Symposium 25: Cancer caregiving experiences across the care continuum: from diagnosis to bereavement

Erin E. Kent, PhD

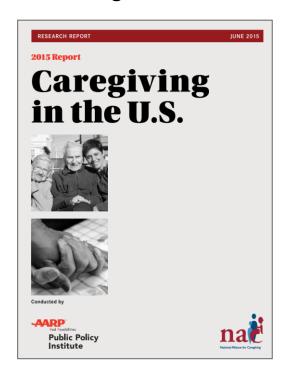
Outcomes Research Branch, Healthcare Delivery Research Program
Division of Cancer Control and Population Sciences

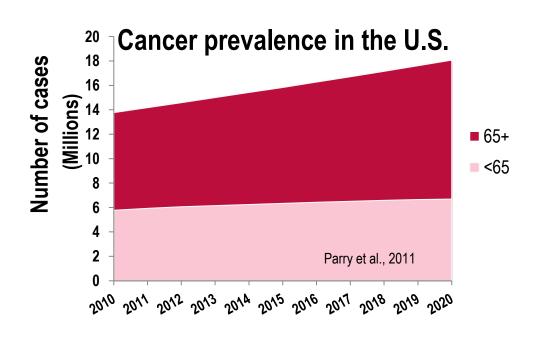
37th Annual Meeting of the Society for Behavioral Medicine March 31, 2016



Prevalence of informal cancer caregiving

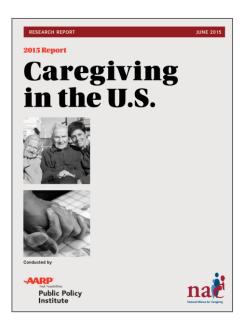
- Approximately 43.5 million U.S. adults providing significant care to a loved one with a chronic health condition, valued at \$470 billion
- Cancer is the 4th most common reason for the need of a caregiver
- As the number of cancer survivors continues to grow, the number of cancer caregivers is also expected to increase





Challenges that caregivers face

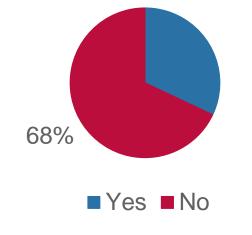
- 22% of caregivers indicate that caregiving makes caregiver health worse
- 20% report high level of physical strain
- 18% report high financial strain
- 23% report difficulty in managing patients activities of daily living

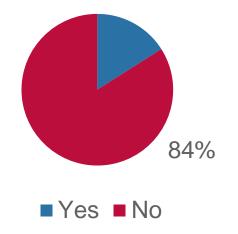


Q45: In your experience as a caregiver, have you ever had: a doctor, nurse, or social worker ask you what you need/needed?

To take care of your care recipient

To take care of yourself





Caring for Caregivers and Patients: Revisiting the Research and Clinical Priorities for Informal Cancer Caregiving

Sponsored by the National Cancer Institute and the National Institute for Nursing Research May 4-5, 2015 NCI Shady Grove TE406

NCI Planning Committee: Co-chairs Erin Kent (NCI). Julia Rowland (NCI)

Wen-Ying Sylvia Ch Ann O'Mara (I

Caring for Caregivers and Patients: Research and Clinical Priorities for Informal Cancer Caregiving

Erin E. Kent, PhD, MS¹; Julia H. Rowland, PhD¹; Laurel Northouse, PhD, RN²; Kristin Litzelman, PhD¹; Wen-Ying Sydvia Chou, BhD, MBH¹; Noppielcaye, Shelburge, MS, CBNB, ACCN¹; Cathorine Timura, BhD, MBhil³

- Increase research on the most vulnerable caregiving populations
- Incorporate risk stratification to target distressed patients and caregivers
- Refine models of caregiving burden with careful attention to measurement

Kent et al., 2016, Cancer, PMID: 26991807

Trevino: Risk factors and correlates of grief challenges in cancer caregivers

- Background: Bereaved caregivers too often report high and persistent distress
- Objective: Describe specific grief challenges
- Design: Longitudinal, prospective multi-site study to test the Grief Challenges Inventory to determine its properties
- Findings:
 - Psychometric properties promising
 - Number of grief challenges numerous, variability high
 - Spouse/partners and those who are less educated more likely to report higher level of challenge
 - Poor QOL in certain domains is predictive and predicted by higher grief challenges
 - Points toward new intervention targets

K. Trevino: ket2017@med.cornell.edu

Trevino: Risk factors and correlates of grief challenges in cancer caregivers

Questions:

- Do circumstances related to the patient's death have an impact on grief challenges?
- What might interventions that act on grief challenges look like for bereaved caregivers, and when should they be initiated?

Thompson: Examining gender differences in caregiving burden

- Background: Shifts in survival are also shifting caregiving experiences for many cancers
- Objective: Understand the characteristics associated with increased caregiver burden
- Design: Prospective study of patients/caregivers with multiple myeloma, CLL, and NHL, followed within 6 months of treatment initiation for 2 years
 - Semi-structured interviews (n=115)
 - Employment, relationship quality, HRQOL, caregiving burden
- Findings:
 - Employment associated with better role/social functioning
 - Non-working women report poorest outcomes

Thompson: Examining gender differences in caregiving burden

Questions:

- How can we bridge the work of caring and employment? How can employers help their employees better navigate caregiving challenges?
- In our increasingly mobile society, how do we grapple with geographically dispersed families and the impact to caregivers?
- Why do non-working female caregivers report the worst outcomes, and how might interventions better target them?

Reblin: Nurse-caregiver-patient communication profiles in cancer home hospice visits

- Background: Caregivers often overwhelmed/unprepared for the new roles and tasks they face
- Objective: Describe and predict home hospice nurse-caregiver communication profiles
- Design: Project IMPACT (NCI P01CA138317), Prospective multisite study of end-of-life care (home hospice).
 - Audio-recorded nurse home visits (n=537, average 5 visits/dyad), utterance coded
 - Used cluster analysis to identify communication profiles
- Findings:
 - 5 major visit communication profiles identified
 - Healthier caregivers more likely to have more medical communication
 - Lower SES predictive of distress visits

M. Reblin: Maija.Reblin@moffitt.org

Reblin: Nurse-caregiver-patient communication profiles in cancer home hospice visits

Questions:

- How does both the content and style of communication between nurses and caregivers/patients differ in the home vs. clinic setting?
- What is really going on in terms of the relationship-building aspects of communication, and can this be built upon?
- What lessons should interventionists take from this work, particularly for low SES and other more vulnerable families?

Research on cancer caregiving is building...

- IOM study on family caregiving of older adults (summer, 2016)
- Cancer caregiving report sponsored by the National Alliance for Caregiving, Cancer Support Community, and National Cancer Institute (late spring, 2016)
- Funding Opportunity Announcements:
 - NINR: Promoting Caregiver Health Using Self-Management (R01), RFA-NR-16-003
 - NCI: Cancer Caregiving Interventions, coming soon...
- The C. A. R. E. Act (Caregiver Advise Record Enable Act), sponsored by AARP

Social Ecological Framework

