Supportive Patient Care in the Guise of a Quilt

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Attention to the physical environment of an oncology center and the therapeutic potential of the environment are concepts to consider in nursing care. Art can enhance the human elements of caring and touch. Colorful quilts, whether hanging on the walls or given to patients, can provide emotional and physical warmth as well as represent a caring environment.

Case Study

D.M., a 43-year-old woman, recently had an annual screening mammogram. A suspicious mass was noted, and she underwent a biopsy. D.M. was diagnosed with invasive cancer. She now presents to clinic for a consultation with the breast surgeon. After, D.M. waits in the conference room to speak with the nurse practitioner about her options for surgical treatment. A single parent of three school-age children, D.M. works full-time and is uncertain how she can possibly consider what is facing her—surgery, chemotherapy, radiation therapy, and years of anti-estrogen therapy. Her stomach is in knots, and she is tearful and anxious.

While D.M. waits, the oncology nurse talks with her about preoperative testing requirements. D.M. tells the nurse of her recent divorce and fears of dying and abandoning her three children. The nurse empathizes with D.M. and gives her a quick hug to show her support. D.M. tells the nurse that the colorful quilt on the conference room wall reminds her of her grandmother’s home and the soft quilts she curled up with as a child. She now remembers the quilts that were hanging in the lobby when she checked in and quietly thanks “someone” for providing the distractions. The nurse asks D.M. about a drink and her favorite color, yellow, and asks a volunteer to bring a mug of coffee and a tote bag to the conference room. Inside the bag, D.M. finds a large lap quilt crafted from cheery, yellow floral fabrics, a blank breast cancer journal, and a card.

This quilt was lovingly made for you by the hands of fellow breast cancer survivors, their friends, and families. Even though we did not know your name as the quilt was being created, you were in our thoughts as we stitched. It is our hope that this quilt will bring a smile to your face and warmth of the sun into your heart as you are wrapped in this quilt, and our wishes for your health and peace of mind.

With tears in her eyes, D.M. murmurs “thanks” and pulls the quilt to her, feeling a surge of emotional warmth.

Nursing Assessment

The nurse is not certain the busy oncology clinic will allow time to provide the necessary support D.M. needs today and shares that concern with the nurse practitioner, who comes to the conference room and completes a patient consultation for the social worker. The nurse practitioner assesses the variety of emotional concerns D.M. verbalizes: fear of death, future care of loved ones, and anxiety related to treatment decision making, bodily changes, and anticipated symptoms. D.M. expresses that the reality of the life-long vigilance associated with her cancer diagnosis coupled with the existence of her other challenging life circumstances is overwhelming. In a calm, unhurried manner, the nurse practitioner reassures D.M. that her feelings of dread are typical, yet can accentuate her fear and anxiety and create a sense of impending doom. The visceral reactions she reports, such as nausea and diarrhea, also are common. D.M. stops crying and is ready to talk about her treatment options. She is thankful for the calming skill of her oncology nurses and the personalized quilt that communicates a sense of supportive caring and warmth from her healthcare team. The nurse practitioner smiles inwardly because she just talked with a survivor who is involved in the quilt project and marvels at how that once anxious patient is now helping others during their peak time of emotional need.

Etiology of the Problem

People have different emotional responses upon hearing they have cancer. Those responses are unique to their circumstances and usual coping skills.

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A cancer diagnosis can be disruptive because a person’s normalcy and sense of security are threatened, with resulting uncertainty (Gorman, 2006). Nursing staff may feel challenged as they provide for the emotional albeit normal needs of patients with cancer and their families, particularly in a busy work environment. Uncertainty in knowing what to say or what not to say can create apprehension and trepidation and can escalate the intensity of the situation.

Prophylactic Strategies and Outcomes

Emotional support and caring are crucial as patients begin their cancer journey or restart it with a diagnosis of metastatic disease. Excellent assessment and communication skills combined with the art of caring are essential factors in providing optimal care. Skilled oncology staff can assist patients and families during these stressful times and aid patients in achieving control (Pearson, 2006).

Attention to the physical environment of an oncology center and the therapeutic potential of the environment are concepts to consider in nursing care. Evardsson, Sandman, and Rasmussen (2006) noted in their study of caring or uncaring in relation to the oncology environment that objects attracted attention, with a momentary ability to make people forget their fear and anxiety. The physical surroundings and associated components affected the doing and helped to convey messages of caring and support in a therapeutic environment.

