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Ethnicity and the prostate cancer experience: a qualitative metasynthesis

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Introduction

• Prostate cancer (PCa) is the most common invasive cancer in men in developed countries [1] and the 4th most common cancer worldwide [2].
• PCa incidence and survivorship figures and management pathways vary considerably with country, and between ethnic groups within countries, affecting the experiences of men with PCa.
• UK minority ethnic (BME) men with PCa express considerable dissatisfaction with care [3].
• Better understanding of the experiences of men with PCa from different ethnic groups is needed to improve satisfaction with health services and reduce inequalities.

Method

Using Noblit and Hare’s [4] approach to metasynthesis, we undertook the first systematic synthesis of the qualitative literature on the experiences of men with PCa that focused on:
• BME groups within regions with the highest prostate cancer incidence and survival figures (Northern and Western Europe, North America and Australasia),
• majority ethnicities in countries outside these regions.

Results

• We found 18 relevant studies; mostly quality was fair to good but themes reflected study aims and are unlikely to be a complete representation of cultural perspectives.
• 14 studies on men from US and UK BME groups provided 3 unique thematic constructs
• In 4 majority ethnic group studies (from Brazil, Israel and Turkey), some themes resembled those found worldwide, but others had cultural nuances in common with the BME studies.

Main themes

Themes similar across countries worldwide
- Emotions work and emotional resources
- Embodied vulnerabilities and reduced activities
- Valuing others and being valued: the strengths and challenges of close relationship bonds
- From the present a new future is shaped: taking control or being controlled

Culturally nuanced themes in Brazilian, Turkish and Israeli studies
- A lack of economic capital
- The male protector and disclosure strategies: harming and protecting the self and partners
- The continuum from life on earth to immortality
- The importance of community and social networks
- Trust in HCPs and the break down of trust
- Shifting masculinities and the impact of cultural differences in what it means to be a man

BME-specific themes
- Old and new discourses and the status of CAM*
- One more thing in the fight against adversity
- Men’s and partner’s places on the spiritual continuum from the will of God to God as a helpmate

*CAM = complementary and alternative medicine

Bars show the % of the 18 total papers contributing to the theme

Conclusions

Spirituality enabled BME men to transcend healthcare issues and inequalities and draw on networks of support. Disclosure strategies were affected by all main constructs. Healthcare for PCa should consider and harness men’s contextually and culturally specific coping mechanisms. More studies are needed in diverse ethnic groups.