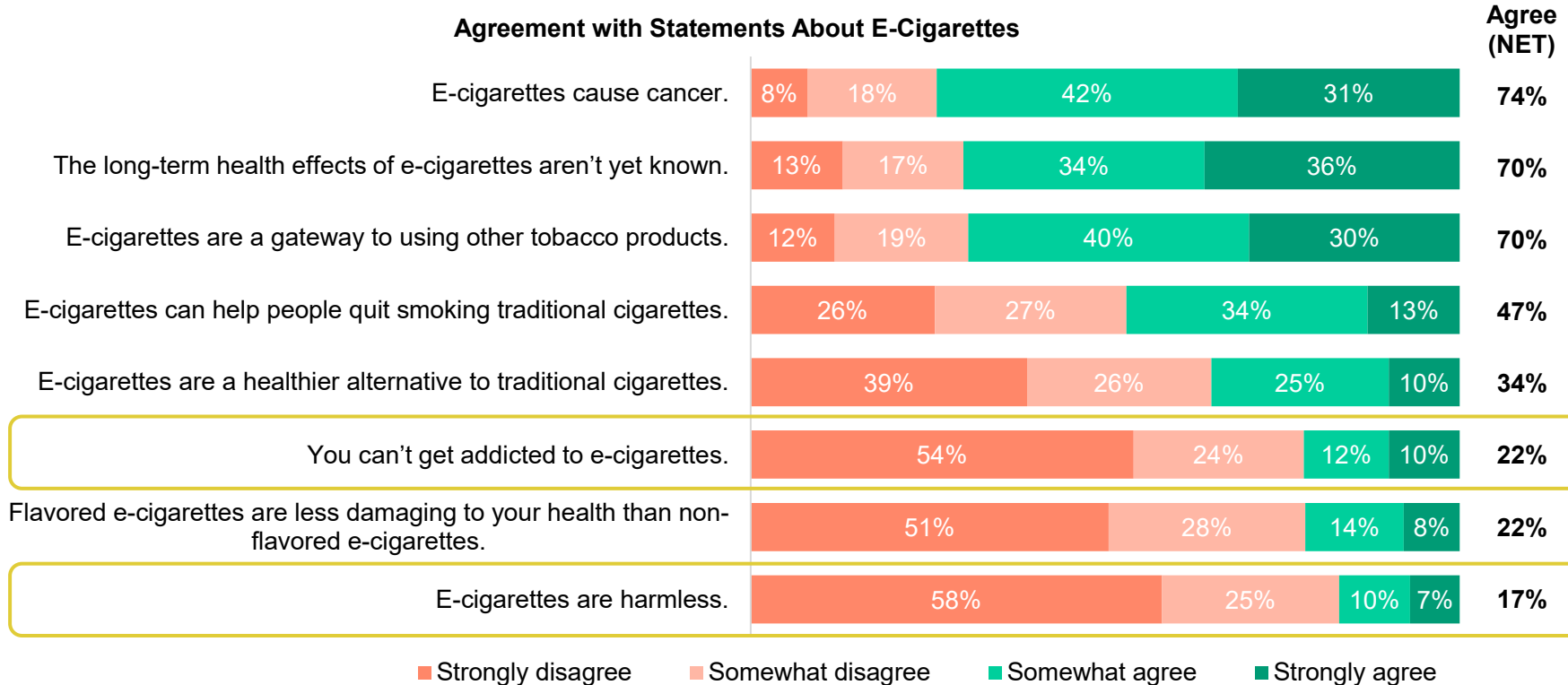
A similar proportion of parents said the same last year (73%).



Three-Quarters of Adults Agree that E-Cigarettes Cause Cancer

Still, around 1 in 5 believe you can't get addicted to e-cigarettes and that they're harmless

Agreement with Statements About E-Cigarettes





Decline in Agreement That Long-Term Health Effects of E-Cigarettes Aren't Known Yet, That They Can Help with Quitting Traditional Cigarettes, and That They Are a Healthier Alternative

Trended Agreement with Statements About E-Cigarettes
(% Strongly/Somewhat Agree)

	2019 (C)	2020 (D)
E-cigarettes cause cancer.	71%	74%
The long-term health effects of e-cigarettes aren't yet known.	76% D	70%
E-cigarettes are a gateway to using other tobacco products.	67%	70%
E-cigarettes can help people quit smoking traditional cigarettes.	54% D	47%
E-cigarettes are a healthier alternative to traditional cigarettes.	39% D	34%
You can't get addicted to e-cigarettes.	20%	22%
Flavored e-cigarettes are less damaging to your health than non-flavored e-cigarettes.	21%	22%
E-cigarettes are harmless.	16%	17%



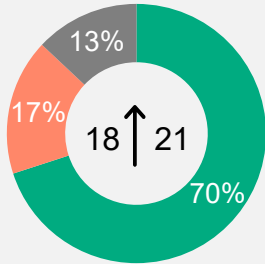
Majority Support FDA Regulating E-Cigarettes and Raising Legal Purchase Age

However, only around half support outright bans of e-cigarettes

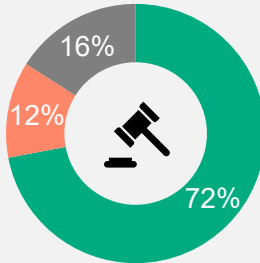
Support/Opposition for Potential Legislation

Regulation

Raising the legal age for purchasing e-cigarettes from 18 to 21 years of age

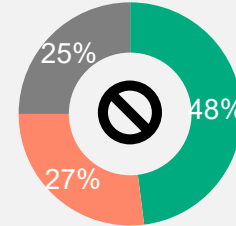


The FDA regulating e-cigarettes (i.e., evaluating the products' health and safety, enforcing standards, etc.)

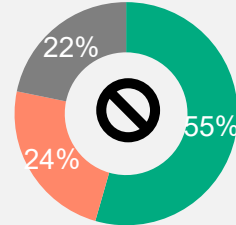


Banning

Banning the sale of:



E-cigarettes



Flavored e-cigarettes



Increase in Support for Banning the Sale of Flavored and Regular E-Cigarettes

Trended Support for Potential Legislation (% Support)

	2019 (C)	2020 (D)
The Food and Drug Administration (FDA) regulating e-cigarettes (i.e., evaluating the products' health and safety, enforcing standards, etc.)	71%	72%
Raising the legal age for purchasing e-cigarettes from 18 to 21 years of age	68%	70%
Banning sale of <u>flavored</u> e-cigarettes	46%	55% c
Banning sale of e-cigarettes	41%	48% c



Affordability of Cancer Care

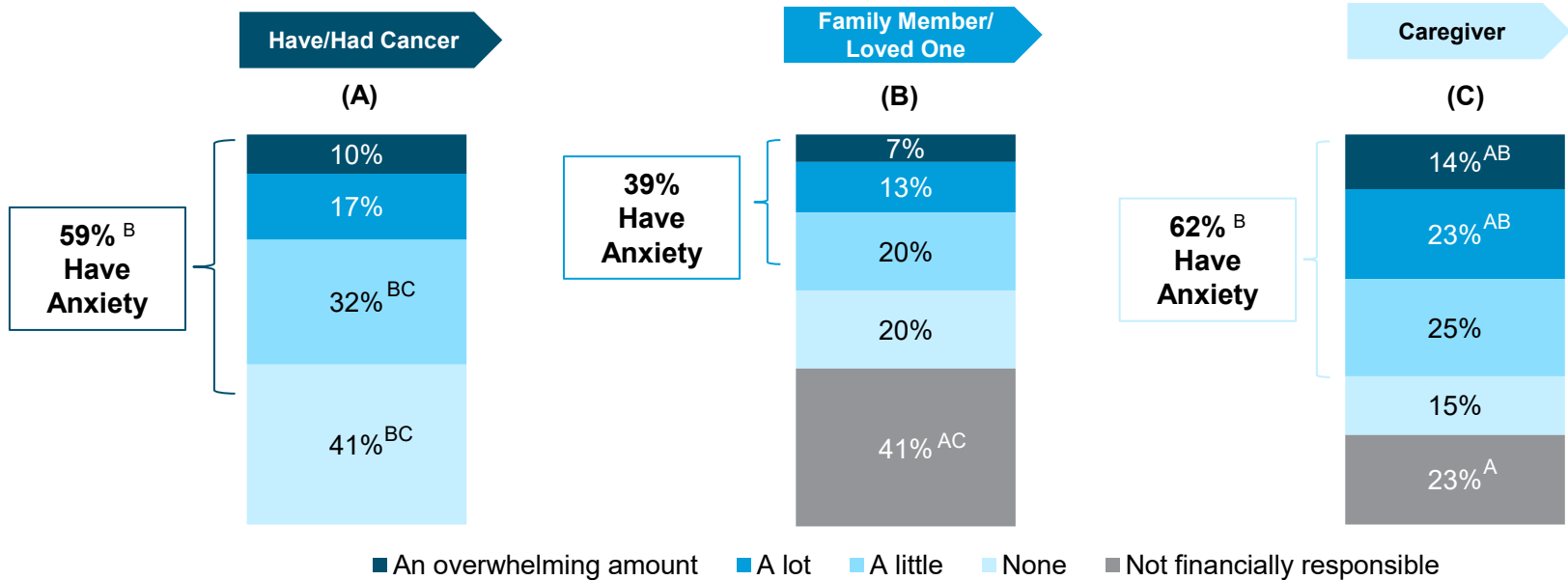


Finances Cause Anxiety for Majority of Those Who Have/Had Cancer, Caregivers

Even nearly 4 in 10 family members/loved ones feel the anxiety of financial burdens from a cancer diagnosis

Amount of Anxiety Felt Regarding Financial Situation as a Result of Cancer Diagnosis

Among those touched by cancer

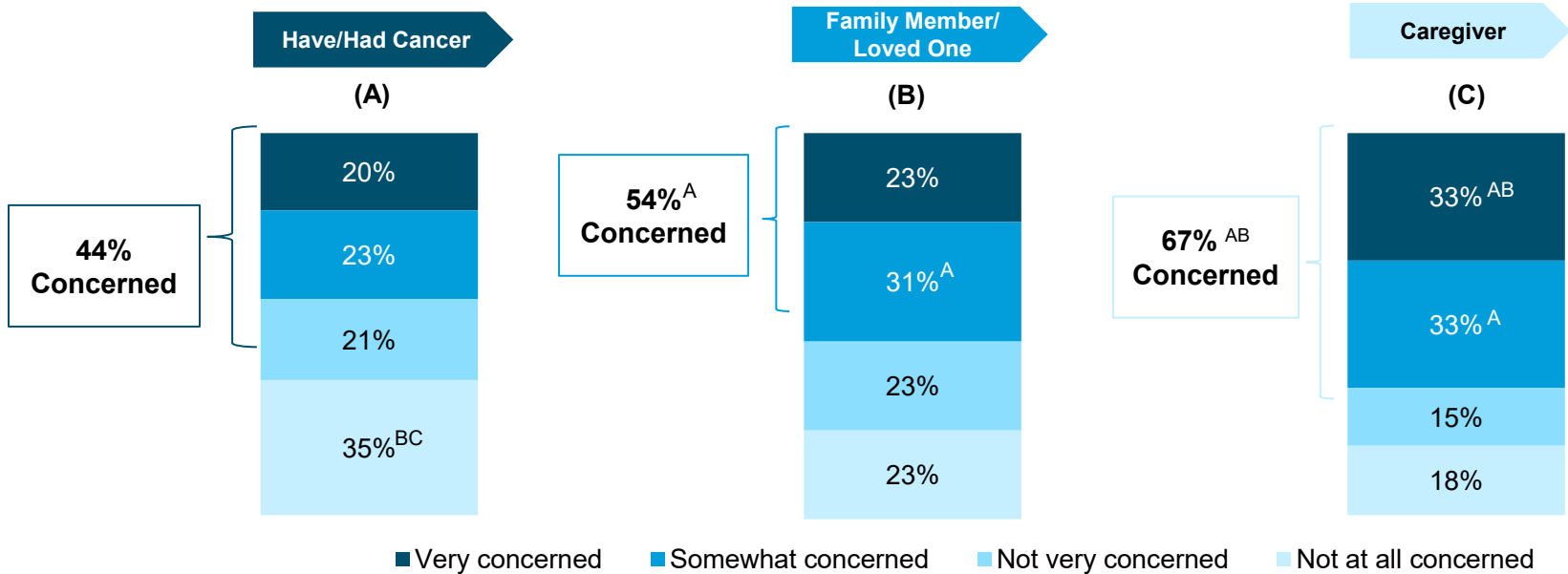




Caregivers Most Concerned About Cancer Treatment Affordability

Two-thirds of caregivers who have financial responsibility for their loved one's treatment are concerned about affordability compared to around half of those who have/had cancer and family members/loved ones who have financial responsibility

Concern About Treatment Affordability
Among those responsible for paying for treatment





Around 2 in 5 Caregivers Report Actions to Reduce Treatment Costs

The most common action taken according to caregivers is skipping or postponing doctors' appointments

