

# Restructuring relationships in cancer survivorship: changes in social support and engagement with self-management practices

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# **Background to study**



- Social support (SS): mechanism for promoting positive attitudes towards health and lifestyle; benefits mental and physical health (Greenglass, 1993)
- Cancer survivors with good SS more motivated to undertake selfmanagement (SM) behaviours and make lifestyle changes
- SM can improve quality of life and slow disease impairment
- Impact of SS changes over time on health and recovery of cancer survivors has not been explored

## **Aims of study**



- To examine how temporal changes in SS offered to cancer survivors influences engagement with SM practices and adaptation to lifestyle changes.
- To identify, from cancer survivors' perspectives:
- a) changes experienced in relationships with family and friends
- b) types of SM used to enhance health and well-being in the face of a major life event
- c) perceived links between SS and SM

Some relationship changes familiar to cancer nurses, who hear patients' stories daily. Stories have not previously documented or analysed systematically, or developed into a coherent, evidence-based model.



# **Study design**

- Mixed methods study (Shneerson, 2015; Henshall, 2016).
- Survey types and patterns of SM practices (diet, exercise, complementary and alternative medicine, psychological therapies, spirituality/religion, support groups) altered over time; utilised most in survivorship (Shneerson, 2015).
- Interviews type of SM used influenced by SS accessed (Henshall, 2016).
- Interrogated qualitative dataset: explored how cancer survivors' changing relationships influenced desire to self-manage.
- Theoretical framework: development of 'ideal types' (Psathas, 2010) grouping together different relationships.
- Links between perceived SS and health and lifestyle outlooks.



#### **Ideal Types: A Theoretical Framework**

- Development of 'ideal types' (Psathas, 2010): identify how participants' lived experiences fit into social constructs relating to restructuring of relationships postcancer
- Comparisons drawn between ideal types and ability to self-manage in survivorship
- Cancer survivors may identify with a range of ideal types, depending on the relationships they engage with over time
- Allows understanding of changes to social relationships caused by cancer, and its impact on peoples' outlooks and SM abilities



#### Setting, access and recruitment

- Large teaching hospital, West Midlands, UK.
- Ethical approval, local research ethics committee, Feb 2012 (Study protocol number RG\_11-175, REC reference 12/WM/0030).
- Interview sample selected from survey population (n=445), using purposive sampling: cancer type, age, gender, ethnicity, SM patterns.
- Forty people participated.
- Interviews digitally recorded and transcribed.
- Thematic analysis (Ritchie, 2003)



#### **Participant demographics**

- Ages: 36 82 years (mean = 61yrs).
- Ethnicities: White (n=28), Black (n=7)' South Asian (n=5)
- 22 women and 18 men were sampled.
- Religions: Christian (n=23), Muslim (n=2), Sikh (n=2), Hindu (n=1), Jewish (n=1), Buddhist (n=1) and no religion (n=10).



### **Findings**

Strong links between support from families/friends and outlook post-cancer.

Six ideal types identified:

- 1) Continuation of positive relationships
- 2) Improvement of existing relationships
- 3) Strain on existing relationships
- 4) Termination of negative relationships
- 5) Formation of new relationships
- 6) Failure to form or maintain new relationships



# 1) The Continuation of Positive Existing Relationships

 Consistently good SS led to positive outlooks post-cancer. Heightened perspective influenced SM choices - gardening, Reiki, meditation raised self-awareness.

'I love [gardening], whereas at one time I wasn't that bothered...You suddenly realize, you watch every little bud...that...starts sprouting up...Watching it grow and thinking oh this is what life's about...It changed my outlook. It's amazing what you can survive and what you can cope with when you have to.' (SS1207)

Where cancer had brought families closer, participants reassured they could cope and engage with SM:

'They started giving me encouragement...So then I joined...a leisure club, so I'm doing light exercise. Walking, cycling, swimming.' (SS1497)



#### 2) The Improvement of Existing Relationships

Living through cancer reasserted emotional value of people central to their lives.

'We'd been separated about eight...months and...I said I've got a lump...He said I'll take you to the doctors...A year after my cancer treatment I said look we've had enough rubbish...Shall we get married again...That sort of marked the end of the – the year of treatment.' (SS1207)

One woman spoke more with her ex-husband since diagnosis; reciprocal SM support.

'My husband and I had been separated for two years, when we were actually both diagnosed with cancer...We began to talk more...Exchange information about anything...Or his concerns...I shall send him the information about...What I have here [herbal remedy].' (SS1674)



#### 3) Strain on Existing Relationships

 Relationships negatively affected by cancer and guilt of partner as care-giver. Psychological therapies an outlet.

'She wants to get out a bit more...I think she's fed up of coming with me to the hospitals...I don't blame her... I'm going for some well-being counselling...The small things were getting - you know all these pressures...' (SS1772)

Lack of emotional support led to isolation, resentment and distance.

'I was able to talk to my husband about [my cancer, but now he] ...blocks it out...assumes it's never going to come back ... [Counselling] wasn't offered, and I never really thought to ask...It might have been helpful' (SS1687)



#### 4) The Formation of New Relationships

 New relationships with cancer survivors through shared experiences; support groups beneficial. However, often unaware of support groups.

'Having my friend, who has gone through cancer...I'm able to reflect with her...And now she helps me...Which is brilliant...If...I'd been given...some people to hook into...I may have got to the point I am now a couple of years ago.' (SS1178)

Easier to form relationships with people hadn't known before cancer; seen in own right.
 Altered SM to reflect new relationships.

'We bought a caravan in Paignton, and I've met friends there. They phone me up...Not to see how I am because of my illness, just how I am... [My] quality of life now is fantastic...We can be down there...We're on Dartmoor within 10 minutes.' (SS1788)



#### 5) The Termination of Negative Relationships

Some friends distant since diagnosis.

