An Ecologic Model for Identifying Coping Resources to Manage Psychological Distress Among Spanish-Speaking Latina Women Newly Diagnosed With Breast Cancer

Jasmine Santoyo-Olsson, MS, Anita L. Stewart, PhD, Carmen Ortiz, PhD, and Anna Maria Nápoles, PhD, MPH

OBJECTIVES: To examine associations of coping resources for psychological distress among newly diagnosed Spanish-speaking Latina women with breast cancer (LWBC).

SAMPLE & SETTING: Analyses used baseline data from a randomized controlled trial of a stress management intervention among 151 LWBC.

METHODS & VARIABLES: Dependent variables were health distress and anxiety. Coping resources at the intrapersonal, interpersonal, and organizational/ community levels were included.

RESULTS: At the intrapersonal level, self-efficacy for coping with breast cancer treatment was associated inversely with health distress and anxiety, and coping confidence with general problems was associated inversely with health distress. At the interpersonal level, having a sense of neighborhood cohesion was associated inversely with health distress. No organizational/community level resources were associated with health distress or anxiety.

IMPLICATIONS FOR NURSING: Interventions that enhance self-efficacy in coping and foster skills to identify sources of neighborhood support may decrease psychological distress for Spanish-speaking LWBC.

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mong Latina women, breast cancer is the most commonly diagnosed cancer type and is the leading cause of cancer-related death (American Cancer Society, 2021). Latina women are

more likely to be diagnosed with later-stage and more aggressive breast cancer and are less likely to receive appropriate and timely treatment than White women, independent of age, socioeconomic status, and method of diagnosis (American Cancer Society, 2021).

Latina women with breast cancer (LWBC) in the United States are at higher risk for psychological distress than other racial/ethnic groups, reporting higher rates of anxiety and depression and worse health-related quality of life (HRQOL) (Samuel et al., 2020). These psychosocial health disparities among Latina cancer survivors may be attributable, in part, to the availability and use of coping resources to manage stressful events, such as a breast cancer diagnosis (Dean et al., 2018; Williams et al., 2016).

Coping is the process of attempting to manage the demands created by stressful events that are appraised as taxing or exceeding an individual's resources (Lazarus & Folkman, 1984). Coping resources, such as a sense of mastery, self-esteem, and social support (Taylor & Stanton, 2007), affect coping processes. Coping resources can directly affect psychological and physical health during primary treatment and further along the cancer care continuum. Action-oriented or intrapsychic coping resources improve the ability to manage stressful events (Taylor & Stanton, 2007) and decrease psychological distress (Henselmans et al., 2010). The few studies that have examined coping resources among LWBC focus on English-speaking