**SOCIODEMOGRAPHIC CORRELATES OF HEALTH LITERACY SKILLS AMONG PATIENTS AND SURVIVORS WITH CANCER: NATIONAL FINDINGS FROM BRFSS 2016**

***Purpose.*** Health literacy is a critical social determinant of health that affects the access to healthcare service and the quality of care received. Cancer patients with poor health literacy have more difficulties in understanding the risks and benefits of cancer treatment, utilizing health care services, and adhering to medication and treatment. Although health literacy level has been explored in the general population, it remains unknown how sociodemographic factors relate to cancer survivors’ health literacy. Thus, the purpose of the present study is to examine the prevalence of low health literacy skills among cancer survivors and the relationship between sociodemographic factors and health literacy to identify the literacy health disparities using a nationally representative sample.

***Methods:*** This secondary data analysis study used national-level data from the 2016 Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS health literacy module included three questions about difficulties in obtaining information, understanding oral information, and comprehending written information respectively. A categorical outcome variable was created to measure low health literacy skills by summing up these three dichotomous health literacy skill variables. Sociodemographic characteristic predictors included sex, age, race/ethnicity, marital status, education, employment and household income level. We used weighted Chi-square test and logistic regression to compare the difference in prevalence of low health literacy skills between cancer survivors and non-cancer survivors. Multiple logistic regressions were used to investigate the associations between sociodemographic factors and the three health literacy skills. Multinomial logistic regression analyses were conducted to examine sociodemographic variables with 1) three health literacy skills and 2) different levels of low health literacy. All analyses were conducted using Stata 17.

***Results.*** We found that about 4.7% of cancer survivors have difficulty in obtaining health information, lower than non-cancer survivors. About 8.5% of cancer survivors have difficulty in understanding oral information and about 8.7% of them have difficulty in comprehending written information, both higher than non-cancer survivors. Results from multiple regression analyses show that being male, younger, Hispanic, and other race/ethnicity, low education attainment and income were associated with higher odds of difficulties in obtaining health information, understanding oral information and comprehending written information. Results from multinomial logistic regression models indicated that the odds of having difficulties in one or two health literacy tasks vs. no difficulties were higher among cancer survivors who were aged 40-64 and unemployed. The odds of having difficulties in all three health literacy tasks vs. no difficulties were higher for those who were younger than 65, Hispanic, unemployed, with education levels lower than some college and had a household income under $25,000.

***Discussion.*** Findings confirmed that sex, age, race/ethnicity, socioeconomic status including income and education, are significant indicators of cancer patients’ health literacy skills. Oncology providers should pay attention to male, younger, Hispanic cancer survivors and survivors with lower socioeconomic status when navigating them through cancer-related information and service access. Future research should further explore health literacy skills and associated factors among Asian and Pacific Islander, American Natives and multiracial groups to understand their health literacy level and to better design tailored health communication materials accordingly.