Actions Taken to Reduce Treatment Costs

Among those touched by cancer

Have/Had Cancer

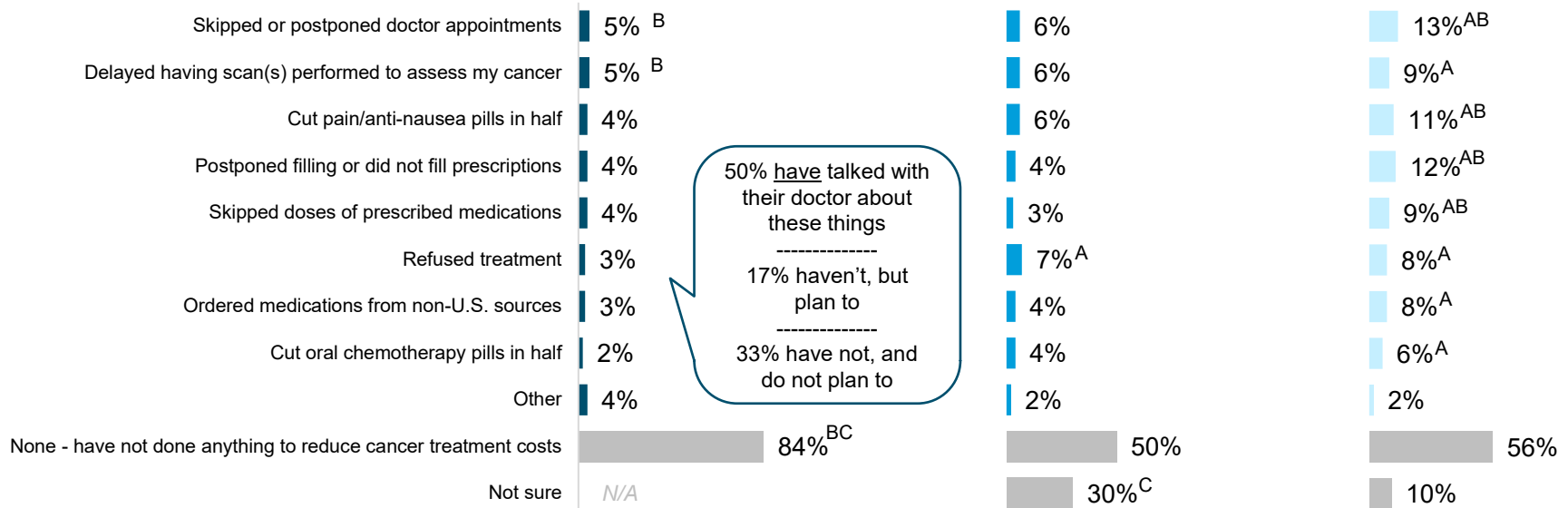
Family Member/
Loved One

Caregiver

(A)

(B)

(C)



50% have talked with their doctor about these things

 17% haven't, but plan to

 33% have not, and do not plan to

Mean # of actions taken
Among those who took action

2.1

2.2

2.3

BASE: HAVE/HAD CANCER OR IMMEDIATE FAMILY MEMBERS HAVE HAD CANCER (HAVE/HAD CANCER (n=1142), FAMILY MEMBER/LOVED ONE (n=539), CAREGIVER (n=464))

Q935 Which of the following have you/they done to reduce cancer treatment costs? Please select all that apply.

BASE: HAVE/HAD CANCER AND HAVE DONE ANYTHING TO REDUCE CANCER TREATMENT COSTS (n=182)

Q45 Have you talked with your doctor about the things you have done to reduce your cancer treatment costs?

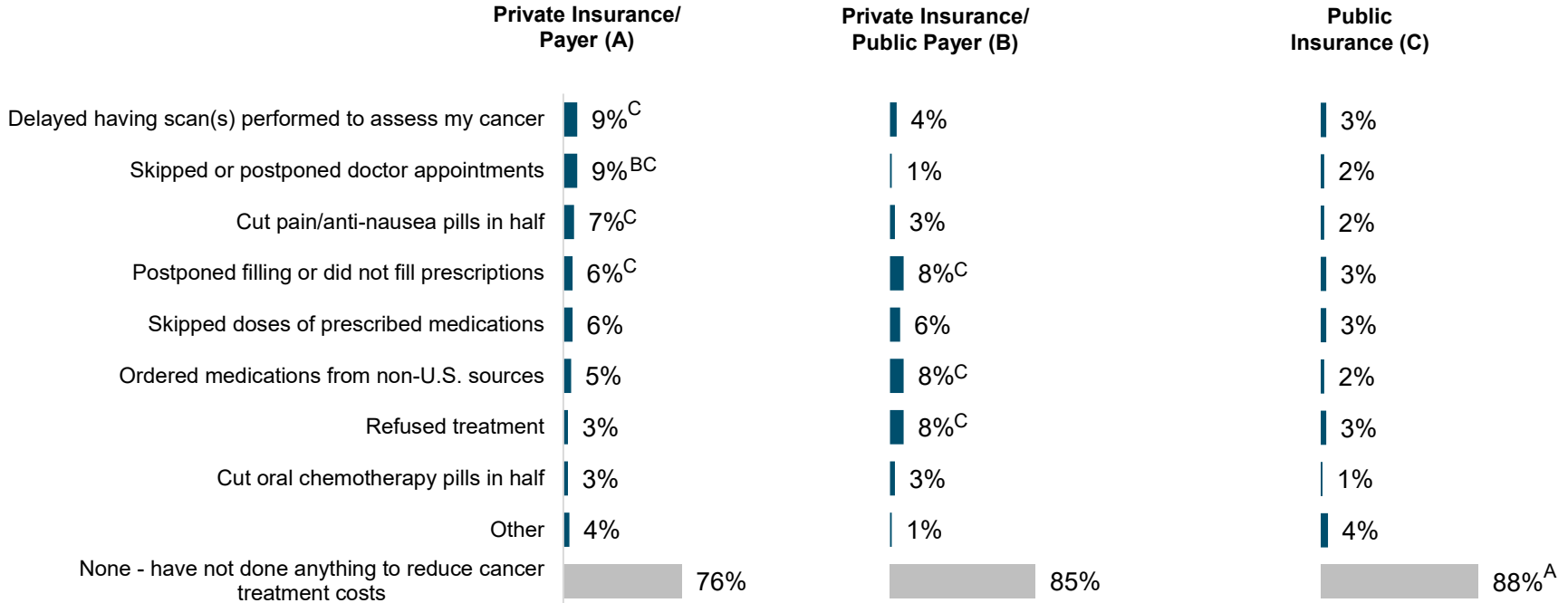


Privately Insured More Likely than Publicly Insured to Delay Scans or Skip Appts

Those with public insurance are more likely than the privately insured to not have done anything to reduce costs

Actions Taken to Reduce Treatment Costs

Among Have/Had Cancer By Insurance Type



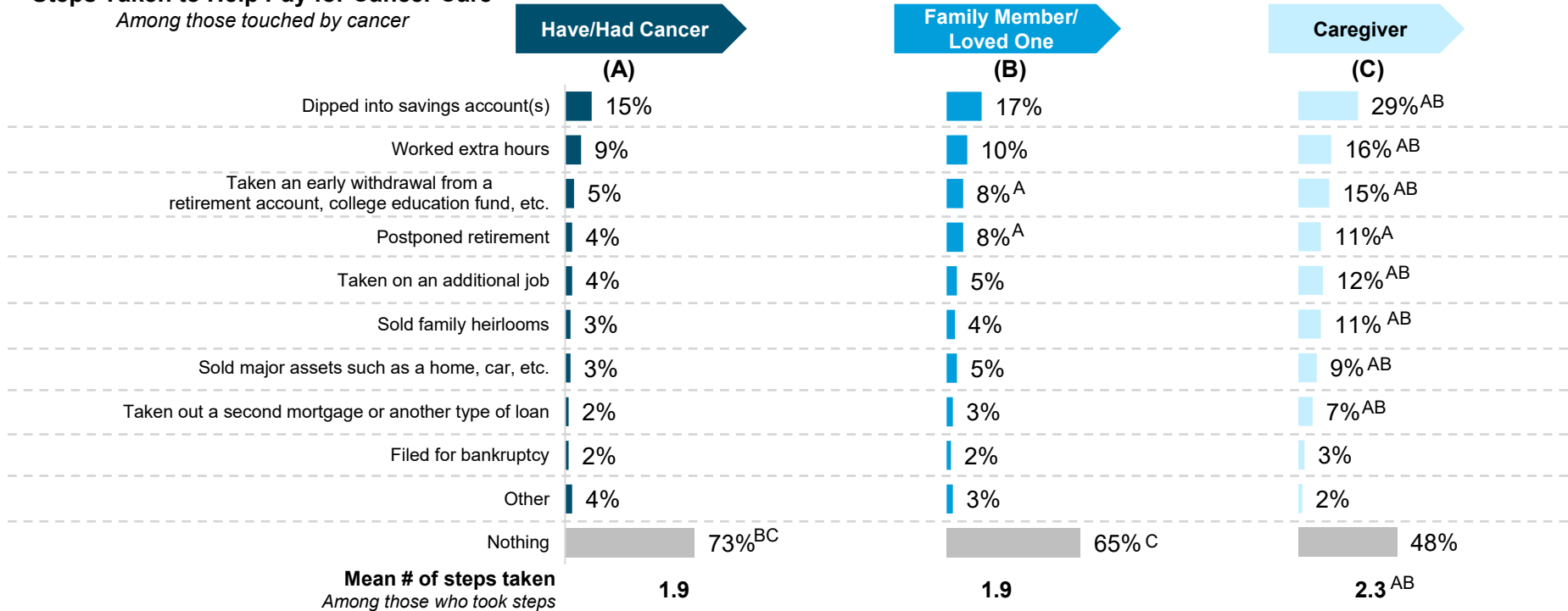


Caregivers Report Taking the Most Action to Help Pay for Cancer Care

Of those who have taken a step to help pay for care, those who have/had cancer and family members/loved ones report taking an average of about 2 steps

Steps Taken to Help Pay for Cancer Care

Among those touched by cancer



Among those who took steps

BASE: HAVE/HAD CANCER OR IMMEDIATE FAMILY MEMBERS HAVE HAD CANCER (HAVE/HAD CANCER (n=1142), FAMILY MEMBER/LOVED ONE (n=539), CAREGIVER (n=464))

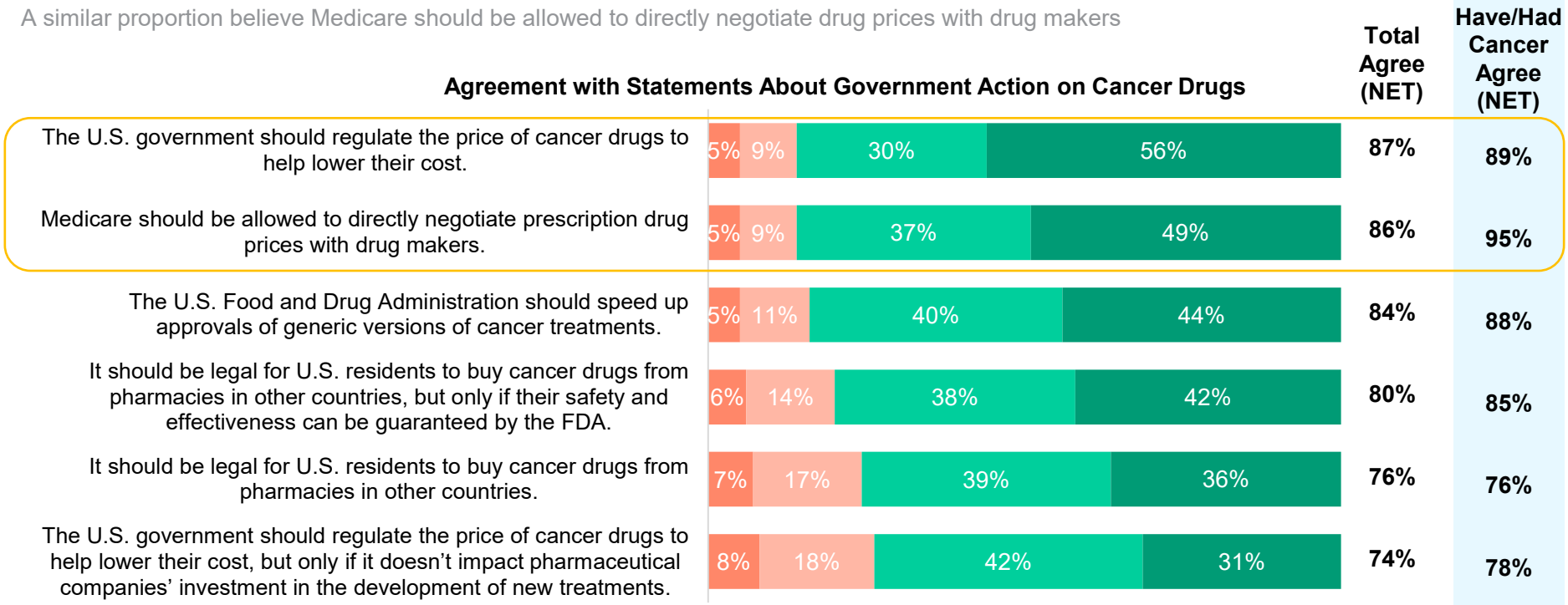
Q23 Which of the following, if any, have you or a/another loved one done to help pay for your/their cancer care?



Nearly 9 in 10 Say Gov't Should Regulate Price of Cancer Drugs to Lower Cost

A similar proportion believe Medicare should be allowed to directly negotiate drug prices with drug makers

Agreement with Statements About Government Action on Cancer Drugs



■ Strongly disagree
 ■ Somewhat disagree
 ■ Somewhat agree
 ■ Strongly agree

White patients more likely than Black patients to agree with all statements except the two related to government regulation of the price of cancer drugs

BASE: QUALIFIED RESPONDENTS (n=4012; HAVE/HAD CANCER (n=1142))

Q815 How much do you agree or disagree with the following statements regarding the U.S. government's action to make cancer drugs more affordable?

Q817 Now, please indicate how much you agree or disagree with these statements regarding the U.S. government's action to make cancer drugs more affordable.

