

Satisfaction With Telehealth for Cancer Support Groups in Rural American Indian and Alaska Native Communities

Ardith Z. Doorenbos, PhD, RN, FAAN, Linda H. Eaton, MN, RN, AOCN®, Emily Haozous, PhD, RN, Cara Towle, RN, MSN, Laura Revels, BA, and Dedra Buchwald, MD

A descriptive study was conducted to determine the information needs of American Indian (AI) and Alaska Native (AN) cancer survivors and assess satisfaction with and acceptability of telehealth support group services for cancer survivors in AI and AN rural communities. AI and AN cancer survivors were asked to complete the Telehealth Satisfaction Survey and two open-ended questions, one regarding information needs and one seeking comments and suggestions about cancer support group meetings. Thirty-two surveys were returned. Information about nutrition during treatment and treatment-related side effects were the most sought after topics. Participants valued the opportunity to interact with other AI and AN cancer survivors who also lived in remote locations and the usefulness of the information presented. The link with geographically distant survivors was valuable to participants as they felt they were no longer alone in their cancer experiences. Determining survivors' information needs provides meaningful topics for future support group education. Telehealth is a viable way to facilitate cancer support groups to AI and AN cancer survivors in rural communities.

Support groups for people with cancer are a well-documented, evidence-based intervention for dealing with the psychological effects of a cancer diagnosis and treatment and for providing information for follow-up care (Andersen, 2002; Classen et al., 2001; Dolbeault et al., 2009; Fobair et al., 2002; Gottlieb & Wachala, 2007). Support group participants report gaining a sense of community and unconditional acceptance in addition to receiving information about their cancer, treatment, and self-care (Ussher, Kirsten, Butow, & Sandoval, 2006). However, support groups for people with cancer often are not available in rural areas, particularly in rural American Indian (AI) and Alaska Native (AN) communities (U.S. Department of Health and Social Services, 2006). The purpose of this program evaluation is to determine the information needs of AI and AN cancer survivors

At a Glance

- ◆ Support groups delivered by videoconferencing bridge geographical distances and increase access to support groups in rural communities.
- ◆ Assessing information needs of participants is essential in providing a culturally congruent support group.
- ◆ Rural American Indian and Alaska Native women with cancer express satisfaction with support groups delivered by videoconference.

living in rural communities and to explore these survivors' satisfaction with telehealth facilitation of support group meetings.

Ardith Z. Doorenbos, PhD, RN, FAAN, is an associate professor in the School of Nursing and an adjunct associate professor in the School of Medicine and Linda H. Eaton, MN, RN, AOCN®, is a research nurse in the School of Nursing, both at the University of Washington in Seattle; Emily Haozous, PhD, RN, is an assistant professor in the College of Nursing at the University of New Mexico in Albuquerque; and Cara Towle, RN, MSN, is the director of Telehealth Services, Laura Revels, BA, is the training outreach coordinator, and Dedra Buchwald, MD, is a professor, all in the School of Medicine at the University of Washington. The authors take full responsibility for the content of the article but acknowledge that the Native People for Cancer Control Telehealth network is supported by a grant (# H2ATH07752) from the Office for the Advancement of Telehealth, Health Resources and Services Administration, U.S. Department of Health and Human Services, and by a grant (# CA141875) from the National Cancer Institute. The content of this article has been reviewed by independent peer reviewers to ensure that it is balanced, objective, and free from commercial bias. No financial relationships relevant to the content of this article have been disclosed by the independent peer reviewers or editorial staff. (Submitted June 2010. Accepted for publication June 24, 2010.)

Digital Object Identifier:10.1188/10.CJON.765-770