

# 2026 ANNUAL MEETING



**Poster 56:** Quality of cancer care among Spanish speaking patients and families: perspectives on language access, relational care, community networks, and system gaps

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Topic

Quality & Healthcare Systems

Objectives

Disparities in cancer care are exacerbated by communication barriers. The purpose of this study is to identify intervention targets to improve care for patients with cancer using a language other than English (LOE) and their family members.

Methods

Qualitative semi-structured interviews, in-person and via HIPAA-compliant Zoom videoconference were conducted in the participant's primary preferred language. The study population consisted of Spanish-speaking patients with cancer and their family members. Materials were co-developed with community members and clinicians. Snowball and purposive sampling strategies were applied to improve the recruitment of participants and variation of demographics. Eligibility was confirmed by phone calls. Demographic data was collected upon verbal informed consent. The interview guide was modeled after Kilbourne et al.'s conceptual framework, from literature review, and discussion with a multi-disciplinary group and Spanish-speaking community members with lived experience related to cancer, to explore modifiable multi-level barriers. All conversations were recorded, translated, and transcribed verbatim. Each transcription was de-identified and reviewed for accuracy manually. Thematic analysis by Braune and Clarke was applied and global themes were identified.

Results

Sixteen participants were interviewed: 9 adult patients and 7 family members. Four themes emerged. 1) Language access shaped understanding and cancer care navigation: participants preferred in-person interpreters. 2) Relational care and interpersonal respect were critical to trust conversely, moments of disrespect created lasting harm. 3) Community networks were essential for coping and logistics: care was collectivist. 4) Structural and system barriers created distress: participants routinely faced obstacles including lack of interpreter availability at critical times.

Conclusions

Adult patients with cancer using a LOE and their family members identified language access, relational care, social support networks, and healthcare system gaps as key domains influencing cancer care experiences, suggesting several potential targets for interventions to improve care delivery.

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Abstract Table or Graph

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