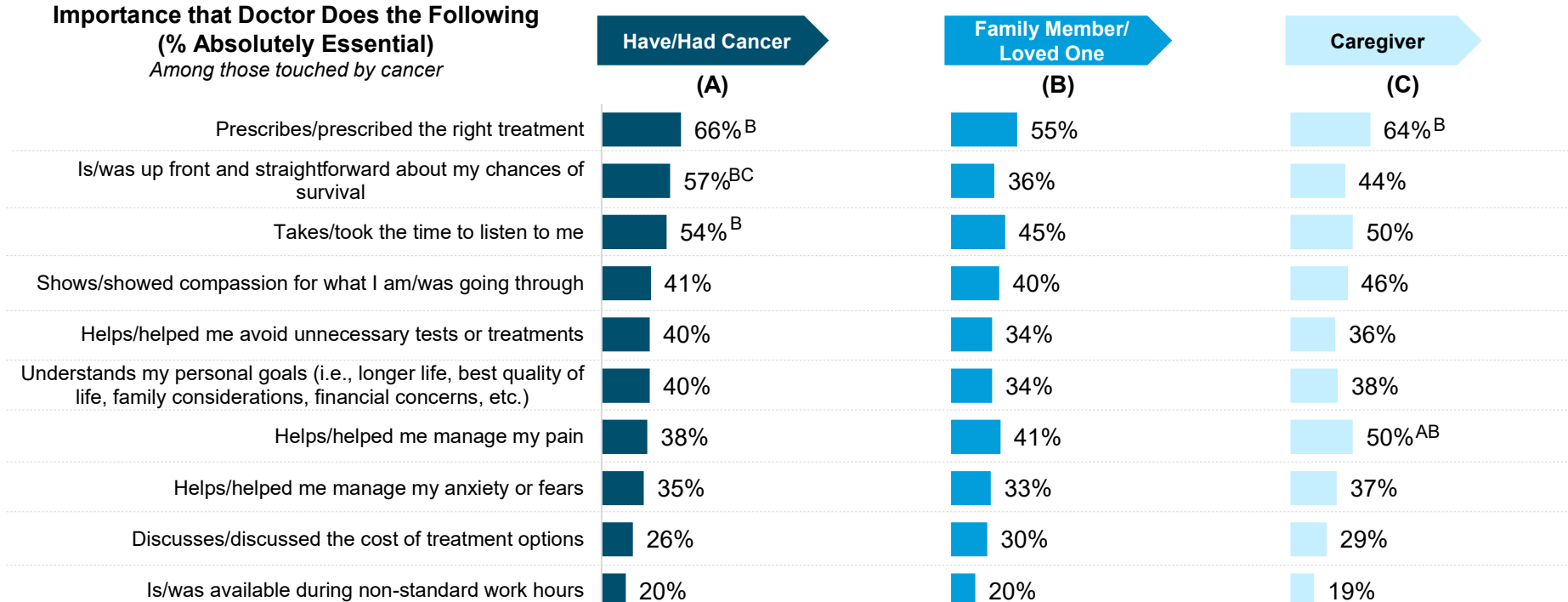


Cancer Management



Doctor Being Up Front About Survival Chances Second Only to Prescribing Right Treatment

Patients more likely to say being up front/straightforward about survival is essential. Caregivers more likely to say managing pain is essential



BASE: HAVE HAD CANCER (n=1142)

Q20 In regard to cancer care, how important is/was it to you that your doctor...

BASE: IMMEDIATE FAMILY MEMBERS HAVE/HAD CANCER (FAMILY MEMBER/LOVED ONE (n=539), CAREGIVER (n=464)

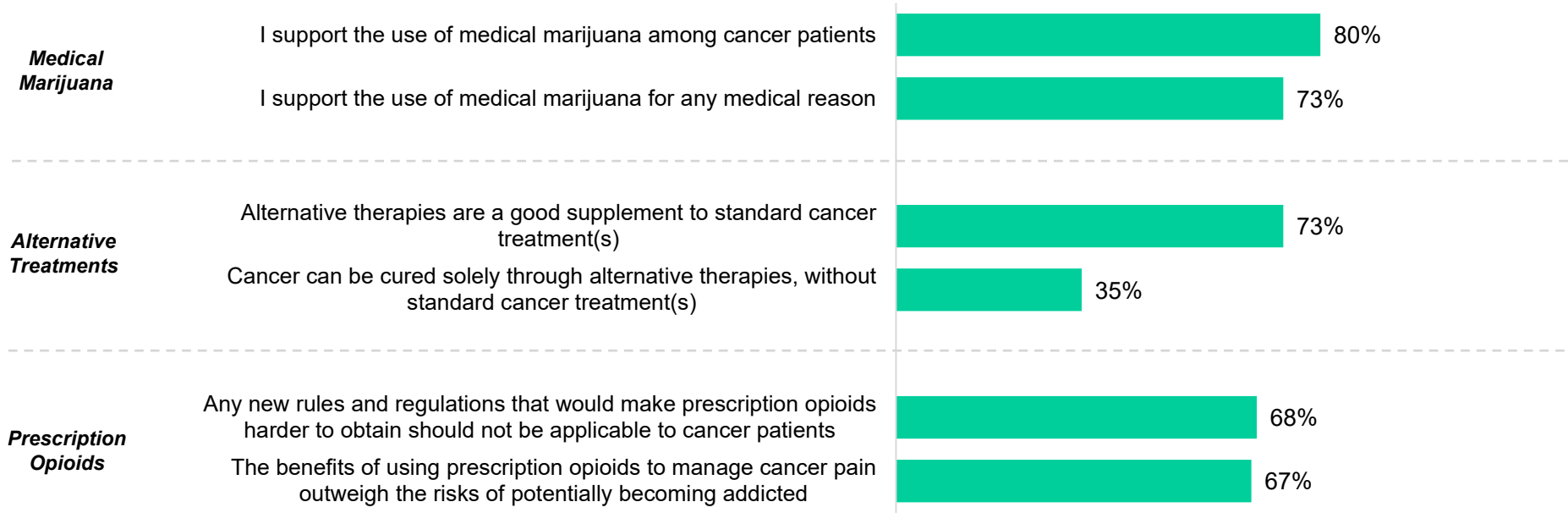
Q20B In regard to cancer care, how important is/was it that your immediately family member or loved one's/ the person you provide care for's doctor...



Majorities Support Medical Marijuana, Especially for Cancer

More than 1 in 3 Americans still believe cancer can be cured solely through alternative therapies

**Agreement with Statements About Cancer Care
(% Strongly/Somewhat agree)**





Fewer Adults Support the Use of Medical Marijuana for Cancer Patients

While still more than a third, compared to 2018 fewer believe cancer can be cured solely through alternative therapies

Trended Agreement with Statements About Cancer Care
(% Strongly/Somewhat Agree)

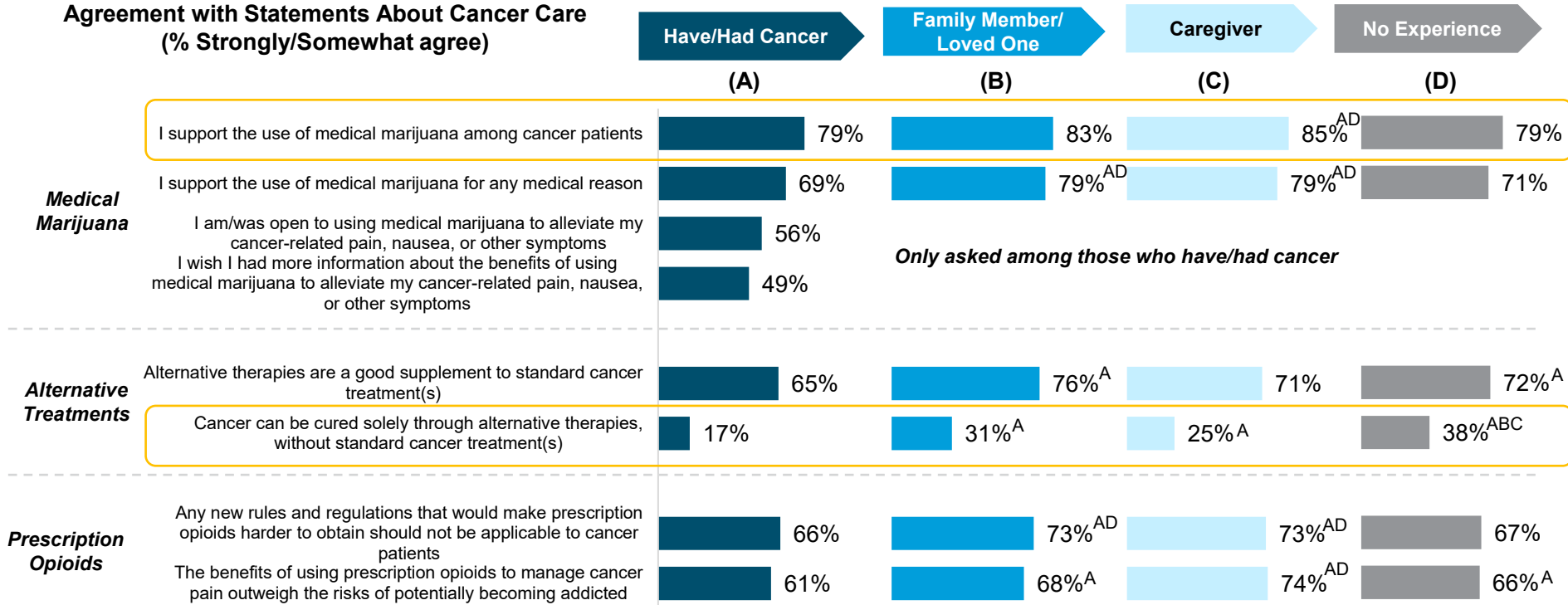
	2018 (B)	2019 (C)	2020 (D)
I support the use of medical marijuana among cancer patients.	83% D	84% D	80%
I support the use of medical marijuana for any medical reason.	76%	76%	73%
Alternative therapies are a good supplement to standard cancer treatment(s).	75%	73%	73%
Any new rules and regulations that would make prescription opioids harder to obtain should not be applicable to cancer patients.	73% D	70%	68%
The benefits of using prescription opioids to manage cancer pain outweigh the risks of potentially becoming addicted.	69%	66%	67%
Cancer can be cured solely through alternative therapies, without standard cancer treatment(s).	39% CD	34%	35%



Regardless of Experience, 8 in 10 Support Medical Marijuana for Cancer

Those with no cancer experience are most likely to believe cancer can be cured solely through alternative therapies without standard cancer treatments

Agreement with Statements About Cancer Care (% Strongly/Somewhat agree)





Fewer Patients Open to Medical Marijuana to Alleviate Cancer-Related Pain/Nausea/Symptoms, Wish They Had More Information on the Benefits of Medical Marijuana

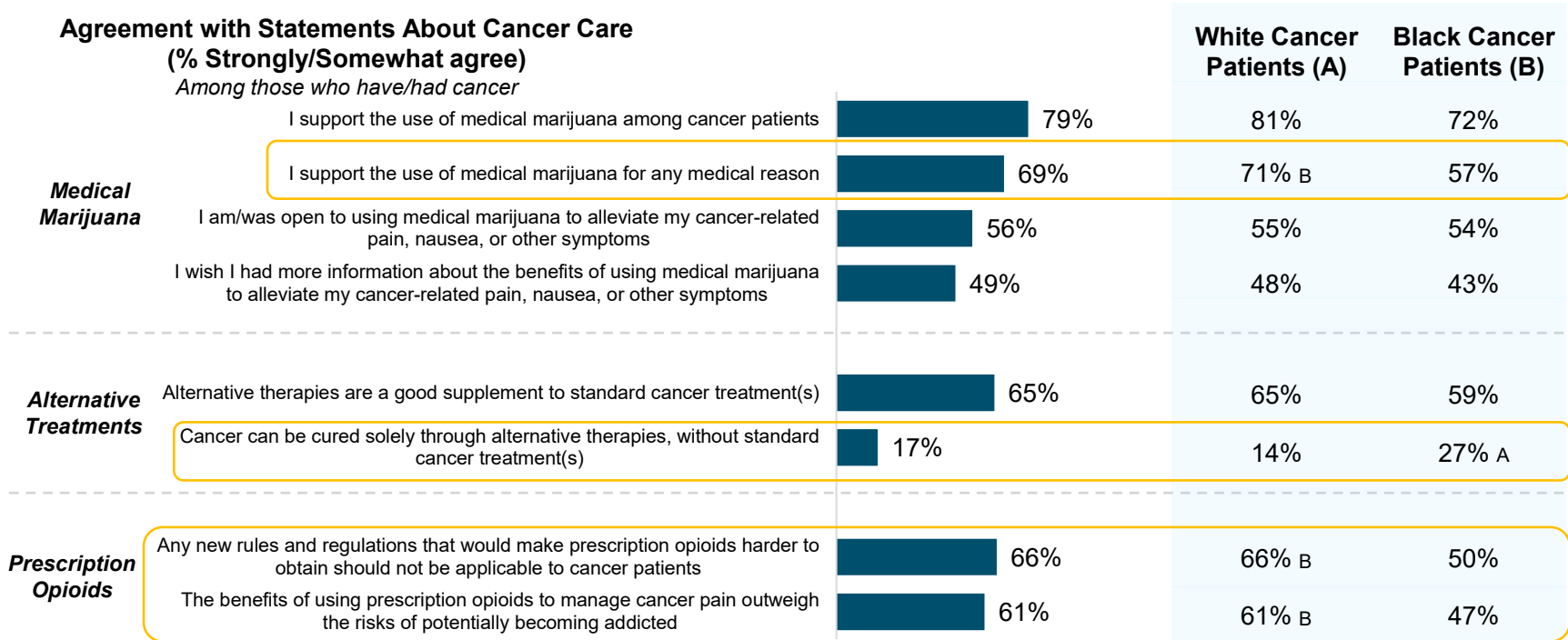
Trended Agreement with Statements About Cancer Care
 (% Strongly/Somewhat Agree)
Among those who have/had cancer

	2018 (B)	2019 (C)	2020 (D)
I am/was open to using medical marijuana to alleviate my cancer-related pain, nausea, or other symptoms.	62% D	62% D	56%
I wish I had more information about the benefits of using medical marijuana to alleviate my cancer-related pain, nausea, or other symptoms.	58% D	60% D	49%



