ecancer

Supporting oncology professionals through education

Conference Abstract

London Global Cancer Week 2025

24 - 28 Nov 2025

London, United Kingdom of Great Britain and Northern Ireland

Exploring supportive cancer care disparities among ethnic Chinese immigrants in Scotland: insights from a mixed methods study

21 Feb 2026

Authors and Affiliations

Lin Cheng[1], Grigorios Kotronoulas[1], Deborah Cairns[2], Wai-Pang Sham[3]

1. School of Medicine, Dentistry and Nursing, University of Glasgow, Glasgow, UK
2. School of Health and Wellbeing, University of Glasgow, Glasgow, UK
3. Chief Executive, Chinese Association for Cancer Care, London, UK

Background

Ethnic Chinese immigrants, one of the fastest growing minority groups, face language, cultural, and health care system navigation barriers to cancer care. Despite Scotland's new 10-year cancer strategy (2023-2033) prioritising equity, this population remains underrepresented in research. This mixed methods study explored their well being, unmet needs, and care experiences to inform culturally sensitive supportive care.

Methods

As the first two phases of a larger PhD project guided by patient-centred care theory, this study used convenience, purposive, and snowballing sampling methods. Phase 1 involved a cross-sectional online survey using the Functional Assessment of Cancer Therapy – General (FACT-G) for patients and the FACT-G Caregiver for caregivers, supplemented by the Supportive Care Needs Survey–Short Form 34 (SCNS-SF34) for patients. Descriptive analyses were conducted. In

Phase 2, semi-structured interviews with patients and caregivers were undertaken, using inductive and relativist thematic analysis.

Results

Between November 2023 and June 2024, twenty-four patients and thirteen caregivers completed the survey. Caregivers reported lower overall wellbeing than patients, particularly in the social, emotional, and functional domains. Fear of cancer progression was a common problem among both groups. Additionally, 62.5% of patients reported unmet information needs, followed by 50% psychological concerns. Interviews were undertaken with six patients and five caregivers. The shared disruptions were the presence of cultural taboos that encouraged secrecy and silence around the topic of cancer, and heavy burden of managing cancer care without extended family support. Participants highlighted the need for bilingual written resources provided by hospitals and culturally aligned peer support to meet informational and emotional needs.

Conclusion

The dual challenges of cancer and migration compound vulnerabilities and deepen health inequalities. Addressing unmet informational and psychological needs, supporting caregivers, and integrating culturally sensitive, co-designed interventions are vital to advancing accessible and equitable cancer care.