'Some friends did have difficulty with it. There was one particular...couple that lived by us that were very, very friendly with us...He never spoke to me for two years. He didn't know what to say. He used to cross the road ...Anyway that was that.' (SS1025)

 Social activities limited due to feeling excluded. Solitary therapeutic activities - walking, swimming, cycling, tai-chi, yoga - reduced anxiety.

'When I had cancer there was a few people...that I thought would ring me...and didn't. That's upsetting...I have really nothing to do with [those] people. It has made me a bit stronger – you see that other people wouldn't be bothered whether you were dead and you think, 'Well, sod them'. I can find [walking] therapeutic 'cause I can get anxious...I just find it helps.' (SS1892)



# 6) The Failure to Form or Maintain Relationships

Those with weak or absent social networks displayed negative outlooks

'I was always happy go lucky and...thought I wouldn't retire I would just keep on going...Be in good health...and retire about probably 70, around about that. Now I have no future, I don't know whether I'm going to go tomorrow...that's it...Every day is a different day.' (SS1004)

Those with little SS, less inclined to engage with SM.

'The family's non-existent really... I'm on my own a lot...She [sister] never came to see me when I'd had that cancer... She never got in touch...I haven't looked after myself because I haven't had the energy.' (SS1892)

Cancer could enforce negative social changes, due to physical side-effects.

'Before I probably would have went dancing with you, I'm telling you, I was...I had a great life...[Now] I don't go out...What can I do if I go out?...I can't drink, I can't eat...A lot of people won't eat or drink in front of me because they know that I can't eat or drink.' (SS1004)



Table 1: Typologies of How Cancer Survivors' Restructure Social Relationships with Family and Friends Following a Cancer Diagnosis: Perspectives of Interview Participants

Continuation of	Improvement of Existing	Strain on Existing	Termination of Negative	Formation of New	Failure to Form or
Positive Existing	Relationships	Relationships	Relationships	Relationships	Maintain Relationships
Relationships	Relativastips	readousarps	Kumuvasaips	recautousurps	Managara Resaucasarps
Cancer reaffirms importance and strength of relationship Consistent and increased emotional, practical and informational support provided  'Close knit' relationships maintained  Draw strength from relationships, enabling an ability to look to the future  Treated the 'same as before cancer'  Ability to maintain social life and engage in selfmanagement activities	Reassessment of priorities and values  Increased emotional, practical and informational support provided  Provision of support that was absent prior to cancer  Enforced changes to social life impact on relationships  Increased ability to talk more openly	Emergence of carer/caregiver roles and guilt at being a burden     Enforced changes to social life impact on relationships     Distancing of friends and family due to lack of emotional support and failure to acknowledge cancer	Acknowledgment of decreased validity and meaningfulness of relationship  Distancing of friends and family due to lack of emotional support and failure to acknowledge cancer  Reassessment of priorities and values  Flaws and weaknesses of relationship clarified  Clarification of what is wanted from relationship  Resilience and determination to 'get on with life'	Seeking of peer support (one to one or through support groups)  Desire to share experiences with others with cancer  Lack of comparisons made to precancer self  Reassessment of priorities and values postcancer  Recognition of need for emotional support	Diminished confidence in mind and body  Sense of increased vulnerability, decreased self-esteem and lack of hope  Increased social isolation and decreased self-management uptake due to physical limitations  Absence of practical, emotional or informational support  Wary of entering relationships as cancer seen as a deterrent and burden to others

**.**‡.



#### **Discussion**

- Changing relationships can impact on health outlook and wellbeing, shaping the way cancer
  is experienced within wider life context.
- Participants who maintained good relationships retained positive outlooks. Those with weak, or absent SS, less likely to engage with SM, due to decreased self-efficacy.
- SS can enhance capacity for SM, boosting social interactions/self-efficacy: increased SS generated.

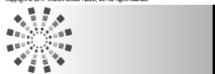


#### **Conclusion**

- Nursing scholarship: theoretical approach utilized in practice to explore which relationship changes patients are going through. Framework for patient-centred discussions and coproduction of tailored SM plans.
- Nurses should assess patients' SS, which may impact on suitability of SM practice.
- Important for Primary Care nurses caring for cancer survivors making transition from patient to survivor, who need to be equipped with skills to assess and guide them.



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#### Typologies for Restructuring Relationships in Cancer Survivorship

Temporal Changes in Social Support and Engagement With Self-Management Practices

K E Y W O R D S Self-management Social support Survivoship Background: Cancer survivors with good social support are generally more motivated to undertake self-management behaviors and make lifestyle changes. However, the impact of changes in social support over time, from prediagnosis through treatment and into survivorship, on the health and recovery of cancer survivors with a range of cancer diagnoses has not been explored. **Objective:** The aim of this study was to examine how temporal changes in social support offered to cancer survivors by family and friends influence their engagement with self-management practices and adaptation to lifestyle changes. Methods: The interview study took place in a teaching hospital in the West Midlands, United Kingdom. Forty participants were purposively sampled. A narrative approach to data collection was chosen, and data were thematically analyzed. Results: Six typologies of restructuring relationships postcancer were identified. A greater understanding of the changes to social relationships that a concer diagnosis can incur and the impact of this on people's outbook and ability to self-manage was developed. Conclusion: The restructuring of social relationships by cancer survivors over time can impact their outlook and ability to self-manage in survivorship, shaping their engagement with health promoting activities and reconciling concer within the wider context of their lives. Implications for Practice: Appropriate dinical nursing processes and tailored interventions are

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Thank you for listening!

Any questions?

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