Black Cancer Patients More Likely Than White Patients To Believe Cancer Can Be Cured Solely Through Alternative Therapies

White Cancer patients more likely than Black patients to support use of medical marijuana for any reason, and to agree with statements related to prescription opioid access and use

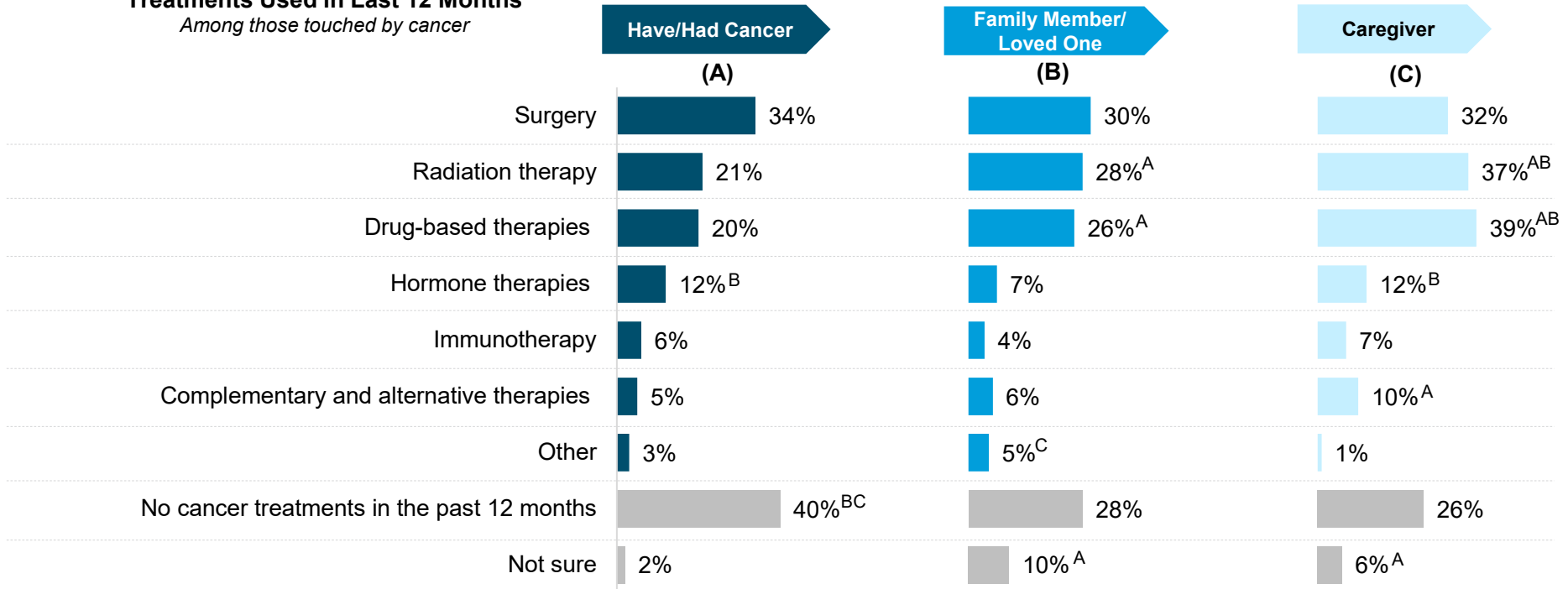




Surgery, Radiation, Drug-based Therapies Are Most Common Treatments

Caregivers and family members/loved ones are more likely to say their loved ones used these therapies in the last 12 months, compared to those who have/had cancer themselves

Treatments Used in Last 12 Months
Among those touched by cancer



BASE: HAVE/HAD CANCER OR IMMEDIATE FAMILY MEMBERS HAVE HAD CANCER (HAVE/HAD CANCER (n=1142), FAMILY MEMBER/LOVED ONE (n=539), CAREGIVER (n=464)

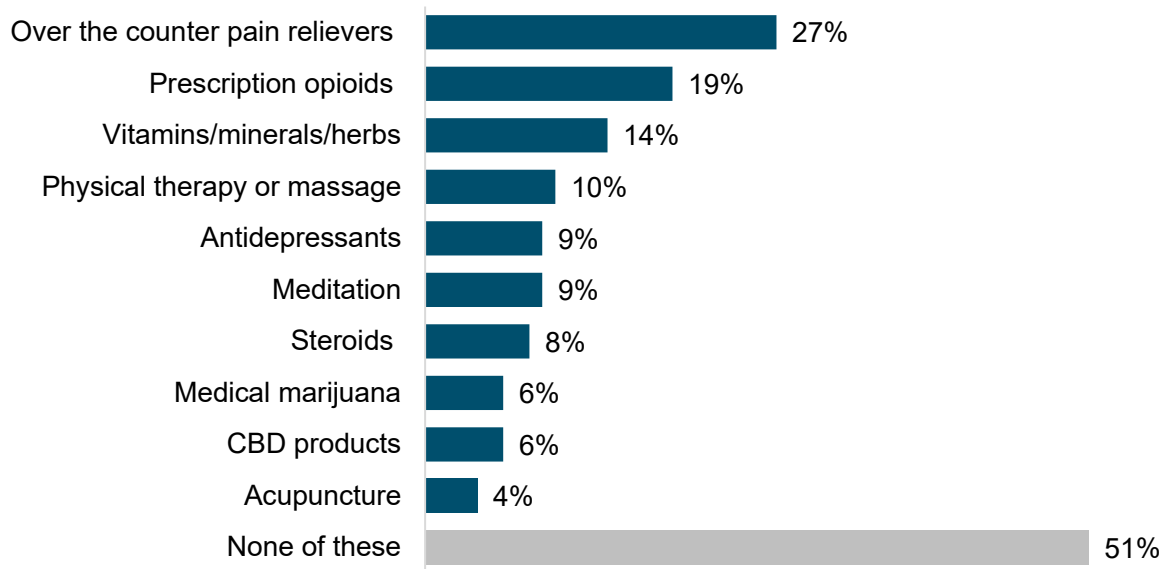
Q14 Which of the following therapies, if any, have you/they used to treat (i.e., attempt to cure) your/their cancer in the past 12 months? Please select all that apply.



Just Over One-Quarter Who Have/Had Cancer Discussed OTC Pain Relievers with Doctor

1 in 5 discussed prescription opioids and less than 1 in 10 discussed medical marijuana or CBD products

Topics Ever Discussed with Doctor About Symptom Management
Among those who have/had cancer



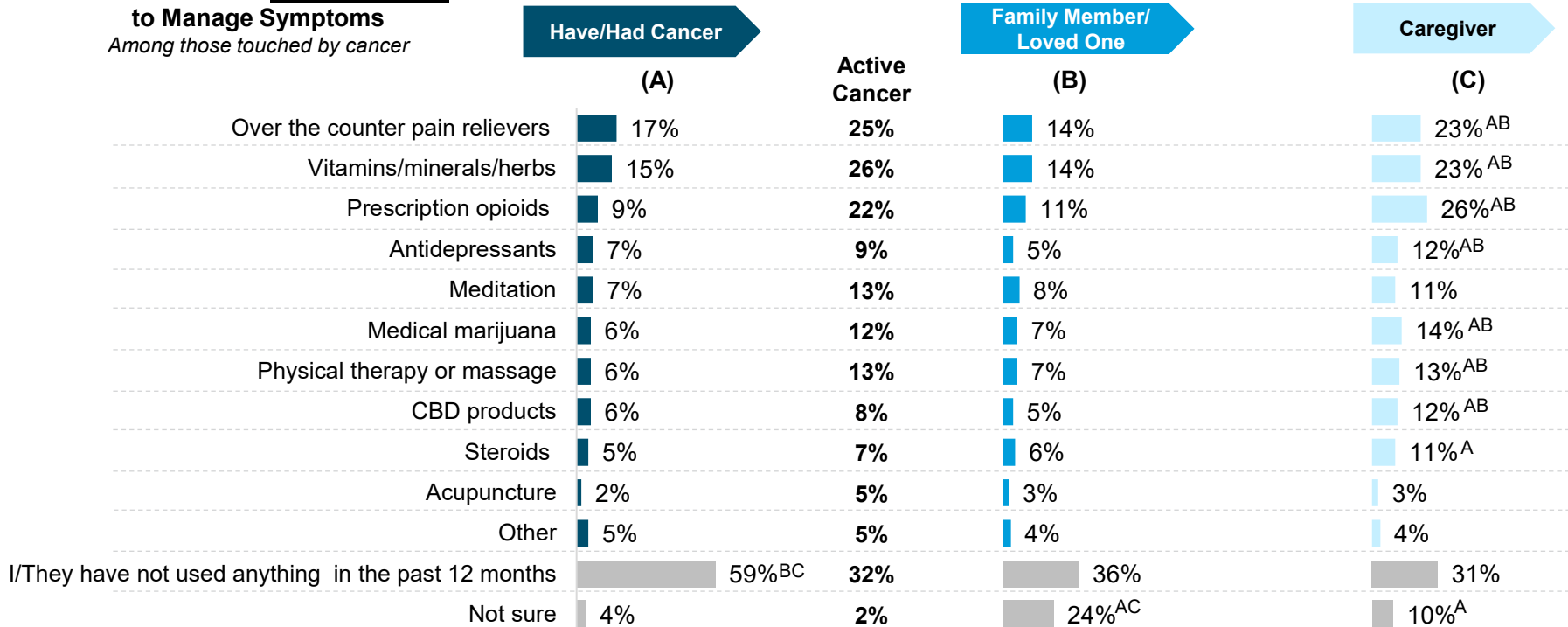


Caregivers Most Likely to Report Loved Ones Using Pain Management in Past Year

Caregivers nearly twice as likely as those who have/had cancer and family member/loved ones to say the person they care for used CBD products in the past year to manage cancer symptoms

Methods Used in Last 12 Months to Manage Symptoms

Among those touched by cancer



BASE: HAVE/HAD CANCER OR IMMEDIATE FAMILY MEMBERS HAVE HAD CANCER (HAVE/HAD CANCER (n=1142), ACTIVE CANCER (n=148), FAMILY MEMBER/LOVED ONE (n=539), CAREGIVER (n=464))

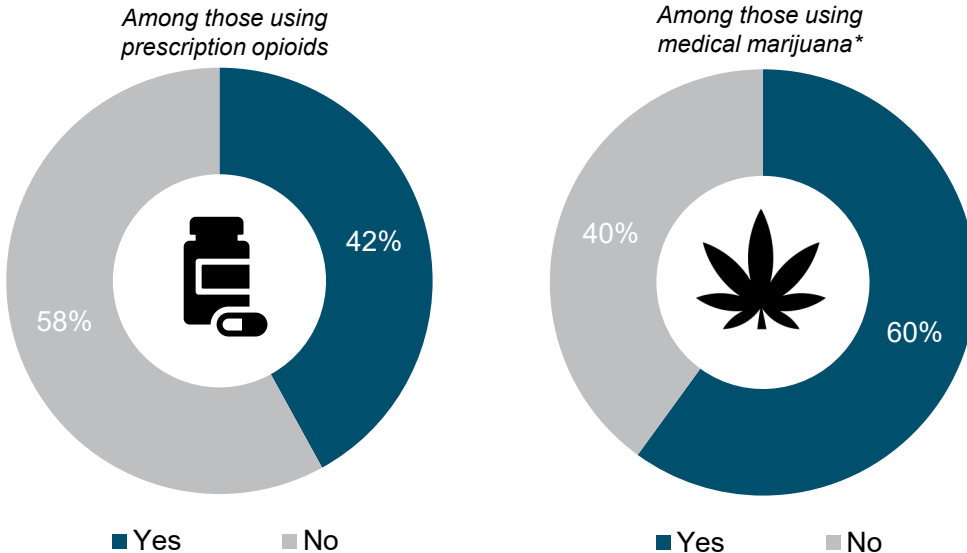
Q2 Which of the following methods, if any, have you/they used in the past 12 months to help manage your/their cancer-related pain, nausea, or other symptoms?



Majority Say Marijuana Manages Symptoms Well, But Many Have Difficulty Accessing*

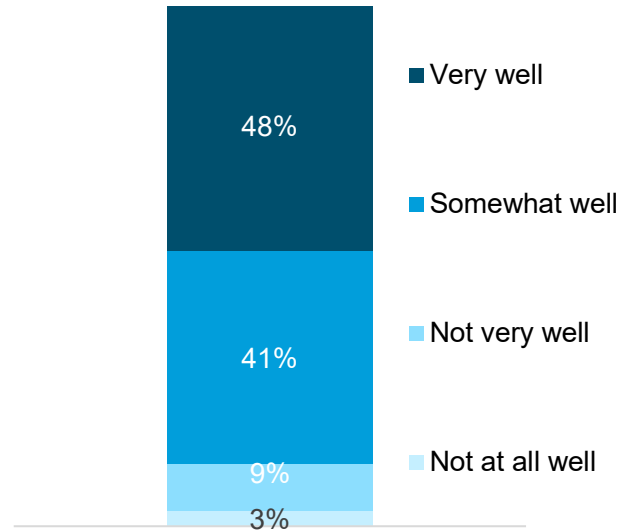
Fewer who use prescription opioids say they had difficulty accessing them

Ever Had Difficulty Accessing Prescription Opioids and Medical Marijuana



How Well Medical Marijuana Manages Symptoms

*Among those using medical marijuana**



* Caution, small base size (n < 100). Results should be interpreted as directional

BASE: HAVE HAD CANCER AND USING OPIOIDS (n=104) OR MEDICAL MARIJUANA (n=58*)

Q5 You indicated that you have used the method(s) below to manage your cancer-related pain, nausea, or other symptoms in the past 12 months. Have you ever had difficulty accessing them?

BASE: HAVE HAD CANCER AND USING MEDICAL MARIJUANA (n=58*)

Q6 How well are your symptoms being managed by medical marijuana?

