

**AWARD FOR BEST RESEARCH PRESENTATION AT THE WCMSR ORIGINAL RESEARCH BASED ON JUDGE SCORE, 1<sup>st</sup> PLACE:****22. THE ROLE OF LANGUAGE CONCORDANT CARE ON INCREASING PARENTAL ENGAGEMENT IN SHARED DECISION MAKING**

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 <https://www.youtube.com/watch?v=vlsNiqV1-28&t=24160s>

**BACKGROUND:** Shared decision making (SDM) allows patients and physicians to make decisions together by incorporating clinical expertise and patient preference. While SDM can improve patient satisfaction, preferences on the extent of involvement in SDM vary, particularly among different cultures and languages. We sought to describe preferences in decision making and degree of SDM among Spanish-speaking caregivers receiving pediatric Otolaryngology care. We hypothesized that language-concordant encounters would have higher SDM scores. **METHODS:** A cross-sectional study of Spanish-speaking caregivers undergoing consultation with pediatric otolaryngology was performed (May-August 2022). Care was provided in a language-concordant (LC) setting in which the physician and caregiver communicate in Spanish, or a language-discordant (LD) setting in which the physician communicates with interpreter support. Following their appointment, caregivers were invited to complete the Spanish Control Preferences Scale (CPS, select 2 of 5 options) to determine their two most preferred roles in medical decision making, and the Shared Decision-Making Questionnaire (SDM-Q-9; scored 0-100) to assess perceived SDM. Descriptive statistics, Fisher's exact and the Mann-Whitney U test were used for analysis. **RESULTS:** Sixty-one caregivers were enrolled. CPS scores revealed the passive-collaborative medical decision making role was the most favored (59%), followed by an active-collaborative role (26%), and passive role (13%). Median SDM-Q-9 score for all caregivers was 100.00 (mean=93.70). The median SDM-Q-9 score was 100 in LC visits, and 97.78 in LD visits ( $p = 0.428$ ). No differences in SDM-Q-9 scores were detected for CPS categories between LC and LD visits. **CONCLUSION:** High levels of SDM were observed among Spanish-speaking caregivers using both LC and LD care. Most caregivers preferred a passive-collaborative role in medical decision making. Results may be influenced by positive response bias given the high scores observed. Further studies with larger sample sizes can further our understanding of the impact of LC care in SDM.

**Key words:** Shared Decision Making; Pediatric Otolaryngology; Language Concordant Care (Source: MeSH-NLM).