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Tailoring Cancer Education and Support Programs for Low-Income, Primarily African American Cancer Survivors

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Almost 12 million Americans to date are living with a diagnosis of cancer (Altekruse et al., 2010); of them, more than 65% have survived for more than five years (Jemal et al., 2009). As the population continues to age and treatment outcomes improve, the numbers of Americans with cancer and long-term survivors are expected to increase. However, gains in survival have been uneven; the five-year survival rates for minorities are lower than the rates observed in the Caucasian population (Jemal et al., 2009).

Public health efforts to better understand and improve the survivorship experience in minority populations are critical. Initiatives tailored to survivor needs must be developed, implemented, and evaluated. Accordingly, leaders in addressing the cancer survivorship experience have collaborated to develop the *National Action Plan for Cancer Survivorship: Advancing Public Health Strategies* (Lance Armstrong Foundation & Centers for Disease Control and Prevention, 2004). The plan identifies a comprehensive set of priorities for cancer survivorship, which includes ensuring effective support programs and education for cancer survivors.

Despite the availability of many cancer survivorship educational materials and resources, research on the usefulness of those materials to survivors is limited. In particular, whether available materials or programs have met survivor needs and improved quality of life generally has not been evaluated rigorously. Gaps in the understanding of survivorship resources are pervasive, particularly for minorities and the medically underserved.

The American Cancer Society (ACS) is a leader in the development of cancer survivorship resources such as

Purpose/Objectives: To identify the information and stress-management topics of most interest to low-income, predominantly African American cancer survivors.

Research Approach: Descriptive, cross sectional.

Setting: Outpatient oncology clinic in a public hospital in Birmingham, Alabama.

Participants: 25 patients with cancer; 12 were men, 22 were African Americans, and 16 had a 12th-grade education or less.

Methodologic Approach: Patients ranked potential topics to be included in an educational curriculum.

Main Research Variables: Quantitative rankings of information and stress-management priorities.

Findings: Learning about cancer, understanding cancer treatments, relieving cancer pain, and keeping well in mind and body were the most highly ranked topics among those offered within the American Cancer Society's I Can Cope curriculum, which also included supportive topics such as mobilizing social support. The preferred stress-management topics were humor therapy, music therapy, meditation, and relaxation; lower-ranked topics included pet therapy and art as therapy.

Conclusions: Cancer survivors appear most interested in topics specific to their illness and treatment versus supportive topics. Stress management also received high rankings.

Interpretation: Nurses have a key role in providing patient education and support. Tailoring education programs may better target specific needs and improve the quality of cancer care of underserved patients.

I Can Cope, a basic cancer information program for survivors and their families. The program (a formal curriculum aimed at addressing knowledge, beliefs, and attitudes, as well as developing skills important to cancer survivorship) was developed in 1977 by two nurses in