

# Experiences of gynecological cancer among immigrant women in transcultural context: A meta-synthesis

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## INTRODUCTION

The increase in immigration worldwide has resulted in a growing number of immigrant women with gynecological cancer. These women face various challenges, including adapting to a new culture and language and coping with gynecological cancer. However, understanding their experiences of illness in a transcultural nursing context has been limited.

## OBJECTIVE

This qualitative synthesis aims to explore the lived experiences of immigrant women with gynecological cancer in a transcultural context.

## METHODS

- PubMed, CINAHL, PsycARTICLES, and EMBASE were searched for English-language articles published from the earliest available date in each database to November 2022.
- From 2,385 articles, those illustrating the experiences of immigrant women with gynecological cancer, including prevention, diagnosis, treatment, and recovery, within the culturally and linguistically diverse context were selected.
- Qualitative content analysis was conducted according to Peterson's methodological guidance, and Critical Appraisal Skills Programme was used to rate the quality of included articles.

## RESULTS

- From the initial 2,385 articles identified, five met the inclusion criteria and were selected for the meta-synthesis (Figure 1).
- Five selected studies encompass ethnically diverse breast/cervical cancer survivors including patients from Latino or the former Soviet Union. They aim to elucidate cultural influences, communication barriers, and decision-making processes, with the ultimate goal of enhancing cancer care and support services within the contexts of the United States and Israel (Table 1).

Figure 1. PRISMA flow diagram of screening process

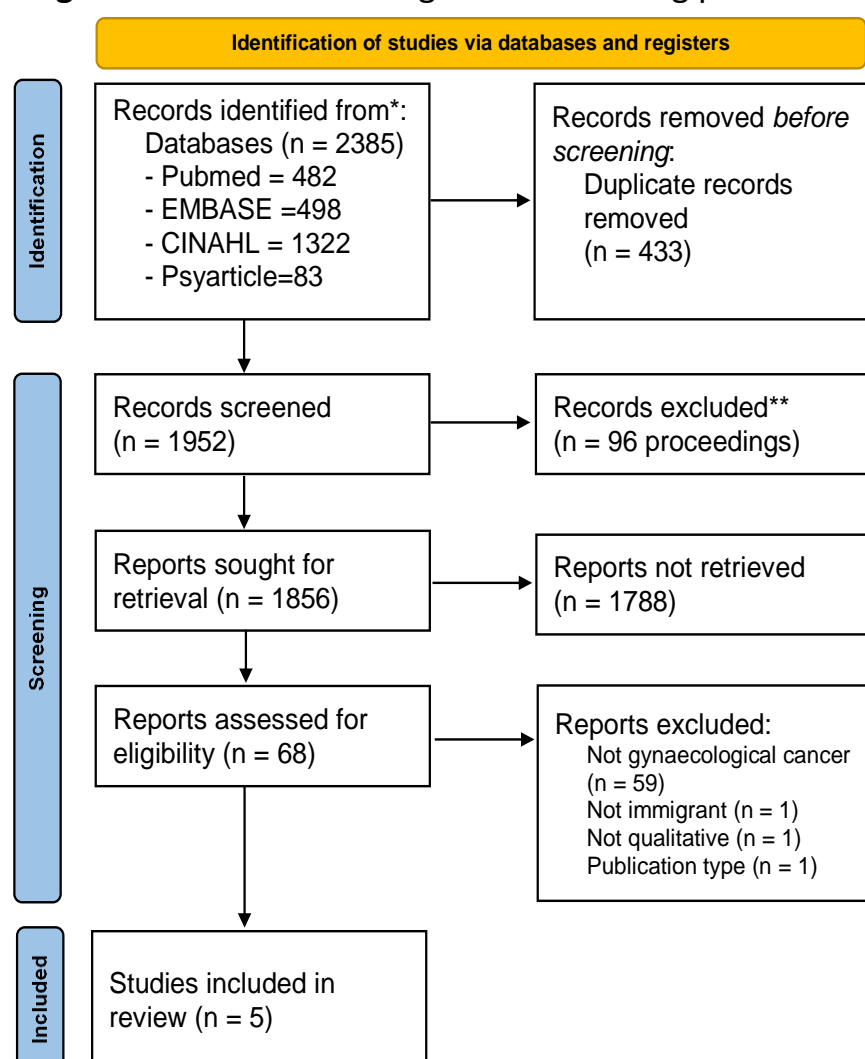


Table 1. Overview of Studies Included in the Meta-synthesis

Authors	Theoretical framework/ Analytic methods	Participants	Phase/ Setting	Current country of residence	Study aims
Formenti et al (1995)	Conventional content analysis	30 Latino patients with cervical cancer	under treatment/ acute setting	United States	Acquiring information on the adherence to radiotherapy
Glenn et al (2012)	Conventional content analysis	33 multiple Asian subgroups, African Americans, Latinas, and non-Latino Whites with breast or ovarian cancer	Survivor/ community	United States	To aware of breast cancer genetic testing and related factors of decision-making process for counseling and testing
Hunter (2005)	Ethnography	1 patient with cervical cancer from Iquitos	Survivor/ community	United States	To exemplify life in the context of a poor world region, how local realities shape women's health and illness behaviors related to cervical cancer
Mizrahi et al (2008)	Narrative approach/ holistic-content analytic strategy	8 patients with ovarian cancer from former Soviet Union	Survivor/ community	Israel	To describe the experience of Israel immigrant women's coping with ovarian cancer
Simon et al (2013)	inductive methodological approach	78 Filipino Patients with breast or cervical cancer	Survivor/ community	United States	To explore the social and cultural contexts of Filipinas' experiences with breast cancer

- Three major themes emerged: (1) Knowledge deficits and culturally embedded beliefs, (2) Communication and resources for adhering to treatment, and (3) Diverse disease burdens and outcomes based on approaches to illness.
- Addressing these complex aspects holds the potential to establish culturally responsive and equitable healthcare, leading to enhanced cancer outcomes and overall patient well-being within this demographic.

Table 2. Themes and Subthemes from Meta-synthesis of Immigrant Women's Gynecological Cancer Experiences

<b>(1) Knowledge deficits and culturally embedded beliefs</b>
Lack of awareness about advanced technologies
Concern on the stigma with genetic vulnerability
The culturally determined "breakpoint" of illness
Mistrust emerged among ethnic groups
Fate beliefs drives a desire to remain unaware of their future
<b>(2) Communication and resources for adhering to treatment</b>
A marked preference of language-concordant healthcare provider
Financial obstacles hinder access to expensive Western medicine
<b>(3) Diverse disease burdens and outcomes based on approaches to illness</b>
Social and physical barriers during and after treatment
Family support and individual stability make treatment easier

## CONCLUSIONS

The study explores immigrant women's experiences with gynecological cancer in transcultural contexts, shedding light on barriers and facilitators for timely and appropriate cancer care. Understanding these experiences can lead to culturally responsive, patient-centered care, improving cancer outcomes and reducing health disparities.

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