



Peer support for cancer patients

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People directly affected by cancer report significant psychological distress. Peer support programs are based on the premise that shared experience is a valuable resource that assists individuals to adjust to, and cope effectively with, stressful events. This article considers two types of peer support service available to cancer patients – telephone peer support (the 'Cancer Connect' program) and cancer support groups.

Cancer has a significant impact on a large number of people – those personally diagnosed as well as their families and friends. It is estimated that one in three men and one in four women will be diagnosed with cancer before they reach 75 years of age.¹ Many people diagnosed with cancer experience significant adverse physical, psychosocial and economic consequences.²⁻⁴ A significant percentage of cancer survivors may have ongoing concerns (eg. relationships, disease recurrence).⁵ General practitioners are recognised as an important source of support for patients with cancer,⁶ but patients often have need for additional support.

The benefits of support services for patients with cancer are well established. Meta analyses have shown that, compared with those who do not, patients who receive psychoeducational or psychosocial interventions experience lower rates of anxiety, depression, nausea and pain, and have significantly greater knowledge regarding their disease and treatments.^{7,8}

Support can be provided by medical and other health professionals, family and

friends. Programs include peer, telephone, internet, and psychoeducational support. While different sources of support can assist people with cancer, it is less well understood how to most effectively combine support services for individual patients.^{7,8} Therefore, patients with cancer should be offered a range of support services.

What does peer support offer?

Peer support is based on the premise that mutual sharing of information is beneficial for participants. In cancer, peer support programs can be disease specific (eg. breast, prostate, lung), age specific, or language/culture specific. Facilitators may be professionals, trained volunteers or committed community members. Peer support need not be face-to-face; it can be conducted via the internet or telephone.

There is evidence to support the efficacy of peer support programs and telephone support programs for cancer patients and their families.^{3,9} On the basis of this evidence, two types of peer support programs operate throughout Australia: Cancer Connect, and

cancer support groups. Additional support services operate outside the auspices of the Cancer Councils.

The Cancer Connect program

The Cancer Connect program commenced in August 2000. It was developed as an adaptation of the Canadian Cancer Connection and an extension of the well established Breast Cancer Support Service. Cancer Connect is a telephone based peer support service that allows patients with cancer to be put in touch with someone who has had a similar cancer experience. This is a confidential, inexpensive and relatively simple method of allowing patients to be supported by a cancer survivor. This mode of peer support is especially helpful for geographically and socially isolated patients. Telephone costs are covered by the cancer councils.

There are currently over 600 cancer survivors trained to provide telephone peer support across Australia – covering over 19 cancer types (*Table 1*). Each state has its own Cancer Connect program. The Victoria

Table 1. Diversity of cancer types in Cancer Connect volunteers

Bladder	Non-Hodgkin lymphoma
Bowel	Ovary
Breast	Pancreas
Hodgkin disease	Prostate
Larynx	Soft palate
Leukaemia	Testis
Liposarcoma	Tongue
Lung	Throat
Melanoma	Uterus
Multiple myeloma	

and New South Wales programs are the most established with the highest number of volunteers and the highest number of matches. Across these two states approximately 2000 matches are made each year. The process of matching is collaborative across state borders and sometimes across the Tasman, especially for less common malignancies.

Volunteers are all a minimum of 2 years postcompletion of treatment and are in remission. Volunteer applicants are screened for suitability and, if successful, undergo a 3 day training program and an annual update providing the necessary skills and knowledge to provide effective support. The most important factors in matching patients with volunteers are type of cancer, type of treatment, and age.¹⁰ The program ensures that confidentiality is maintained and privacy respected.

Results from a study of the Cancer Connect program in Victoria indicate that the majority of people responding to the evaluation were enthusiastic about the program and that their experiences were positive.¹⁰

Cancer support groups

Cancer support groups are populated by people who are, or have been, directly affected by cancer. They provide opportunities for mutual support and understanding, sharing of information and resources, and sharing of strategies for coping with the cancer experience. It is believed that coping is enhanced by participation in a group.^{3,11} Most cancer support groups are community based, generally easy to access, and attendance is

free. By attending meetings, participants can learn new skills to help them with day-to-day coping such as navigating an often confusing health care system.

Groups do not give medical advice, nor do they practise or promote therapies of doubtful or unproven value. Many groups incorporate interactive or stimulus activities such as guest speakers.

The Cancer Council New South Wales has conducted research investigating the relationship between the type of organisation and the effectiveness of cancer support groups.¹² The most commonly reported reasons for participation in a support group were:

- 'knowing that I am not alone'
- learning about current medical research
- becoming more informed about drugs used in cancer treatment and their side effects
- comparing own methods of dealing with cancer to those of others
- relaxing with others who understand cancer through personal experience.

How can GPs provide support?

General practitioners, who know a patient before a cancer diagnosis and often have a comprehensive knowledge of their patient's social situation, are ideally placed to provide support and referral. The *Clinical practice guidelines for the psychosocial care of adults with cancer*³ recommends several steps to ensure that people with cancer have adequate emotional and social support. These steps include asking about:

- the patient's feelings
- information requirements
- support networks and the availability of assistance, and how these can be accessed.

Conclusion

There is clear evidence that cancer patients desire and benefit from peer support. General practitioners are ideally placed to assess the needs of their patients, provide emotional support, and recommend a range of support services.

Resource

The Cancer Helpline can provide up-to-date knowledge of over 380 reputable and professional peer support programs across Australia – 131 120 (local call rate within Australia).

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