

# Purposeful Interaction: Ways Latino Men Communicate About Prostate Cancer

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Communication about the diagnosis and treatment of prostate cancer is critical to shared informed decision-making. The need for communication is magnified by the uncertainty surrounding the survival benefit of mass prostate-specific antigen (PSA) screening for prostate cancer and definitive treatment for all early-stage prostate cancers. The need for information about prostate cancer risk, screening, and treatment is particularly relevant for men who are at higher risk for prostate cancer because they are a first-degree male relative (FDMR) of a man with prostate cancer (McDowell, Occhipinti, Gardiner, Baade, & Steginga, 2009). In reviewing literature on the prevalence and predictors of prostate cancer screening among FDMRs, investigators found that FDMRs had higher rates of prostate cancer screening and perceived themselves to be at higher risk than men who did not have a FDMR with prostate cancer (McDowell et al., 2009). However, FDMRs may not be aware of their risk status if they were never informed that a family member had prostate cancer. That lack of information can impair FDMRs' ability to fully participate in informed decision-making about screening. Communication about prostate cancer by men with prostate cancer is poorly understood, particularly among minority populations such as Latinos.

Much of the literature on cancer diagnosis disclosure addresses physician communication with patients and not patient disclosure to family and friends. However, in exploring gender differences in disclosing a cancer diagnosis to family and friends, the literature shows that men are more reluctant to disclose their diagnosis because of social expectations that perpetuate the myth that men are strong, stoic, and self-sufficient (Hilton, Emslie, Hunt, Chapple, & Ziebland, 2009). When considering ethnic differences in cancer communication, Papadopoulos and Lees (2004) found similarities in family communication regarding cancer

**Purpose/Objectives:** To develop a descriptive framework of the communication processes used by Latinos with prostate cancer to communicate about their diagnosis.

**Research Approach:** A constructivist grounded theory approach was used to analyze and build a descriptive framework from semistructured interviews.

**Setting:** A university-affiliated urban hospital in southern California.

**Participants:** 30 Latinos treated for prostate cancer, who had at least one first-degree male relative (FDMR), and who lived near the medical center.

**Methodologic Approach:** Semistructured interviews with bilingual Latinos were conducted in participants' homes in the language they preferred. Individual and collaborative analyses of translated transcripts were guided by constructivist grounded theory.

**Findings:** Analysis uncovered an overarching process of purposeful interacting. Components of the process included occasionally overlapping spheres of communication, which were connected to purposes and content. Balanced in and influenced by the spheres were cross-cutting processes of respectful silence and selective disclosure.

**Conclusions:** Men communicated different content about their prostate cancer to people representing different reference groups. Respectful silence and selective disclosure could be viewed as men's enactment of social interaction—using and choosing words based on the symbolic meaning the men perceived would have their intended meaning for the people in each of the spheres.

**Interpretation:** Culturally sensitive educational interventions should be targeted at Latinos with prostate cancer to understand risk and encourage disclosure to FDMRs.

diagnosis among ethnicities, with most restricting communications to the very immediate family. Ethnicities included in the study were Bangladeshi, Greek, Irish, Montserratian, Jamaican, and Caucasian English, (Papadopoulos & Lees, 2004). Two studies specifically investigated diagnosis disclosure among men with