Cancer will be the leading cause of death sometime in the 21st century (Proctor, 1995). More than 1,500 Americans die of cancer each day, currently accounting for 1 of every 4 deaths in the United States (American Cancer Society, 2008). The number of cancer deaths will continue to rise each year because of an increasing and aging population (Canadian Cancer Society, National Cancer Institute of Canada, Statistics Canada, Provincial/Territorial Cancer Registries, Public Health Agency of Canada, 2008). As a result, many family caregivers will face bereavement because of cancer deaths. Family caregivers, defined as family members who have assumed a caregiving role that often involves making critical medical decisions, assisting with activities of daily living, and providing treatments in the home (Hauser & Kramer, 2004), play key roles in providing care for patients with cancer. Over time, they have taken on added responsibilities for providing increasingly complex care in the home (Canadian Hospice Palliative Care Association, 2004). Experiences during caregiving have consequences affecting physical and mental health in bereavement (Brazil, Bedard, & Willison, 2003; Grande, Farkahar, & Barclay, 2004).

The National Comprehensive Cancer Network ([NCCN], 2008) guidelines for palliative care include death as an expected outcome and care for families after the death of a relative as essential parts of a continuum of cancer care. Palliative care addresses issues of quality of life of patients and their families by providing symptom relief and spiritual and psychosocial support extending from diagnosis to the end of life and bereavement (World Health Organization [WHO], 2002). However, very little is known about the experience of bereavement for family caregivers, or how best to provide compassionate and effective nursing care.