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Perspectives on cancer rehabilitation in South Wales, UK: qualitative investigation of experiences of people affected by cancer and healthcare professionals

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Background

- Cancer rehabilitation has a positive impact on quality of life (Hunter et al. 2017)
- Services can consist of physical exercise, health education, psychological and other supportive services.
- 39% of Welsh Cancer Patient Experience Survey (WCPES) respondents reported that they did not always receive support with their rehabilitation needs (Welsh Government 2017).
- The reason for this lack of support has not been fully investigated in South Wales, UK.





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Purpose

- To investigate the value of two cancer rehabilitation services in South Wales, UK.
- To explore the facilitators and barriers to cancer rehabilitation from two perspectives:
 - People affected by cancer
 - Healthcare professionals



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Methods

- Qualitative, semi-structured, one-on-one interviews
- Purposive sample of healthcare professionals and people affected by cancer recruited from two cancer rehabilitation services in South Wales, UK.
- Eligible healthcare professionals had at least one year experience in cancer rehabilitation. People affected by cancer were recruited if they had rehabilitation at one of the study sites (Csontos et al. 2019).
- Ethical approval: London South-East Research Ethics Committee (17/LO/2123)
- Audio recorded interviews were transcribed verbatim and anonymised.
- Thematic analysis based on Braun and Clarke (2006).



Findings

- 35 interviews were conducted
- Interviews ranged from 20 to 90 minutes
- 20 healthcare professionals interviewed
 - 4 dietitians
 - 5 occupational therapists
 - 3 physiotherapists
 - 4 speech and language therapists
 - 4 Therapy technicians
- 15 people affected by cancer:
 - 5 people affected by breast cancer
 - 1 person with colorectal cancer
 - 1 person with thyroid cancer
 - 1 person with lung cancer
 - 7 people affected by prostate cancer
- 3 interviews were dyadic with people's partners joining.

What is the value of cancer rehabilitation?

- **Good for body and soul**

'I'm definitely feeling improvement mentally as much as physically.'
(Participant_09 affected by prostate cancer)

*'... [Tai Chi] it was the... hm... helping you **cope with the stress** and the relaxation part of it. Hm... but also hm... the Tai Chi is so gentle you feel as if you're not using any muscles and you are.'* **(Participant_02 affected by colorectal cancer)**

What are the facilitators of cancer rehabilitation?

- **Expert attention**

*'Even when in the pool [hydrotherapy] first I had 'Oh, no' I was a bit shy, I didn't want to. But **their reassurance** and their coaxing me to do things. I think that's what was the best thing for me. Hm... just putting my trust in them really.'* (Participant_28 affected by breast cancer)

'You sort of make friends on a... you know, only on a temporary basis, but you get to know each other and you help each other.'
(Participant_03 affected by breast cancer)

- **Peer support**

What are the barriers to cancer rehabilitation?

- **Lack of information**

*"[...] if you speak to people they'll say 'Oh, well, I've just had aromatherapy or acupuncture or something...' And you're like 'Oh, well, I didn't know that you can get that.' 'Oh, if you need to speak to this person and this...' You know, so it seems to be more **word of mouth**, there doesn't seem to be a formal kind of way of finding things out." (Participant_37 affected by breast cancer)*

*"[Support Centre] It was that, **it was the rumour** you see. [Support Centre], cos they can... they're well connected from here to the same hospital. [Support Centre]. [Support Centre] told me and I did, I made contact here, must be... well over a year ago. And I didn't know that the pool existed. I didn't know it would help me. I didn't know there was a pool in [XY] Hospital, you see, that's another thing. And then people hear about it 'Oh, I can't swim'. Well, you don't swim in there, you do exercises." (Participant_12 affected by prostate cancer)*

What are the barriers to cancer rehabilitation?

- **Staff capacity**

'Services so as in staffing levels, so if we had potentially more members of staff, we'd be able to hm... develop our service in different localities, do more classes, hm... you know have... different options I guess.' (Professional_16 – OT)

*'everyone thinks it's just nurses and doctors in the NHS. Hm... and yeah I think that's certainly true here. Hm... where sometimes they forget about... I think we're seen as an **add-on**, where is actually if we were utilised earlier, they actually, we're not an add-on, we can actually enhance the services and enhance the quality of care. Hm... but that's not always seen until the end, yeah.'*
(Professional_06 – Physiotherapist)



Conclusion

- Cancer rehabilitation is highly **valued by people affected by cancer**.
- The **expert attention** and **peer support** facilitate exercise class attendance.
- However, **not enough information** is available on services.
- The **slowly changing medical model** and **staffing issues** are often not a supportive context for successful rehabilitation provision and service development.
- **Service promotion and education** of healthcare professionals and people affected by cancer could help cancer rehabilitation services reach their full potential.

Thank you!

References:

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