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Title

Developing PRISM-Spanish: A psychosocial skills-based intervention for Spanish-speaking adolescents and young adults with cancer

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The data associated with this publication are not available for this reason: N/A



and young adults with cancer



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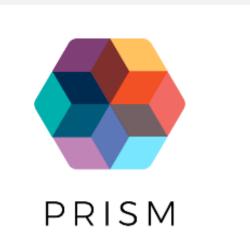
BACKGROUND

Adolescents and young adults (AYAs; 12-25 years old) with cancer are at high risk for elevated distress and poorer mental health outcomes than their peers. 1,2 Studies have shown that, in particular, Spanish-speaking Latinos with cancer are at risk for increased psychosocial burden, lower quality of life, and higher depressive symptoms when compared to their non-Latino counterparts. 3,4 Despite this, a systemic review of the literature finds a severe lack of interventional studies being conducted among Hispanic/Latinx cancer patients and survivors. 2

PRISM (Promoting Resilience in Stress Management) is an intervention built on the premise that promoting resilience resources will reduce distress and improve outcomes.^{5,6} However, its efficacy has only been tested in English-speaking populations.

Studies show that translating a psychosocial intervention without considering key cultural differences will inevitably be ineffective.⁷

The aim of this study is to lay the groundwork for an adaptation of the PRISM intervention for a Spanish-speaking population with an emphasis on promoting engagement and accessibility. In the literature, this process is called cultural attunement.⁸ We will focus on the first PRISM module – "Stress Management".



OBJECTIVES

- 1) Assess the Spanish translation of the PRISM intervention module "Stress Management" with community input from native/fluent Spanish speakers via think-aloud interviews.
- 2) Create recommendations for a full-scale Spanishlanguage cultural adaptation of the entire PRISM intervention.

Professional translation Recruit native Spanish speakers Think-aloud interviews analysis Qualititative analysis

Professional Translation: The "Stress Management" module was professionally translated by UC Davis Health Translation Services.

Participants	n
Sex	
Male	4
Female	5
Self-identified background	
Argentine	3
Latina	1
Peruvian	1
Colombian	1
Salvadoran	1
Mexican	1
Mexican-American	1
Median age of participants: 28	

"Stress
Management"
module exercises
Deep Breathing
Square Breathing
Visualization
Mindfulness

Think-aloud Interviews: The intervention script was divided up into segments. For each segment, the interviewer first administered the validated English-language version. Participants then read through the Spanish-language translation and engaged in a think-aloud protocol, detailing their thoughts and responses as they read along. Each segment concluded with standardized questions.

Qualitative Analysis: Interview recordings were reviewed for thematic analysis.

After doing this exercise in English, do you anticipate any difficulties bringing it to Spanish?

Do you feel the description of the exercise in Spanish is as effective as the English?

Have you heard of mindfulness in English? Have you heard of it in Spanish?

Is there any term that approximates the concept of mindfulness in Spanish?

Example interview questions

RESULTS

Themes identified

An unmet need

Clarity and relatability

"Atencion Plena"

Religion

Rapport

Taking a step back

Verifying the unmet need for a Spanish language intervention

 All 9 participants had heard of deep breathing and mindfulness in English, but none had previously been presented these concepts in Spanish

Professional translation mostly retains clarity, but relatability is lost in translation

"Atención Plena" was an adequate and accurate Spanish-language translation for "mindfulness"

Importance of religion for stress management in participant cultures

Rapport with the interventionist is crucial

Taking a step back before the intervention

 Participants wanted more time to talk about stressors and build rapport prior to beginning the exercises

CONCLUSION

Several major themes emerged for facilitating the cultural adaption of PRISM to the Spanish language. A professional translation was successful at retaining clarity, but not relatability. To this end, professional translations should be adjusted by community members to reflect the intentions of the original exercises and maximize engagement. All participants had limited knowledge of stress management in Spanish, but they found that clear descriptions and capable interventionists were more important to engagement than previous familiarity with concepts.

The next steps toward a cultural adaptation of PRISM are 1) professionally translate all PRISM modules, 2) enlist community members to review each translation to maximize both clarity and relatability, and 3) perform think-aloud interviews with Spanish speaking AYAs with cancer. Consideration should be given to developing modules for building rapport and discussing religion.

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