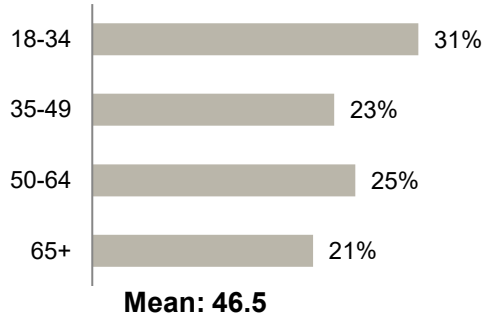


Demographics

DEMOGRAPHICS – GENERAL POPULATION



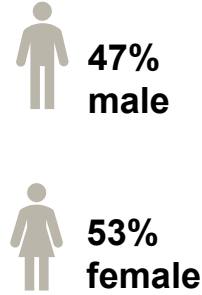
Age



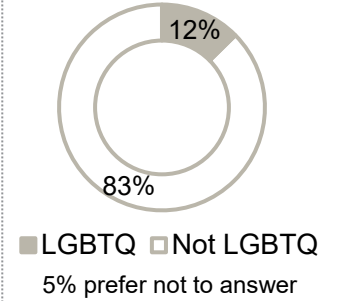
Race

- 62% White
- 16% Hispanic
- 12% Black/African American
- 6% Asian or Pacific Islander
- 2% Mixed race
- 1% Native American
- * Other race
- 2% Prefer not to answer

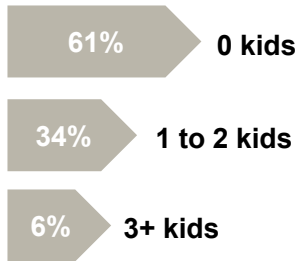
Gender



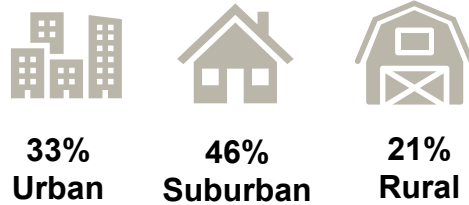
LGBTQ



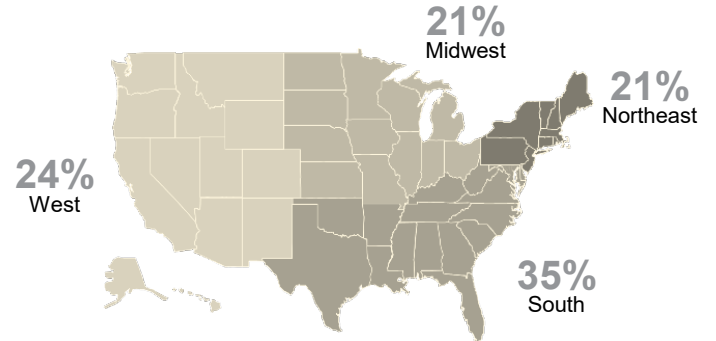
Children in HH



Locale

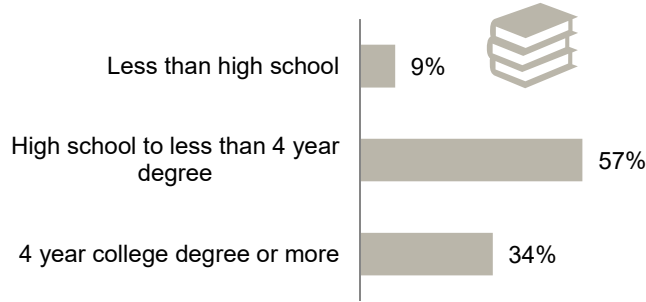


Region

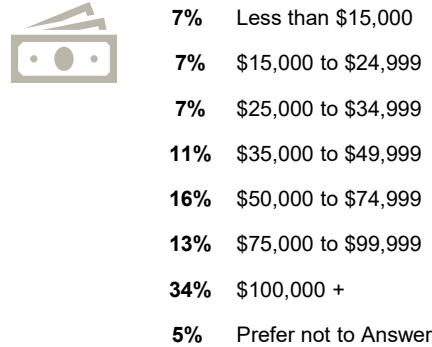




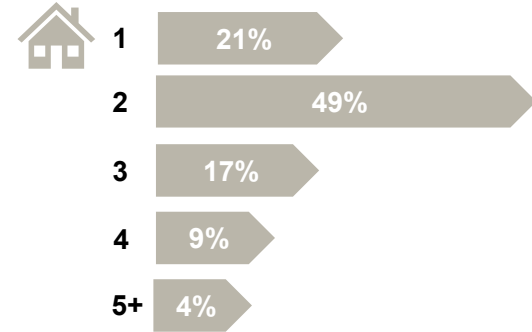
Education



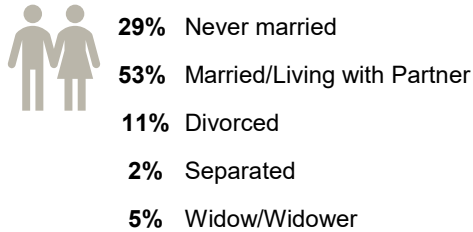
Household Income



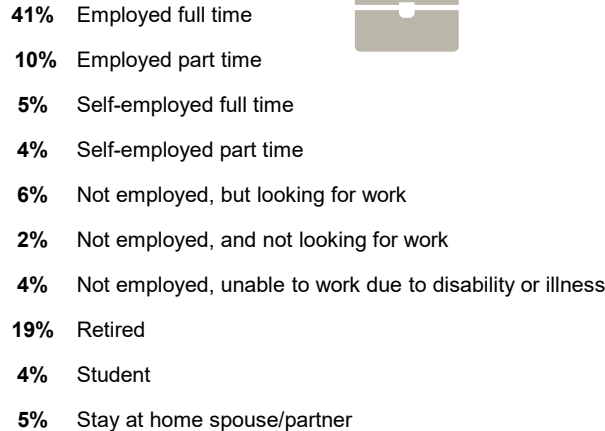
Adults in HH



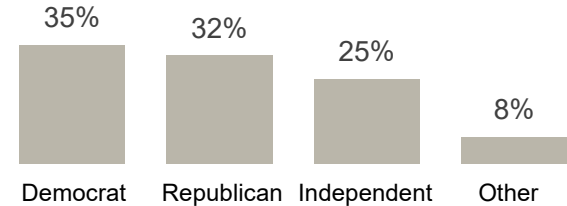
Marital Status



Employment

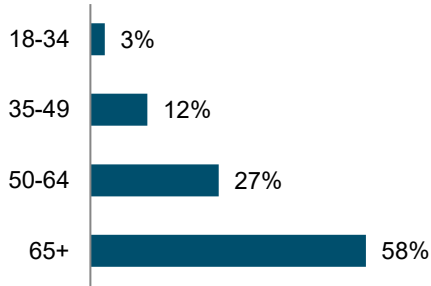


Political Party





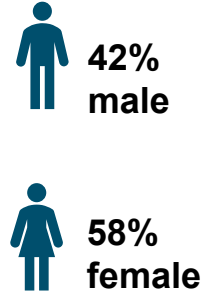
Age



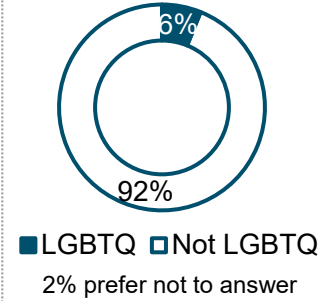
Race

- 79% White
- 7% Black/African American
- 6% Hispanic
- 3% Asian or Pacific Islander
- 2% Mixed race
- 2% Other race
- 1% Native American
- 1% Prefer not to answer

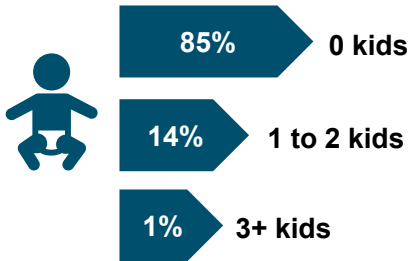
Gender



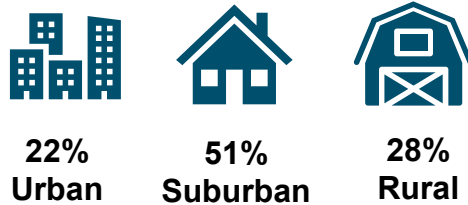
LGBTQ



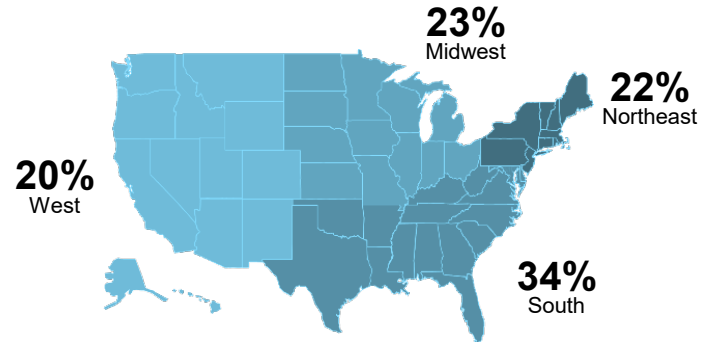
Children in HH



Locale

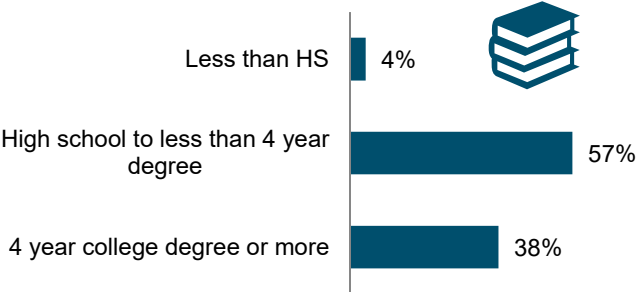


Region

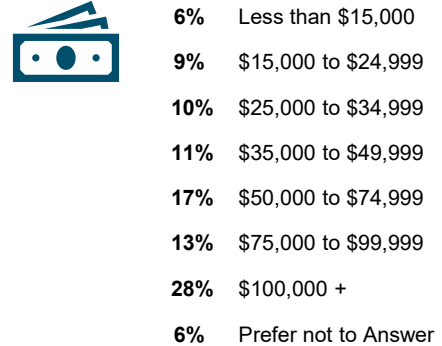




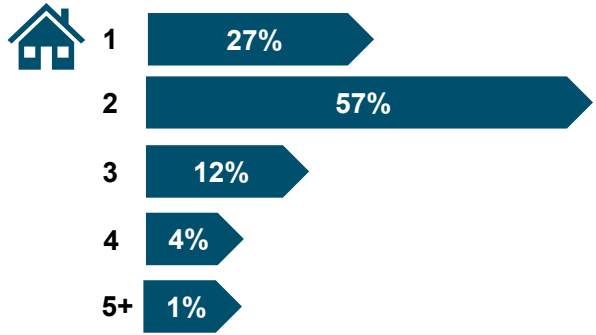
Education



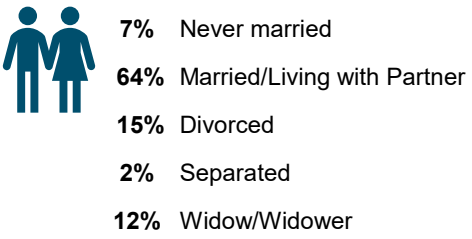
Household Income



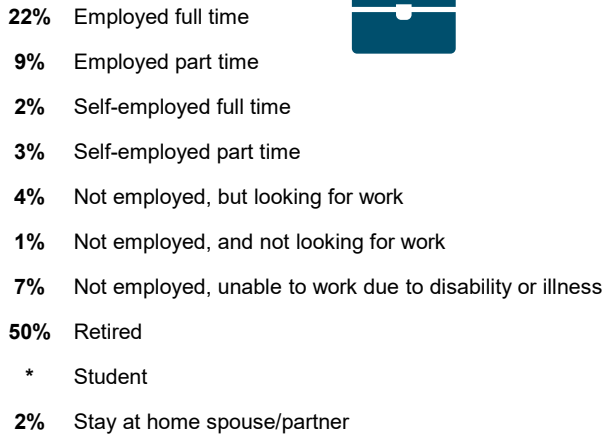
Adults in HH



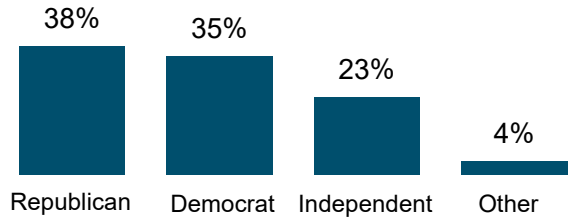
Marital Status



Employment



Political Party

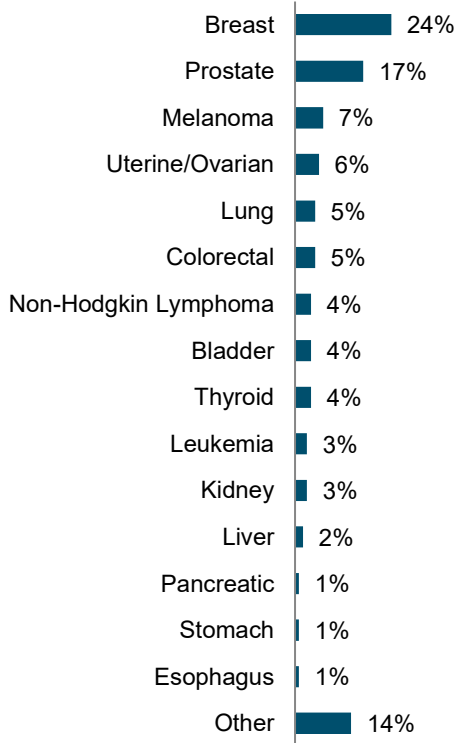




Cancer Profiles



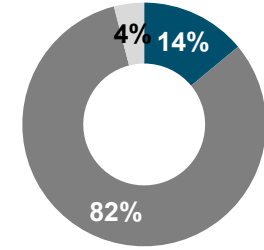
Cancer Type



Time of Diagnosis

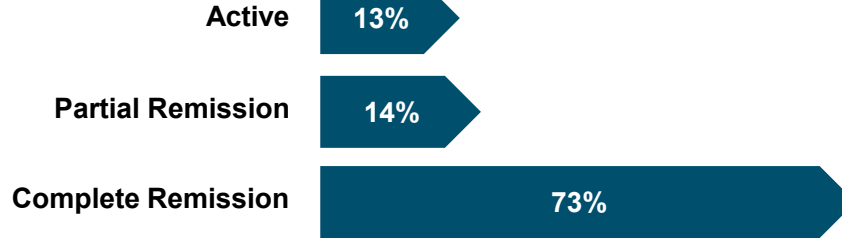
- 12% In the past year
- 12% 1 - less than 2 years ago
- 31% 2-5 years ago
- 18% 6-10 years
- 25% More than 10 years ago
- * Prefer not to answer
- 2% Not sure

