Psychological Distress, Social Withdrawal, and Coping Following Receipt of an Abnormal Mammogram Among Different Ethnicities: A Mediation Model

Yamile Molina, PhD, Shirley A.A. Beresford, PhD, Noah Espinoza, MPH, and Beti Thompson, PhD

Breast cancer continues to be a leading cause of death for non-Latina Caucasian (NLC) and Latina women in the United States (American Cancer Society, 2012, 2014a). Although the incidence of breast cancer among Latinas is lower relative to NLC women, Latinas are more likely to be diagnosed at later stages (Lantz et al., 2006; Siegel, Naishadham, & Jemal, 2012) and die of diagnosed breast cancer (Jemal et al., 2004; Ooi, Martinez, & Li, 2011). Latina patients with breast cancer and survivors appear to have lower quality of life, including poorer emotional and social functioning, compared to NLC counterparts (Bickell et al., 2006; Fedewa, Ward, Stewart, & Edge, 2010). A large body of literature exists that has characterized and addressed modifiable factors associated with early detection of breast cancer, including promotion of mammography screening among Latinas (Guerra, Krumholz, & Shea, 2005; Molina, Thompson, Espinoza, & Ceballos, 2013; Purc-Stephenson & Gorey, 2008; Santiago-Rivera, Arrendondo, & Gallardo-Cooper, 2002). However, little research exists to date of quantified ethnic differences in mental health comorbidities after abnormal screening results. Psychological distress is particularly important among women who receive an abnormal mammogram result, given short- and long-term consequences related to early detection and the persistence of elevated distress as long as six months following receipt of results (Bond et al., 2013; Brewer, Salz, & Lillie, 2007; Hafslund, Espehaug, & Nortvedt, 2012; Keyzer-Dekker et al., 2012; Salz, Richman, & Brewer, 2010).

A large body of research has characterized elevated psychological distress and anxiety among women who receive an abnormal screening result, which requires further evaluation. Most research has focused on predominantly NLC women or has not addressed racial or ethnic differences (Andrèss-Hyman, Ortiz, Añez, Paris, & Davidson, 2006; Molina et al., 2013). Although the authors of the current article found no study that compared distress among Latinas and NLC women, one qualitative study with a largely Latina sample noted that psychological distress interfered with motivation to schedule a follow-up appointment (Allen, Shelton, Harden, & Goldman, 2008). A quantitative study found that fear of a cancer diagnosis was more strongly associated with delays in follow-up care adherence among Latina