Group Interventions in Cancer

The Benefits of Social Support and Education on Patient Adjustment

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Research and theory on groups have been applied to treatment of mental health for years, and group therapy techniques have emerged as major components of psychological intervention. They are cost-effective, often bring together several useful perspectives or experiences, and provide environments that are fundamentally different from individual therapy. In group therapy, patients receive feedback and validation from peers rather than a single, “more powerful” therapist and can more effectively engage in rehearsal of new behaviors (Naar, 1982). Recently, group interventions have been applied to treatment of physical health problems, adapted for use with patients or families of people with AIDS, coronary heart disease, and genital herpes, among other diseases (e.g., Kelly, Murphy, Washington, & Wilson, 1994; Longo, Clum, & Yeager, 1988; van Elderen, Maes, Seegers, & Kragten, 1994). In particular, recent use of group interventions among cancer patients has met with success in affecting aspects of disease course and well-being, suggesting that the instructive, supportive, validating, and calming influences of group settings are particularly useful in treating this disease. In this chapter, we review the bases and outcomes of group-based psychosocial interventions among cancer patients, with an eye toward isolating the sources of group influence that are beneficial to cancer patients.

There is little doubt that cancer patients often need supportive and coping-focused assistance while fighting their disease. As a major cause of death, cancer is a
fearsome and highly threatening disease, and the experience of cancer is stressful at every stage, demanding substantial psychological and physical adjustment (Glanz & Lerman, 1992). Treatment for the disease is not always effective, and many still believe cancer inevitably leads to certain, painful death. Cancer patients report experiencing depression, anxiety, physical symptoms, disruption in marital and/or sexual relationships, lethargy and diminished levels of activity, and considerable fear regarding disease progression and death (Welch-McCaffrey, Hoffman, Leigh, Loescher, & Meyskens, 1989). Surgery, chemotherapy, and other cancer treatments also cause distress due to aversive side effects, threats to one’s self-image, and negative effects on quality of life. Even after remission or successful treatment, survivors may exhibit chronic feelings of vulnerability (Burish, Meyerowitz, Carey, & Morrow, 1987; Schmale et al., 1983). Fear of recurrence and social stigmatization may also be substantial (Muzzin, Anderson, Figueredo, & Gudelis, 1994). To some extent, this heightened vigilance and worry is adaptive, but it must be managed and maintained at levels that maximize problem- or danger-focused coping rather than fear control (e.g., Leventhal, 1980). Because the rigorous demands and side effects of treatment are often unpleasant and stressful, and the disease is highly threatening, the diagnosis of cancer may require long-term coping efforts on the part of most patients (Maher, 1982). Behavioral interventions can often help with this process and when delivered in group settings can offer substantial assistance and stress relief to patients and their families.

Why Should Groups Help Cancer Patients?

Recent studies of group interventions have reported promising evidence of their benefit to cancer patients. Several properties of small groups may contribute to these benefits. Providing support, education, and coping skills is part of individual therapy as well, but groups may prove to be an unusually effective setting for providing them. Similarly, groups provide more extensive social support, the opportunity for social comparison, and may contribute to enhanced learning of coping skills.

Social Support

Defined as the belief that one is a valued member of a group and that one is loved and cared for (Cobb, 1976), social support appears to be one of the most useful and important tools for increasing quality of life and reducing distress associated with life-threatening disease. Groups can provide support to their members by giving a sense of belonging and universality that helps to offset the isolation often associated with cancer (Spiegel & Yalom, 1978). Discussion of cancer-related struggles and empathic listening to members’ concerns can contribute to each member’s belief of being an esteemed part of the group. In addition, being part of a group can provide a sense of security to members by letting everyone know that the group members’ resources and services are available, should they be needed (Cobb, 1976).