Psychosocial Outcomes in First-Generation Immigrant Cancer Patients in Australia

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Aims: With immigration rising, a common challenge faced by multicultural countries is to optimally manage immigrants' health-care needs to reduce disparity in outcomes and patient experience. This study compared the level of psychological morbidity and quality of life (OoL) in immigrant and Australian-born, English speaking cancer patients.

Methods: A cross-sectional study was conducted with cancer patients recruited through 16 oncology clinics across three states in Australia. Participants were born in a country where Chinese, Greek or Arabic is spoken, and a control group of Australian-born English-speaking patients. All were diagnosed and treated with cancer within the last 12 months. Questionnaires (completed in preferred language) assessed anxiety and depression (HADS, range 0–14) and QoL (FACT-G, range 0–100). Clinical data were collected from hospital records.

Results: 856 of 1409 eligible patients (572 immigrants and 284 Anglo-Australians) participated (response rate = 61%). After adjusting for age, gender, education, socio-economic status, marital status, cancer type, staging and treatment, immigrants had clinically significant higher anxiety (OR 2.07, 95% CI: 1.29, 3.31) and depression (OR 3.69, 95% CI: 2.15, 6.34), and poorer QoL (mean difference 5.71, 95% CI: 3.22, 8.20) than their Anglo-Australian counterparts. Many immigrants reported difficulties understanding English (45%); understanding the health system (38%) and communicating with their doctor (73%). Problems understanding the health system predicted anxiety (1.2, 95% CI: 0.3, 2.0; P = 0.007), depression (0.9, 95% CI: 0.04, 1.8; p = 0.04) and QoL (1.3, 95% CI: 1.3, 7.6; p = 0.006); difficulties understanding English predicted anxiety (1.5, 95% CI: 0.5, 2.4; p = 0.003) and depression (1.1, 95% CI: 0.1, 2.1; p = 0.03); difficulties communicating with doctors predicted QoL (−3.6, 95% CI: −7.0, −0.1; p = 0.04).

Conclusions: These documented disparities in immigrant outcomes warrant psychosocial intervention. Results highlighted areas of immigrant-specific need (support in navigating the health system and communication of information) that may be best addressed at a system level. While the study was conducted with immigrants in Australia, immigrants may face the same challenges globally.