Metastatic Cancer Experience



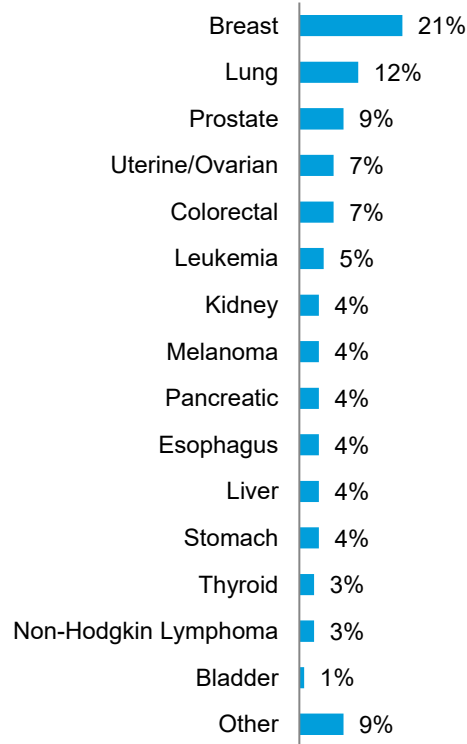
■ Yes ■ No ■ Not sure

Current Cancer Status

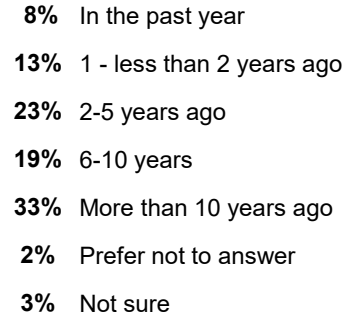




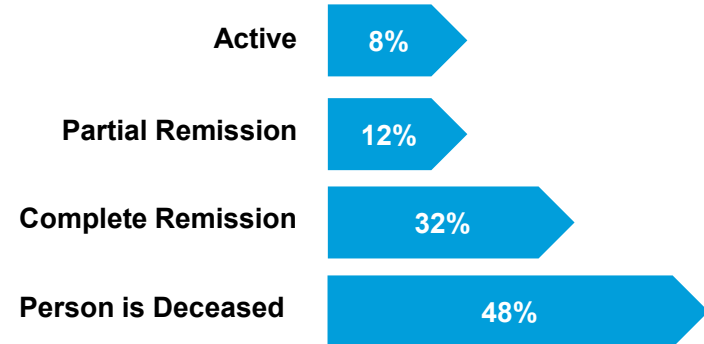
Cancer Type



Time of Diagnosis

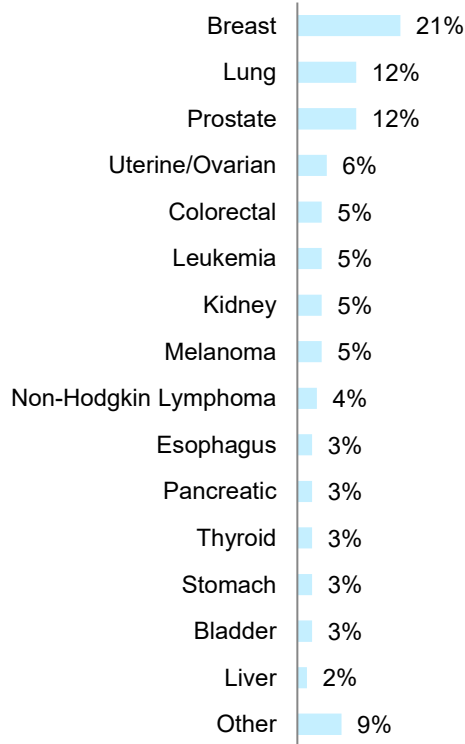


Current Cancer Status

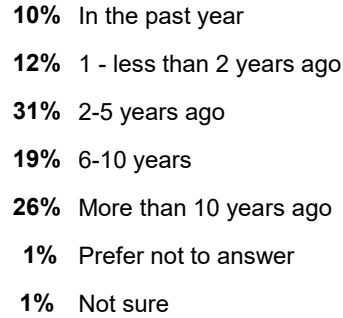




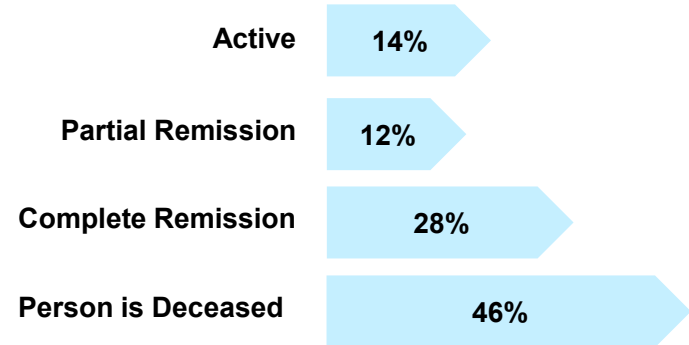
Cancer Type



Time of Diagnosis



Current Cancer Status





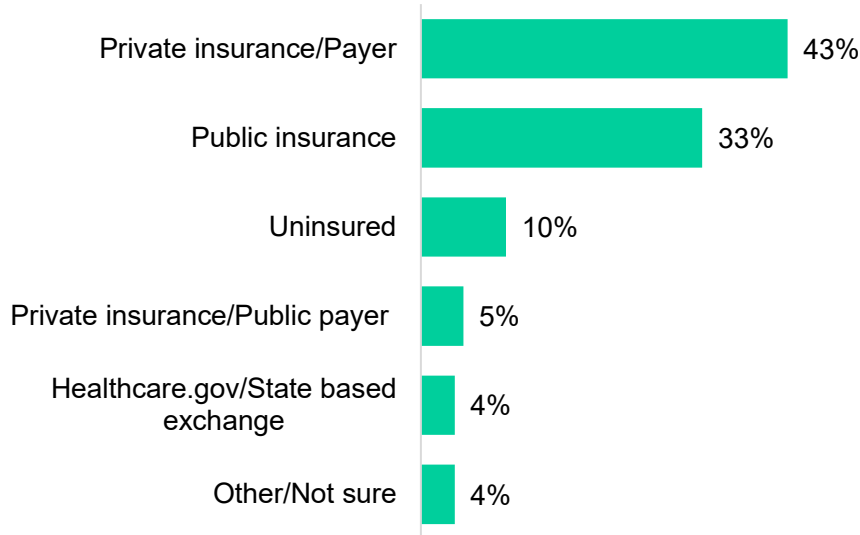
Health Insurance Profiles



More than 2 in 5 Adults Have Private Insurance

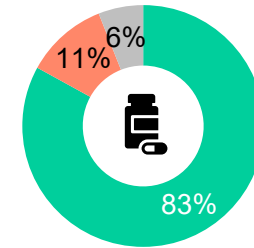
More than 4 in 5 adults who have health insurance say prescription drugs are covered

Type of Health Insurance



Prescription Drugs Covered by Insurance

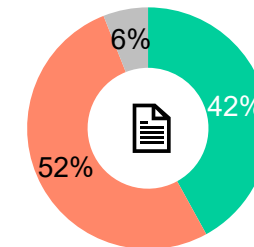
Among those who have health insurance



Yes No Not sure

Ever Purchased Supplemental Medigap Policy

Among those who have Medicare



Yes No Not sure

BASE: QUALIFIED RESPONDENTS (n=4012)

Q940 Which of the following best describes how you receive health insurance benefits today? Please select all that apply.

BASE: HAS HEALTH INSURANCE (n=3542)

Q942 Does your health insurance include prescription drug coverage?

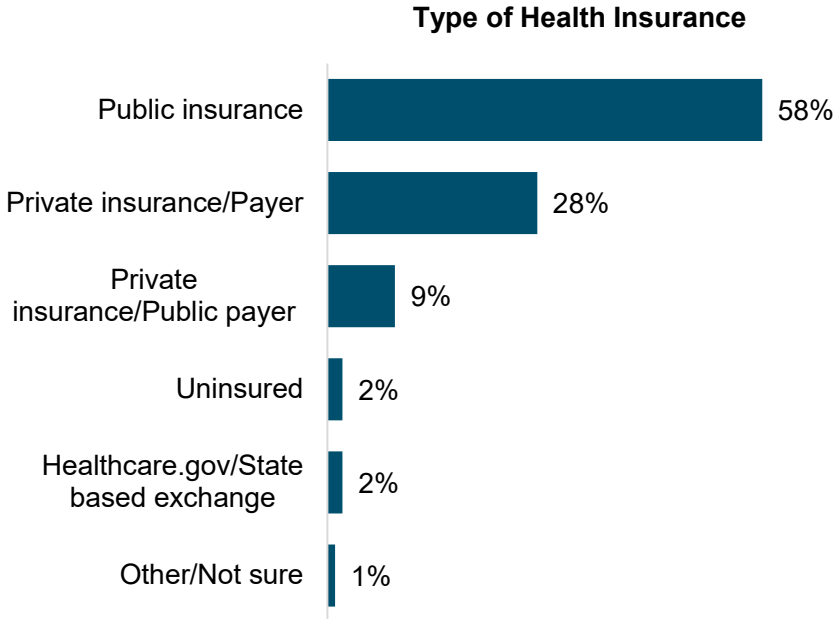
BASE: HAS MEDICARE (n=884)

Q943 Have you ever purchased a supplemental Medigap policy to help with your Medicare coverage?



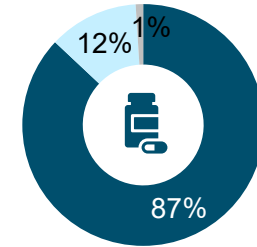
Majority of Those Who Have/Had Cancer Have Public Insurance

Nearly nine in ten with health insurance say prescription drugs are covered



Prescription Drugs Covered by Insurance

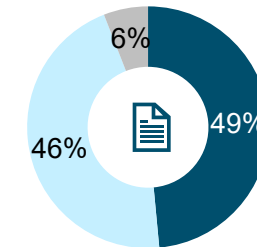
Among those who have/had cancer and have health insurance



■ Yes ■ No ■ Not sure

Ever Purchased Supplemental Medigap Policy

Among those who have/had cancer and have Medicare



■ Yes ■ No ■ Not sure

BASE: HAVE/HAD CANCER (n=1142)

Q940 Which of the following best describes how you receive health insurance benefits today? Please select all that apply.

BASE: HAVE/HAD CANCER AND HAS HEALTH INSURANCE (n=1120)

Q942 Does your health insurance include prescription drug coverage?

BASE: HAVE/HAD CANCER AND HAS MEDICARE (n=767)

Q943 Have you ever purchased a supplemental Medigap policy to help with your Medicare coverage?



Appendix



Adults Self-Reporting Cancer Diagnosis on Par With 2019

Trended Disease Diagnoses
(% Already Diagnosed)

	2017 (A)	2018 (B)	2019 (C)	2020 (D)
High blood pressure	19%	18%	21% B	20%
Arthritis	13%	12%	16% ABD	13%
Diabetes	8%	8%	11% AB	11% AB
Cancer	4%	3%	5% B	5% B
Heart attack or heart disease	3%	3%	4% A	3%
Stroke	1%	2% A	2% A	2% A
Alzheimer's disease	*	1%	1%	1%



This Year, Adults Reporting an Immediate Family Member/Loved One Has Been Diagnosed with Cancer Has Returned to 2018 Level

Trended Disease Diagnoses for Immediate Family Member

	2017 (A)	2018 (B)	2019 (C)	2020 (D)
High blood pressure	51%	48%	53% B	50%
Diabetes	34%	33%	36%	39% ABC
Arthritis	32% B	27%	31% B	29%
Cancer	32% BD	28%	32% BD	28%
Heart attack or heart disease	24% B	20%	24% B	22%
Stroke	15%	15%	16%	14%
Alzheimer's disease	11%	10%	9%	10%
None of these	26%	29% AD	27%	25%



Fewer Adults Report Being Unsure What Most Cancers Are Caused By

Belief that cancer is caused by family history and environmental causes return towards 2017 levels

Trended Beliefs About Causes of Cancer

	2017 (A)	2018 (B)	2019 (C)	2020 (D)
Lifestyle choices (e.g., smoking, sun exposure, diet)	32%	33%	33%	34%
Family history (i.e., hereditary factors)	27% C	25%	24%	28% BC
Random mutations in a person's genes	14%	13%	13%	13%
Environmental causes (e.g., pollutants)	10%	12% AD	12% AD	10%
Other	2%	2%	2%	2%
Not sure	16% D	15% D	15% D	13%



Increase in Vitamin/Supplement Use to Reduce Cancer Risk This Year

Decrease possibly related to COVID-19 pandemic and increased focus on health in general (e.g., supplements to support immune system)