Healthcare providers describe the power of emotional healing that occurs at the level of the spirit and the profound healing effects of the arts (Lane, 2006). The opportunity for human caring allows an art form to positively impact patients’ emotional needs. The use of art as therapy has evolved to an intentional therapeutic intervention (Ponto et al., 2003). Quilting, as wall art or curled in one’s arms, combines caring and support with physical and emotional warmth.

In the case study, the quilt is an intervention that the nursing staff uses in the emotional care of the newly diagnosed patient. It provides a personalized, caring approach using color, the environment, and attention to individual preferences. Some patients request a particular color combination in a quilt to match the color of a cancer awareness ribbon; others pick a coordinating quilt that matches home decor. Yet other patients choose an array of colors that provides a change from their routine color schemes in life—a symbol of conquering and defying the cancer that has changed their lives.

The act of receiving color and warmth demonstrates emotional support and caring from the nursing staff to patients and families. Patients receiving chemotherapy often bring their quilts to each clinic visit, sometimes for years as in the case of metastatic therapy. Family members relate that patients request to be covered at night with their quilts because they provide a sense of security. Frequent cards of thanks have included comments such as the following.

It was very comforting to receive in my time of distress. I hope to someday give back the support you have given me.

The quilt I received after my recent diagnosis has truly given me such a sense of comfort and hope. I have to deal with fear every day. When I feel down, looking at the quilt reminds me of you beautiful people [who] do care.

When I first arrived for treatment, I was so amazed at the beautiful quilts hanging everywhere. I could only imagine what wonderful people had taken the time and energy to beautify the center. But I was completely floored when I received by very own quilt. I will cherish it forever. Cancer has not been one of life’s most pleasant experiences, but the amount of support has been overwhelming.

The quilt project integrates survivorship, teamwork, compassion, best practice, and caring. The idea for this therapeutic project began with an oncology nurse practitioner, who with a supportive community of caring cancer survivors, family, and friends, has distributed more than 2,500 quilts to newly diagnosed and newly metastatic patients with breast cancer since 2005. The quilts are at least 50 inches by 60 inches (see Figure 1).

D.M. was overwhelmed when she learned about her breast cancer diagnosis and upcoming treatment schedule. The quilt, tote bag, and journal she received represented the human elements of touch and caring and offered unexpected emotional support during a difficult time. The nursing staff recognized D.M.’s emotional stress and used artwork to create an opening for an effective therapeutic interaction. The caring demonstrated through the guise of the quilt provided unique emotional support for D.M. and created an atmosphere for effective patient education. The relationship building that occurred in this thoughtful encounter...

Figure 2. Steps for Beginning an Art or Quilt Program

- Expand the idea with goals and objectives.
- Create a realistic timetable.
- Recruit interested survivors, family members, and friends.
- Involve clinic site personnel and management.
- Identify key personnel at the institution.
- Contact local art or quilt shops for ideas, materials, and volunteers.
- Generate seed money to initiate the project.
- Apply for 501c tax-exempt status.
- Plan a kick-off event to start the project.
- Identify a place to store supplies and finished items.
will always be remembered by the patient, appreciated by the nurses, and realized by the volunteers who experienced their own emotional challenges at diagnosis.

Volunteer-led initiatives such as these can add to the full range of psychological interventions for patients with cancer (Fitch, 2006) and offer innovative approaches to caring. A quilt program is an art support project that can be initiated at the grass-roots level (see Figure 2) with an idea, passion, commitment, a supportive quilting community, and dedicated volunteers (see Figure 3). Monetary support through donations and grant funding with a 501c tax-exempt status enable the purchase of necessary supplies and fabric.

Conclusion

A cancer diagnosis can evoke an array of emotional responses from patients and families. Oncology nurses are key to the accurate assessment of those responses and implementation of interventions to enhance coping skills. Unfortunately, it often is difficult to find enough time in a busy clinic environment to adequately interact with patients and families and ensure that their emotional needs are met.

Attention to the physical environment of the institution and distraction with objects are methods to positively impact patients’ emotional needs. The use of art as adjunct to the usual complement of nursing interventions can enhance the human elements of caring and touch. Colorful quilts, whether hanging on the walls or given to a patient, can provide emotional and physical warmth as well as represent a caring environment.

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References


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