Research Review of the Supportive Care Needs of Spouses of Women With Breast Cancer

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Purpose/Objectives: To conduct an integrative review of the research describing the needs of spouses of women with breast cancer for direction in planning nursing interventions to meet their supportive care needs.

Data Sources: Published articles and bibliographies from pertinent articles.

Data Synthesis: A base of knowledge exists regarding the emotional and psychosocial needs of spouses of women with breast cancer. Less is known about their spiritual, practical, and physical needs. Very little research has explored nursing interventions and supportive care needs.

Conclusions: Definite knowledge gaps exist regarding the needs of spouses of women with breast cancer. More research is required to develop and evaluate interventions that focus on these needs.

Implications for Nursing Practice: A diagnosis of breast cancer is a distressing time for both women and their spouses. Ongoing research and the development of interventions are necessary to help spouses cope with the stress throughout the illness so that they may support their wives.

reast cancer is the most frequently diagnosed cancer among women. In 2001, an estimated 192,200 women In the United States will be diagnosed with breast cancer, and 40,200 women will die from the disease (American Cancer Society, 2001). A diagnosis of breast cancer affects not only women but also their entire family, particularly their spouses. Spouses are the most commonly reported support people for married women diagnosed with breast cancer (Kilpatrick, Kristjanson, Tataryn, & Fraser, 1998), and women often turn to their spouses for strength and reassurance. However, spouses report as much distress as their wives following a breast cancer diagnosis (Northouse & Swain, 1987). Until recently, healthcare professionals have not considered the distress experienced by spouses and have focused primarily on the distress and adjustment difficulties of patients (Northouse, Templin, Mood, & Oberst, 1998). The impact of the diagnosis and treatment on women is well documented, but the physical and emotional effects on spouses have received less attention (Hoskins et al., 1996). Although spouses play a key role in helping their wives adjust to breast cancer, little research has been conducted to show the responses of spouses themselves.

This article presents an integrative review of the research describing the needs of spouses of women with breast cancer.

Key Points . . .

- The response of spouses to their wives' diagnosis of breast cancer has been the subject of little research.
- Healthcare professionals rarely address the supportive care needs of spouses of women with breast cancer.
- Healthcare professionals must develop interventions or programs to provide supportive care to these spouses.
- Longitudinal studies are necessary to assess spouses' adjustment over time and determine how to increase their contact with professionals.

For healthcare providers to provide supportive care in response to the needs of these spouses, they must identify the needs, determine the importance of these needs, and evaluate the extent to which they are being met (Kilpatrick, Kristjanson, & Tataryn, 1998). Given the lack of research in this area, spouses represent a large homogenous group with whom to initiate this work and pilot new initiatives.

The Supportive Care Framework (Fitch, 1994) was used to organize this article. According to the Supportive Care Framework, individuals with cancer and their family members experience different needs across the spectrum of the disease, including the diagnostic, treatment, and follow-up phases (see Figure 1). These needs change over time and are influenced by many factors, such as age, gender, socioeconomic status (SES), culture, education, religion, coping resources, and social support (Fitch). Social support includes families of diverse forms and different stages, ranging from couples to extended families with significant others. Families also range in terms of development stage over the life span. These individuals have emotional, psychosocial, informational, spiritual, practical, and physical supportive care needs.

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