Trended Cancer Risk Reduction Behaviors Practiced

	2018 (B)	2019 (C)	2020 (D)
Not smoke or use tobacco products	62%	63%	62%
Eat lots of fruits and vegetables	52%	51%	52%
Take vitamins or supplements	44%	44%	50% BC
Use sunblock	48%	49%	48%
Maintain a healthy weight	46%	45%	47%
Limit skin's exposure to the sun without sunblock	49%	49%	47%
Limit alcohol consumption	41%	40%	42%
Avoid using artificial sweeteners	34% D	34%	31%
Avoid eating processed meats	30% D	29% D	27%
Limit caffeine intake	21%	22%	22%
Limit cell phone usage	16%	18% D	15%
Other	3% D	2% D	1%
I am not doing anything to reduce my risk of cancer	12%	13%	11%



Increase in Adults Incorporating Cancer Prevention Into Their Daily Life

Trended Cancer Risk Perspective

	2019 (C)	2020 (D)
I care deeply and incorporate cancer prevention into my daily life. [I cared deeply and incorporated cancer prevention into my daily life.]	24%	27% c
My concern comes and goes. Some days I worry more than others. [My concern came and went. Some days I worried more than others.]	51%	50%
If I am going to get cancer, I am going to get it. There is nothing I can do. [If I was going to get cancer, I was going to get it. There was nothing I could do.]	25%	23%



Increase in Proportions Who Have Talked to a Doctor About Ways to Reduce Cancer Risk, Thought They Had Cancer Based Only on Online Information

Trended Action Taken Regarding Cancer Risk

	2019 (C)	2020 (D)
Searched online for what to do to reduce my cancer risk	24%	26%
Talked to a doctor about my cancer risk	22%	22%
Talked to a doctor about what I should do to reduce my cancer risk	18%	22% C
Thought I had cancer based solely on information I had found online (rather than being diagnosed by a doctor)	9%	12% C
None of these	53% D	49%



Concerns About Negative Impact on Work/Professional Opportunities and Being Treated Differently by Others Has Increased Compared to Previous Years

Trended Greatest Concerns About Being Diagnosed with Cancer

	2017 (A)	2018 (B)	2019 (C)	2020 (D)
FINANCIAL FEARS (NET)	60%	57%	60% B	60%
Financial impact on my family	48%	45%	48%	49% B
Paying for treatment	46%	44%	46%	43%
Dying from cancer	56%	54%	58% B	59% B
Suffering/pain	58% B	54%	59% B	57%
Loss of control over my life	50%	48%	53% B	53% AB
Side effects of the treatment	52%	49%	53% B	52%
Being a physical or emotional burden on my family or friends	52% B	48%	53% B	52% B
Long-term complications (e.g., urinary incontinence, impotence)	39%	37%	42% B	40% B
Negative impact on work/professional opportunities	18%	17%	19%	22% ABC
Not knowing what caused it	15%	16%	19% AB	20% AB
Being treated differently by family, friends, co-workers, and acquaintances	15%	15%	17%	19% ABC
Something else	3%	3%	3%	3%
I do not have any concerns about being diagnosed with cancer	7%	11% AD	11% A	9% A



Fewer Adults Agree They Are Uncertain About How the Future of the Healthcare System Will Impact Their Ability to Get the Best Possible Care

Trended Agreement with Statement About Future of Healthcare (% Strongly/Somewhat Agree)

	2018 (B)	2019 (C)	2020 (D)
I am uncertain about how the future of the healthcare system will impact my ability to get the best possible care.	77% D	78% D	71%



Compared to 2019, Those Who Have/Had Cancer Are More Likely This Year to Say They Are Satisfied with the Quality of Doctors Near Them and That They Received the Best Possible Cancer Care

Trended Agreement with Statements About Cancer Care
(% Strongly/Somewhat Agree)

Have/Had Cancer

	2018 (B)	2019 (C)	2020 (D)
I am/was satisfied with the quality of the doctors who specialize in cancer care near where I live.	88%	86%	90% C
I am receiving/received the best possible cancer care.	89%	88%	91% C
I am uncertain about how the future of the healthcare system will impact my ability to get the best possible cancer care.	72% D	73% D	57%
If the location where I receive/received cancer care closed, I wouldn't know where else to go.	32%	37% B	32%
I have/had to travel too far to see the doctor who is/was managing my cancer care.	23%	26%	21%
There aren't/weren't enough doctors who specialize in cancer care near where I live.	26%	29% D	24%



Compared to 2019, Family Members/Loved Ones Are Less Likely to Say They Are Uncertain About How the Future of Healthcare Will Impact Their Family Member/Loved One’s Ability to Get the Best Possible Cancer Care

Family Member/Loved One	Trended Agreement with Statements About Cancer Care (% Strongly/Somewhat Agree)		
	2018 (B)	2019 (C)	2020 (D)
I am/was satisfied with the quality of the doctors who specialize in cancer care near where my immediate family member or loved one lives.	72%	75%	75%
My immediate family member or loved one is receiving/received the best possible cancer care.	68%	77% B	71%
I am uncertain about how the future of the healthcare system will impact my family member or loved one’s ability to get the best possible cancer care.	68%	70% D	62%
If the location where my immediate family member or loved one receives/received cancer care closed, they wouldn’t know where else to go.	37%	38%	38%
My immediate family member or loved one has/had to travel too far to see the doctor who is/was managing their cancer care.	33%	29%	30%
There aren’t/weren’t enough doctors who specialize in cancer care near where my immediate family member or loved one lives.	39% D	35%	30%



Caregivers Beliefs About Cancer Care Unchanged Compared to Previous Years

Trended Agreement with Statements About Cancer Care
(% Strongly/Somewhat Agree)

Caregiver

	2018 (B)	2019 (C)	2020 (D)
I am/was satisfied with the quality of the doctors who specialize in cancer care near where the person I care for lives.	75%	77%	78%
The person I care for has received the best possible cancer care.	67%	80% B	77% B
I am uncertain about how the future of the healthcare system will impact the person for whom I provide care's ability to get the best possible cancer care.	72%	71%	67%
If the location where the person I care for receives/received cancer care closed, they wouldn't know where else to go.	54%	50%	46%
The person I care for has/had to travel too far to see the doctor who is/was managing their cancer care.	42%	38%	38%
There aren't/weren't enough doctors who specialize in cancer care near where the person I care for lives.	43%	39%	35%



Increase in Insured Patients Reporting Their Insurance Was Not a Barrier To Obtaining the Best Possible Cancer Care

Have/Had Cancer

Trended Aspects of Health Insurance That Make It Difficult to Obtain Best Possible Care

Among those who have/had cancer and have health insurance

	2018 (B)	2019 (C)	2020 (D)
Insurance premiums (the payment (usually monthly) you make to your health insurance company that keeps your coverage active)	13%	13%	11%
Deductibles (the amount you pay for covered health care services before your insurance plan starts to pay)	21% D	18% D	14%
Pre-authorization requirements (a decision by your health insurance company that a health care service, treatment plan, prescription drug, etc. is medically necessary for you to have)	16%	19% D	14%
Co-pays (fixed amount you pay each time a health care service is accessed)	18% D	20% D	13%
Coinsurance (the percentage of costs of a covered health care service you pay after you've paid your deductible)	12%	12%	11%
Lack of/inadequate prescription drug coverage	10% D	9% D	5%
Other	3%	2%	2%
No aspects of my health insurance have made it difficult to obtain the best possible cancer care	57%	56%	66% BC



Financial Anxiety Resulting From Cancer Diagnosis Has Declined

Trended Amount of Anxiety Felt Regarding Financial Situation as a Result of Cancer Diagnosis
(% A little/A lot/An Overwhelming Amount of Anxiety)

Have/Had Cancer			Family Member/Loved One			Caregiver		
2018 (B)	2019 (C)	2020 (D)	2018 (B)	2019 (C)	2020 (D)	2018 (B)	2019 (C)	2020 (D)
69% D	65% D	59%	43%	36%	39%	69%	65%	62%

BASE: HAVE/HAD CANCER OR IMMEDIATE FAMILY MEMBERS HAVE HAD CANCER (HAVE/HAD CANCER (2018: n=1001, 2019: n=1009, 2020: n=1142) FAMILY MEMBER/LOVED ONE (2018: n=593, 2019: n=668, 2020: n=539)

CAREGIVER (2018: n=402, 2019: n=496, 2020: n=464)

Q22 How much anxiety do/did you feel specifically regarding your financial situation as a result of your/their cancer diagnosis?



Adults Who Have/Had Cancer Are Less Concerned About Treatment Affordability Compared to Previous Years

Trended Concern About Treatment Affordability
 (% Very/Somewhat Concerned)
Among those responsible for paying for treatment

Have/Had Cancer

2018 (B)	2019 (C)	2020 (D)
54% D	53% D	44%

Family Member/Loved One

2018 (B)	2019 (C)	2020 (D)
55%	54%	54%

Caregiver

2018 (B)	2019 (C)	2020 (D)
74%	74%	67%



Proportion Who Have/Had Cancer and Have Done Something to Reduce Their Cancer Treatment Costs Decreases Beyond 2018 Levels

Have/Had Cancer

Trended Actions Taken to Reduce Treatment Costs
Among those touched by cancer

	2018 (B)	2019 (C)	2020 (D)
Taken at least 1 action (NET)	20% D	26% BD	16%
Skipped or postponed doctor appointments	7% D	8% D	5%
Cut pain/anti-nausea pills in half	6%	9% BD	4%
Delayed having scan(s) performed to assess my cancer	7% D	7%	5%
Postponed filling or did not fill prescriptions	5%	8% BD	4%
Refused treatment	3%	5% B	3%
Ordered medications from non-U.S. sources	2%	4%	3%
Skipped doses of prescribed medications	6%	6% D	4%
Cut oral chemotherapy pills in half	2%	4% BD	2%
Other	3%	4%	4%
None – have not done anything to reduce cancer treatment costs	80% C	74%	84% BC



The Same Is True When Looking by Insurance Type

Trended Actions Taken to Reduce Treatment Costs (% Taken at Least 1 Action)

Among those who have/had cancer by insurance type

Have/Had Cancer

	2018 (B)	2019 (C)	2020 (D)
Private insurance/payer	24%	36% BD	24%
Private insurance/public payer	17%	18%	15%
Public insurance	17% c	18% c	12%



Compared to 2018, More Family Members/Loved Ones Say Their Loved One Has Had to Take Action to Reduce Their Cancer Treatment Costs

Family Member/Loved One

Trended Actions Taken to Reduce Treatment Costs
Among those touched by cancer

	2018 (B)	2019 (C)	2020 (D)
Taken at least 1 action (NET)	15%	17%	20% B
Skipped or postponed doctor appointments	5%	4%	6%
Cut pain/anti-nausea pills in half	4%	4%	6%
Delayed having scan(s) performed to assess their cancer	5%	4%	6%
Postponed filling or did not fill prescriptions	3%	4%	4%
Refused treatment	4%	4%	7%
Ordered medications from non-U.S. sources	2%	2%	4%
Skipped doses of prescribed medications	4%	5%	3%
Cut oral chemotherapy pills in half	3%	1%	4% C
Other	2%	2%	2%
None – have not done anything to reduce cancer treatment costs	62% D	56%	50%
Not sure	23%	27%	30%



Actions Taken to Reduce Treatment Costs Reported by Caregivers On Par with Previous Years

Caregiver	Trended Actions Taken to Reduce Treatment Costs <i>Among those touched by cancer</i>		
	2018 (B)	2019 (C)	2020 (D)
Taken at least 1 action (NET)	40%	37%	34%
Skipped or postponed doctor appointments	12%	14%	13%
Cut pain/anti-nausea pills in half	13%	11%	11%
Delayed having scan(s) performed to assess their cancer	15%	11%	9%
Postponed filling or did not fill prescriptions	7%	12%	12%
Refused treatment	10%	12%	8%
Ordered medications from non-U.S. sources	10%	5%	8%
Skipped doses of prescribed medications	13%	12%	9%
Cut oral chemotherapy pills in half	10%	6%	6%
Other	3%	3%	2%
None – have not done anything to reduce cancer treatment costs	51%	49%	56%
Not sure	9%	14%	10%

BASE: IMMEDIATE FAMILY MEMBERS HAVE/HAD CANCER (CAREGIVER 2018: n=402, 2019: n=496, 2020: n=464)

Q935 Which of the following have you/they done to reduce cancer treatment costs? Please select all that apply.



