

Working Toward Normalcy Post-Treatment: A Qualitative Study of Older Adult Breast and Prostate Cancer Survivors

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Cancer survivors may take months or years to fully adjust to life following cancer treatment, and they may never do so (Buzaglo et al., 2013). The Institute of Medicine published a landmark report that highlighted the depth and breadth of survivors' unmet needs post-treatment (Hewitt, Greenfield, & Stovall, 2006). Because of the influence of this report and the research it inspired, cancer is increasingly viewed as a chronic condition that requires medical, rehabilitative, and psychosocial support well after treatment has ended (Viswanathan et al., 2014). As the population grows, so does the demand for high-quality survivorship care that addresses the needs of increasing numbers of aging cancer survivors who are living longer following cancer treatment (Siegel et al., 2012).

Transitional survivorship, sometimes referred to as a period of re-entry, has been defined as a phase of adjustment that immediately follows completion of primary cancer treatment (Ganz, 2009; Mullan, 1985). During this phase, cancer survivors may continue to perform numerous illness-related tasks associated with adjuvant treatments, rehabilitative therapies, and ongoing cancer surveillance while managing their everyday lives (Klimmek & Wenzel, 2012). In addition to these activities, transitional survivorship involves recovering a sense of wholeness, reconstructing identity, and adjusting life plans in the wake of cancer and its consequences (McCann, Illingworth, Wengström, Hubbard, & Kearney, 2010; Reeve, Lloyd-Williams, Payne, & Dowrick, 2010). Managing life in this new normal during cancer recovery can be considered a form of work involving effort, resources, and tasks on the part of survivors and those who support them. Therefore, the purpose of this study was to develop a better understanding of how older adult survivors of early-stage breast and prostate cancer manage the work of recovery from primary breast and prostate cancer treatment.

Methodologic Approach

The analysis reported in the current article was embedded within a larger randomized, controlled trial of

Purpose/Objectives: To develop a better understanding of how older adult survivors of early-stage breast and prostate cancer managed the work of recovery.

Research Approach: Multiple case study design embedded in a larger randomized, controlled trial of a nurse-led patient navigation intervention.

Setting: Community-based research conducted via in-home visits and by phone with participants residing in non-metropolitan areas of a mid-Atlantic state.

Participants: Rural-dwelling adults aged 60 years or older with early-stage breast or prostate cancer and the people who support them (11 dyads).

Methodologic Approach: An approach to grounded theory analysis was used to evaluate the fit between existing theoretical knowledge and case findings and to generate new knowledge about the cancer recovery process.

Findings: Working toward normalcy was a core process of cancer recovery prompted by participants' internal experiences and external interactions with their environments. This ongoing, iterative, and active process involved multiple concurrent strategies that were not necessarily medically oriented or cancer specific. Working toward normalcy resulted in movement along a continuum of self-appraisal anchored between participants experiencing life as completely disrupted by cancer to a life back to normal. A greater sense of normalcy was associated with higher engagement in valued activities and increased physical and psychological well-being.

Conclusions: In addition to the core process of working toward normalcy, multiple theories from nursing, sociology, psychology, and gerontology helped to explain case findings. This knowledge could serve as a foundation on which to design survivorship care that supports the goals of cancer survivors working toward normalcy post-treatment.

Interpretation: Post-treatment wellness goals can include a desire to reestablish or maintain a sense of normalcy. Nursing actions that promote survivors' efforts to be perceived as capable, stay engaged in valued activities and roles, maintain a sense of control over their lives and bodies, and make plans for the future may help meet this goal. Existing theories about identity, dignity, inner strength, and the work of illness can inform nursing interventions.

Key Words: neoplasms; survivors; normalcy; grounded theory; oncology nursing; rural population

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