

# Types of Social Support in African Americans With Cancer

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**Purpose/Objectives:** To determine the types of social support that African Americans use to cope with the experience of cancer.

**Research Approach:** Qualitative study using a grounded theory approach.

**Setting:** Participants' homes in the southeastern United States.

**Participants:** A purposeful sample of 13 African American men (aged 61–79 years) treated for prostate cancer and 15 African American women (aged 42–87 years) treated for breast cancer. Participants were selected according to key variables known to influence social support: age, gender, marital status, education, geographic region, and proximity to family.

**Methodologic Approach:** Open-ended and semistructured interviews were conducted with each participant (N = 28). Participants were interviewed until informational redundancy was achieved. Constant comparison techniques were used to identify variations of social support within and across cases.

**Main Research Variables:** The experience of social support during diagnosis or treatment for cancer as well as post-treatment.

**Findings:** Participants used types of social support not currently emphasized in the literature. The emotional support of "presence" was reported most frequently. Instrumental support included not only current conceptualizations but also offers of prayers, assistance to continue religious practices, and assistance to maintain social roles. Informational support included what to expect and how to manage symptoms, interpret information, and validate information received.

**Conclusions:** Findings suggest the need to reconceptualize social support for African Americans with cancer and to refine instruments to include these different manifestations of social support.

**Implications for Nursing:** Researchers can use these findings in the design of culturally relevant questionnaires and interventions for this population. Clinicians can use knowledge of the types of social support valued among African American patients with cancer to develop more appropriate strategies to promote healthy outcomes for this population.

## Key Points . . .

- ▶ Researchers have acknowledged that race or ethnicity and culture affect the social support experiences of patients with cancer, yet these studies generally have focused on western, white, middle-class people.
- ▶ Evidence exists that African Americans may not use or benefit from types of support as typically defined.
- ▶ Knowledge of the role that social support plays in coping with cancer among African Americans is needed as caregivers strive to improve the health outcomes for this population.

studies generally have focused on white, middle-class people (Beder, 1995; Northouse, 1995; Reynolds et al., 1994; Rodrigue, 1997; Stewart & Tilden, 1995). When African American patients with cancer have been included in research, the discovery of presumably lower amounts of social support has led researchers to conclude that African Americans are socially isolated and lacking social support (O'Hare, Malone, Lusk, & McCorkle, 1993; Ostrow et al., 1991; Rodrigue). But what is not clear is whether lower amounts of social support actually result from a lack of resources or the failure to identify them because of cultural differences that are not taken into account.

The purpose of this article is to describe the types of social support a group of African American women and men used to cope with the experience of cancer. Using a grounded theory approach, the authors examined social support in African

Social support can have many positive benefits for patients with cancer, allowing patients to talk about their cancer-related worries and concerns, obtain information and advice about the disease and its associated treatment, and receive assistance with finances or household tasks (Helgeson & Cohen, 1996; Hoskins et al., 1996; Reynolds et al., 1994). The availability of social support has been shown to positively influence attitudes toward health care (Mishel & Braden, 1987), aid psychological adjustment to illness (Bloom & Spiegel, 1984; Funch & Mettlin, 1982; Northouse, 1988), buffer stress (Spiegel, 1992), and even increase survival rates (Carlsson & Hamrin, 1994; Reynolds et al.; Spiegel, Bloom, Kraemer, & Gottheil, 1989; Waxler-Morrison, Hislop, Mears, & Kan, 1991).

Although the benefits of social support as a general resource for people with cancer have been investigated, these

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