Among Those Who Have/Had Cancer and Took Action to Reduce Treatment Costs, Discussions with Doctors About Those Things Stable in 2020

Trended Discussions with Doctor About Reducing Treatment Costs

Have/Had Cancer

	2018 (B)	2019 (C)	2020 (D)
Yes	39%	51% B	50%
No, but I plan to	26%	23%	17%
No, and I do not plan to	36%	27%	33%



Adults Who Have/Had Cancer Are More Likely This Year Compared to Last to Have Done Nothing to Help Pay for Their Cancer Care, More in Line with 2018

Have/Had Cancer

Trended Steps Taken to Help Pay for Cancer Care

	2018 (B)	2019 (C)	2020 (D)
Dipped into savings account(s)	17%	20% D	15%
Worked extra hours	9%	14% BD	9%
Taken an early withdrawal from a retirement account, college education fund, etc.	6%	8% D	5%
Postponed retirement	5%	7% D	4%
Taken on an additional job	6%	5%	4%
Sold family heirlooms	4%	5%	3%
Sold major assets such as a home, car, etc.	3%	6% BD	3%
Taken out a second mortgage or another type of loan	3%	4%	2%
Filed for bankruptcy	4%	5% D	2%
Other	4%	4%	4%
Nothing	69% c	63%	73% c



This Year, Family Members/Loved Ones Saying They Have Postponed Retirement to Help Pay for Their Loved One's Cancer Care Has Increased

Family Member/Loved One

Trended Steps Taken to Help Pay for Cancer Care

	2018 (B)	2019 (C)	2020 (D)
Dipped into savings account(s)	16%	13%	17%
Worked extra hours	9%	7%	10%
Taken an early withdrawal from a retirement account, college education fund, etc.	6%	6%	8%
Postponed retirement	4%	3%	8% c
Taken on an additional job	5%	4%	5%
Sold family heirlooms	3%	2%	4%
Sold major assets such as a home, car, etc.	4%	3%	5%
Taken out a second mortgage or another type of loan	3%	2%	3%
Filed for bankruptcy	2%	4%	2%
Other	3%	6%	3%
Nothing	71%	69%	65%



Compared to 2018, More Caregivers Report Having Done Nothing to Help Pay for Their Loved One's Cancer Care

Caregiver	Trended Steps Taken to Help Pay for Cancer Care		
	2018 (B)	2019 (C)	2020 (D)
Dipped into savings account(s)	35%	28%	29%
Worked extra hours	23%	19%	16%
Taken an early withdrawal from a retirement account, college education fund, etc.	14%	13%	15%
Postponed retirement	14%	12%	11%
Taken on an additional job	13%	10%	12%
Sold family heirlooms	9%	12%	11%
Sold major assets such as a home, car, etc.	11%	11%	9%
Taken out a second mortgage or another type of loan	13% D	10%	7%
Filed for bankruptcy	4%	6%	3%
Other	7% D	9% D	2%
Nothing	39%	44%	48% B



This Year, Fewer Feel Medicare Should Negotiate Cancer Drug Prices, the FDA Should Speed Up Approvals of Generic Treatments, and That It Should be Legal for U.S. Residents to Buy Cancer Drugs from Other Countries

Trended Agreement with Statements About Government Action on Cancer Drugs
(% Strongly/Somewhat Agree)

	2017 (A)	2018 (B)	2019 (C)	2020 (D)
The U.S. government should regulate the price of cancer drugs to help lower their cost.	86%	86%	86%	87%
Medicare should be allowed to directly negotiate prescription drug prices with drug makers.	92% BCD	88% D	89% D	86%
The U.S. Food and Drug Administration should speed up approvals of generic versions of cancer treatments.	89% BCD	84%	87% BD	84%
It should be legal for U.S. residents to buy cancer drugs from pharmacies in other countries.	80% BD	77%	79% D	76%
It should be legal for U.S. residents to buy cancer drugs from pharmacies in other countries, but only if their safety and effectiveness can be guaranteed by the FDA.	N/A	81%	82%	80%
The U.S. government should regulate the price of cancer drugs to help lower their cost, but only if it doesn't impact pharmaceutical companies' investment in the development of new treatments.	N/A	76%	75%	74%

BASE: QUALIFIED RESPONDENTS (2017: n=4016, 2018: n=4038, 2019: n=4001, 2020: n=4012)

Q815 How much do you agree or disagree with the following statements regarding the U.S. government's action to make cancer drugs more affordable?

Q817 Now, please indicate how much you agree or disagree with these statements regarding the U.S. government's action to make cancer drugs more affordable.



Compared to 2018, Proportion Who Have/Had Cancer Feeling That Their Doctor Prescribing the Right Treatment or Discussing Cost of Treatment Options Is Absolutely Essential Declines

Have/Had Cancer	Trended Importance that Doctor Does the Following (% Absolutely Essential)		
	2018 (B)	2019 (C)	2020 (D)
Prescribes/prescribed the right treatment	73% CD	67%	66%
Takes/took the time to listen to me	57%	56%	54%
Is/was up front and straightforward about my chances of survival	57%	57%	57%
Helps/helped me avoid unnecessary tests or treatments	44%	44%	40%
Helps/helped me manage my anxiety or fears	37%	36%	35%
Understands/understood my personal goals (i.e., longer life, best quality of life, family considerations, financial concerns, etc.)	41%	43%	40%
Helps/helped me manage my pain	42%	41%	38%
Shows/showed compassion for what I am/was going through	45%	44%	41%
Discusses/discussed the cost of treatment options	35% D	30%	26%
Is/was available during non-standard work hours	22%	20%	20%



Family Members/Loved Ones Are Less Likely to Say Most Doctor Actions Are Absolutely Essential This Year Compared to Previous Years

Family Member/Loved One	Trended Importance that Doctor Does the Following (% Absolutely Essential)		
	2018 (B)	2019 (C)	2020 (D)
Prescribes/prescribed the right treatment	65% D	68% D	55%
Takes/took the time to listen to them	56% D	53%	45%
Helps/helped them manage their pain	52% D	51% D	41%
Shows/showed compassion for what they are/were going through	53% D	51% D	40%
Is/was up front and straightforward about their chances of survival	49% D	51% D	36%
Understands/understood their personal goals (i.e., longer life, best quality of life, family considerations, financial concerns, etc.)	43% D	41% D	34%
Helps/helped them manage their anxiety or fears	43% D	45% D	33%
Helps/helped them avoid unnecessary tests or treatments	45% D	44% D	34%
Discusses/discussed the cost of treatment options	40% D	34%	30%
Is/was available during non-standard work hours	24%	23%	20%



Caregivers Also Less Likely to Find Some Doctor Actions Absolutely Essential in 2020

Caregiver	Trended Importance that Doctor Does the Following (% Absolutely Essential)		
	2018 (B)	2019 (C)	2020 (D)
Prescribes/prescribed the right treatment	62%	68%	64%
Takes/took the time to listen to them	56%	60% D	50%
Helps/helped them manage their pain	54%	55%	50%
Shows/showed compassion for what they are/were going through	55%	55% D	46%
Is/was up front and straightforward about their chances of survival	48%	51%	44%
Understands/understood their personal goals (i.e., longer life, best quality of life, family considerations, financial concerns, etc.)	44%	39%	38%
Helps/helped them manage their anxiety or fears	47%	47% D	37%
Helps/helped them avoid unnecessary tests or treatments	49% D	46% D	36%
Discusses/discussed the cost of treatment options	37%	38%	29%
Is/was available during non-standard work hours	26%	28% D	19%



Reported Use of Complementary/Alternative or Drug-Based Therapies In Past 12 Months Among Those Who Have/Had Cancer Declines Back Toward 2018 Level

Have/Had Cancer

Trended Treatments Used in Last 12 Months

	2018 (B)	2019 (C)	2020 (D)
Surgery	32%	31%	34%
Radiation therapy	20%	24%	21%
Drug based therapies	19%	24% B	20%
Hormone therapies	13%	13%	12%
Immunotherapy	5%	8%	6%
Complementary and alternative therapies	6%	8% D	5%
Other	5%	4%	3%
No cancer treatments in past 12 months	40%	35%	40%
Not sure	2%	3%	2%



Family Members/Loved Ones Less Likely to Report Loved One Had No Cancer Treatments in Past 12 Months

Family Member/Loved One

Trended Treatments Used in Last 12 Months

	2018 (B)	2019 (C)	2020 (D)
Surgery	27%	23%	30% c
Radiation therapy	24%	24%	28%
Drug based therapies	26%	24%	26%
Hormone therapies	4%	4%	7%
Immunotherapy	3%	3%	4%
Complementary and alternative therapies	5%	3%	6% c
Other	7% c	2%	5% c
No cancer treatments in past 12 months	38% D	37% D	28%
Not sure	9%	15% BD	10%



Treatments Used in Last 12 Months As Reported by Caregivers On Par with Previous Years

Caregiver

Trended Treatments Used in Last 12 Months

	2018 (B)	2019 (C)	2020 (D)
Surgery	34%	39%	32%
Radiation therapy	35%	32%	37%
Drug based therapies	39%	38%	39%
Hormone therapies	14%	12%	12%
Immunotherapy	7%	8%	7%
Complementary and alternative therapies	14%	10%	10%
Other	1%	2%	1%
No cancer treatments in past 12 months	31%	30%	26%
Not sure	2%	3%	6% B



Adults Who Have/Had Cancer Are Less Likely This Year to Say They Have Discussed Prescription Opioids, Medical Marijuana, or Steroids with Their Doctor

Medical marijuana and steroids decline back toward 2018 levels; decline in medical marijuana could be due to the addition of “CBD products” in 2020

Have/Had Cancer

Trended Topics Ever Discussed with Doctor About Symptom Management[^]

	2018 (B)	2019 (C)	2020 (D)
Over the counter pain relievers	30%	30%	27%
Prescription opioids	27% D	29% D	19%
Medical marijuana	7%	13% BD	6%
Meditation	7%	11% B	9%
Vitamins/minerals/herbs	15%	17%	14%
Physical therapy or massage	11%	13%	10%
Steroids	8%	11% BD	8%
CBD products	N/A	N/A	6%
Antidepressants	10%	12%	9%
Acupuncture	4%	5%	4%
None of these	45%	42%	51% BC

[^]Note: “CBD Products” added as a response option in 2020

BASE: HAVE HAD CANCER (2018: n=1001, 2019: n=1009, 2020: n=1142)

Q3 Which of the following methods, if any, has the doctor who is/was managing your cancer care ever talked with you about using to alleviate cancer-related pain, nausea, or other symptoms? Please select all that apply.



Use of OTC Pain Relievers, Opioids, Medical Marijuana, and Antidepressants in the Past 12 Months Has Decreased Among Adults Who Have/Had Cancer

Medical marijuana declines back toward 2018 levels, possibly due to the addition of “CBD products” in 2020

Have/Had Cancer

Trended Methods Used in Last 12 Months to Manage Symptoms[^]

	2018 (B)	2019 (C)	2020 (D)
Over the counter pain relievers	22% D	24% D	17%
Vitamins/minerals/herbs	17%	18%	15%
Prescription opioids	12%	17% BD	9%
Meditation	7%	9%	7%
Physical therapy or massage	6%	8%	6%
Medical marijuana	5%	10% BD	6%
Antidepressants	9%	10% D	7%
CBD products	N/A	N/A	6%
Steroids	6%	8%	5%
Acupuncture	2%	3%	2%
Other	3%	2%	5% C
I have not used anything to help manage cancer-related pain, nausea, or other symptoms in the past 12 months	55% C	48%	59% C
Not sure	4%	5%	4%

[^]Note: “CBD Products” added as a response option in 2020 113

BASE: HAVE/HAD CANCER (2018: n=1001, 2019: n=1009, 2020: n=1142)

Q2 Which of the following methods, if any, have you/they used in the past 12 months to help manage your/their cancer-related pain, nausea, or other symptoms?



In Contrast, Family Member/Loved Ones Report Increases in Loved Ones Use of Methods To Manage Symptoms

Including vitamins, meditation, and physical therapy or massage

Family Member/Loved One

Trended Methods Used in Last 12 Months to Manage Symptoms[^]

	2018 (B)	2019 (C)	2020 (D)
Over the counter pain relievers	9%	14% B	14% B
Vitamins/minerals/herbs	8%	6%	14% BC
Prescription opioids	11%	14%	11%
Meditation	4%	3%	8% BC
Physical therapy or massage	3%	3%	7% BC
Medical marijuana	4%	7%	7%
Antidepressants	3%	7%	5%
CBD products	N/A	N/A	5%
Steroids	4%	4%	6%
Acupuncture	1%	2%	3%
Other	4%	4%	4%
They have not used anything to help manage cancer-related pain, nausea, or other symptoms in the past 12 months	50% D	46% D	36%
Not sure	20%	21%	24%

[^]Note: “CBD Products” added as a response option in 2020 114

BASE: IMMEDIATE FAMILY MEMBERS HAVE/HAD CANCER (FAMILY MEMBER/LOVED ONE 2018: n=593, 2019: n=668, 2020: n=539)

Q2 Which of the following methods, if any, have you/they used in the past 12 months to help manage your/their cancer-related pain, nausea, or other symptoms?



Like Family Member/Loved Ones, Caregivers Report Increases in Loved Ones Use of Methods To Manage Symptoms

Including over 1 in 10 who say their loved one used CBD products

Caregiver

Trended Methods Used in Last 12 Months to Manage Symptoms[^]

	2018 (B)	2019 (C)	2020 (D)
Over the counter pain relievers	16%	26% B	23%
Vitamins/minerals/herbs	21%	21%	23%
Prescription opioids	25%	30%	26%
Meditation	11%	12%	11%
Physical therapy or massage	10%	13%	13%
Medical marijuana	8%	13%	14%
Antidepressants	13%	14%	12%
CBD products	N/A	N/A	12%
Steroids	8%	15% B	11%
Acupuncture	4%	4%	3%
Other	3%	3%	4%
They have not used anything to help manage cancer-related pain, nausea, or other symptoms in the past 12 months	42% D	36%	31%
Not sure	5%	7%	10% B

[^]Note: “CBD Products” added as a response option in 2020 **115**



No Change in Ability to Access Opioids or Medical Marijuana Among Those Who Have/Had Cancer and Use Them

Have/Had Cancer

Trended Ever Had Difficulty Accessing Prescription Opioids and Medical Marijuana
(% Yes)

	2018 (B)	2019 (C)	2020 (D)
Prescription opioids	40%	37%	42%
Medical marijuana	48%*	56%	60%*

Trended How Well Medical Marijuana Manages Symptoms
(% Very/Somewhat Well)
Among those using medical marijuana

	2018 (B)	2019 (C)	2020 (D)
	93%*	98%	89%*

* Caution, small base size (n <100). Results should be interpreted as directional and stat testing not shown

BASE: HAVE HAD CANCER AND USING OPIOIDS (2018; n=157, 2019; n=191, 2020; n=104) OR MEDICAL MARIJUANA (2018; n=73*, 2019; n=118, 2020; n=58*)

Q5 You indicated that you have used the method(s) below to manage your cancer-related pain, nausea, or other symptoms in the past 12 months. Have you ever had difficulty accessing them?

BASE: HAVE HAD CANCER AND USING MEDICAL MARIJUANA (2018; n=73*, 2019; n=118, 2020; n=58*)

Q6 How well are your symptoms being managed by medical marijuana?