



Facilitating Hope in Patients With Cancer

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Factors Associated With Hope

Rustoen, T., & Wiklund, I. (2000). Hope in newly diagnosed patients with cancer. *Cancer Nursing*, 23, 214–219.

Study Summary

The purpose of this study was to describe the level of hope in 131 patients recently diagnosed with cancer. Participants completed a demographic questionnaire, two quality-of-life questionnaires, and the Nowotny Hope Scale. The Nowotny Hope Scale provides a global hope score and a score for each of its six subscales: confidence, relates to others, a future is possible, spiritual beliefs, active involvement, and comes from within. The majority of the participants were female (76%); had fewer than 12 years of education (57%); lived with a spouse, another adult, their parents, or children (74%); had received their cancer diagnosis within the past eight months (91%); and were not receiving any cancer treatment at the time of the study (61%). Cancer types included breast, prostate, colon, and gynecologic. Results indicated that participants felt hopeful or moderately hopeful (87%), with only 8% indicating a low level of hope. Participants living with someone reported a significantly higher level of hope than those living alone. Older participants (aged 60–78) scored significantly higher on the spiritual beliefs subscale than middle-aged participants (aged 40–59). Participants with colon and breast cancer and those with fewer than 12 years of education had a higher level of hope on the comes from within subscale. Multiple regression analysis found that living alone had a significant effect on global hope. Gender, time since diagnosis, and treatment did not affect global hope or any of the global subscales.

Application to Patient Care

- The majority of the study participants reported feeling hopeful or moderately hopeful.

Traditionally, receiving a cancer diagnosis is perceived as devastating news for individuals and can elicit feelings of shock, fear, disbelief, anger, and depression. However, the results of this study indicated that patients reported feeling hopeful when faced with a cancer diagnosis. Oncology nurses should explore feelings and emotions with patients who are newly diagnosed with cancer to assess the patients' perspectives. Patients who are given honest, thorough information about their diagnosis, treatment, and prognosis will be educated about their disease and, subsequently, will be able to make a personal choice regarding their level of hope.

- The majority of the study participants were not receiving treatment at the time of the study.

Many factors can affect patients' levels of hope. In addition, hope is dynamic and can change from day to day. Patients receiving treatment may experience side effects, especially fatigue, that could result in a lower level of hope. Other factors that could have an impact on patients' levels of hope are age, type of cancer, stage of disease, living arrangements, finances, social support, employment, or coping skills. Oncology nurses should assess these factors and treatment side effects to identify issues that may be additional stressors for patients. Appropriate patient support and referral can be made when necessary. Nurses also should encourage open discussion with patients regarding their level of hope.

- Study findings suggested that participants living alone had significantly lower levels of hope than those living with someone. This effect was greatest for younger participants aged 19–39.

Receiving a cancer diagnosis may be more difficult for patients who are younger because of the developmental tasks occurring at this age, such as the formation of life goals, relationships, and careers. Oncology nurses should explore living arrangements and support systems for all patients; however, younger individuals who are living alone may

be at risk for lower levels of hope because of the existence of newly formed adult relationships or the lack of social support. This may necessitate the provision of information regarding local support services, such as the American Cancer Society and support groups. Younger patients also may benefit from speaking with people of similar age who have gone through the same experience.

Strategies That Foster Hope

Saleh, U.S., & Brockopp, D.Y. (2001). Hope among patients with cancer hospitalized for bone marrow transplantation: A phenomenologic study. *Cancer Nursing*, 24, 308–314.

Study Summary

The purpose of this phenomenologic study was to describe the concept of hope in patients prior to undergoing a bone marrow transplant (BMT). Interviews were conducted with the participants (N = 9) for 60–90 minutes to explore the following questions: (a) What does having a sense of hope mean to you? (b) What things do you do personally that give you hope? (c) What inner resources do you draw upon for hope? and (d) Who in your family contributes to your hope and how do they help? Participants had been diagnosed with breast cancer, acute and chronic myelocytic leukemia, non-Hodgkin's lymphoma, and multiple myeloma. Participants ranged in age from 20–79 years. Six major themes emerged from the data analysis: feeling connected with God, affirming relationships, staying positive, anticipating survival, living in the present, and fostering ongoing accomplishment. Participants described feeling

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