Everyday Discrimination and its Effects on Domains of Health-Related Quality of Life Among Women with Breast Cancer

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Background:

Structural determinants of health, such as **discrimination experiences, decrease the quality of life (QoL) and survival rates of people with cancer.** However, the impact of discrimination on the QoL of women with breast cancer is largely unexplored. Additionally, there is a **lack of research analyzing how different types of discrimination influence health** outcomes among breast cancer survivors.

Aims:

➢ To investigate the associations between everyday discrimination and QoL subdomains among breast cancer survivors.
➢ To examine whether sexism (a type of discrimination), differentially impacts QoL subdomains.

Methods:

➢ Design: Secondary analysis from two studies analyzing cognitive functioning among women diagnosed breast cancer.
➢ Measurement: We assessed **cognitive, physical, social, emotional, and functional QoL** domains (FACT-G) and **frequency of discrimination acts in sociocultural settings** (EDS).
  ✓ Participants indicated the perceived reason for discriminatory acts, and we categorized them as: **Sexism +**, **Non-Sexist Discrimination**, and **No Discrimination**.
➢ Analysis: We **examined associations** between EDS and FACT-G domains and **assessed group differences** for domains that **remained significant post-correction**. Analyses were conducted in RStudio. Alpha was set at p < 0.05.

Results:

A total of **180 breast cancer survivors** were included in the analysis. Participants had a mean age of **51.1 years** and were predominantly **non-Hispanic (87.2%), White (78.9%), partnered (68.7%), and educated** (mean education years= 16.8). The majority were diagnosed with early-stage breast cancer (**stages 0-III: 71.1%**), and received surgery (88.3%), radiotherapy (71.7%), chemotherapy (65.6%), and hormonal therapy (66.1%).

EDS and FACT-G domains were weakly associated (-0.30 < *r* < -0.20, p < 0.01). The **difference in QoL domain scores across groups was statistically significant** (10.69 < χ2 < 22.28, p < 0.01). The **No Discrimination** group had **significantly higher QoL scores** than the **Sexism +** and **Non-Sexist Discrimination** groups across domains.

Quality of life Domain	No Discrimination	Sexism +	Non-Sexist Discrimination
Cognitive	12.20 (3.60)[ab]	9.33 (5.05)[a]	10.15 (4.50)[b]
Physical	23.16 (4.04)[ab]	19.63 (5.53)[a]	19.72 (5.10)[b]
Social	21.56(4.87)[ab]	18.63 (5.65)[a]	18.59 (6.03)[b]
Emotional	18.80 (3.94)[a]	16.72 (4.06)[a]	17.23 (4.16)
Functional	20.59 (4.89)[ab]	17.58 (5.43)[a]	16.92 (5.58)[b]

Values sharing the same letter superscript are significantly different from each other.

Conclusions:

Although we did not observe differences between the two groups referring discrimination experiences, both **sexist and non-sexist discrimination groups had significantly lower QoL scores than breast cancer survivors not experiencing discrimination.** Further research with advanced classification techniques (e.g., cluster or latent class analyses) might better capture heterogeneity in experiences and **identify distinct discrimination profiles, which may guide person-centered care**.

Implications for practice:

➢ Recognizing the i**nfluence of social contexts beyond clinical settings** is essential to providing holistic care for breast cancer survivors.
➢ Analyzing the unique contributions of specific forms of discrimination can provide insights into the complex and domain-specific relationships between discriminatory experiences and health outcomes.

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