A Support Group for Fathers Whose Partners Died From Cancer

Justin Michael Yopp, PhD, and Donald Lee Rosenstein, MD



Men who are raising dependent children after their spouses or partners have died from cancer face unique challenges adjusting to single parenthood while managing their grief and the grief of their children. Unfortunately, the needs of those widowers have been overlooked in the clinical literature and no published interventions are designed specifically for that population. The current article details the creation and implementation of a peer support group for fathers recently widowed because of their wives' deaths from cancer. Initial observations and emergent themes from the group are described. Group members suggested that they benefited from participation in the support group and that this form of psychosocial support is a promising intervention for fathers in similar circumstances.

Justin Michael Yopp, PhD, is an assistant professor and Donald Lee Rosenstein, MD, is a professor, both in the Department of Psychiatry at the University of North Carolina at Chapel Hill. The authors take full responsibility for the content of the article. This work was supported, in part, by the University Cancer Research Fund at the University of North Carolina. 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. Yopp can be reached at justin_yopp@med.unc.edu, with copy to editor at CJONEditor@ons.org. (Submitted September 2012. Revision submitted November 2012. Accepted for publication November 16, 2012.)

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ocial support intervention groups have been effective in improving the psychosocial functioning of individuals affected by cancer (Adler & Page, 2008; Gottlieb & Wachala, 2007; Legg, Occhipinti, Ferguson, Dunn, & Chambers, 2011). Patients who participated in cancerrelated support programs demonstrated improved coping skills, self-efficacy, knowledge, and decreased feelings of isolation (Campbell, Phaneuf, & Deane, 2004; Newell, Sanson-Fisher, & Savolainen, 2002). Support groups for family members of patients with cancer also led to positive outcomes (Levy, 2011; Northouse, Katapodi, Song, Zhang, & Mood, 2010; Scott, Halford, & Ward, 2004). Peer support programs have benefited patients with cancer and their family members during active treatment (Schneider, 2006); however, the efficacy of interventions for bereaved spouses whose partners died from cancer has not been examined fully. In addition, peer support groups for bereaved spouses, regardless of cause of death, have been limited to women or an older population of widows and widowers (Boerner & Silverman, 2001; Walter, 2004).

Men who have dependent children and whose spouses or partners died from cancer are an overlooked population. Those widowed fathers must help their children adjust to their mothers' deaths while confronting their own grief and adapting to the challenges of single parenthood (Yopp & Rosenstein, 2012). During the terminal stage of their spouses' illnesses, husbands assumed increased caregiving responsibilities (Lewis, Fletcher, Cochrane, & Fann, 2008), and the presence of children in the home was associated with increased depression and anxiety in bereaved spouses (Nilsson et al., 2009). Boerner and Silverman (2001) hypothesized that men traditionally do not play the role of the more nurturing parent; therefore, as widowed parents, fathers may be less likely to employ child-centric or nurturing parenting styles and more likely to feel unprepared than widowed mothers. In addition, children living with widowed fathers experience more disruption in their daily lives than children living with widowed mothers (Silverman & Worden, 1992). The importance of attending to widowers' coping has been underscored by the well-established link between the mental health of the surviving parent and the adjustment of the parentally bereaved child (Saldinger, Porterfield, & Cain, 2004; Wolchik, Ma, Tein, Sandler, & Ayers, 2008). Those findings highlight the need to develop specific psychosocial interventions for fathers widowed because of cancer.