

Young Adult Cancer Survivors' Experiences of Connectedness with Their Healthcare Providers

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Abstract:

Adolescents and young adults with cancer have poorer treatment and survivorship outcomes than either younger or older cancer patients. These individuals also have psychosocial late effects and engage in lifestyle behaviors that increase their risk of subsequent cancer and other chronic illnesses. Thus, there is a need to identify protective factors during the diagnosis and treatment period to foster healthy lifestyle behaviors. Connectedness with healthcare providers is a potential protective factor that may diminish risk-taking behaviors and foster healthcare self-management in adolescents with cancer. However, little is known about connectedness with healthcare providers from adolescents with cancer perspectives. The purpose of this study was to describe young adult cancer survivors' experiences of connectedness with their healthcare providers as they negotiated the experience across the cancer continuum from diagnosis to survivorship during adolescence. A qualitative, empirical phenomenological method guided this research. The sample consisted of 9 young adult cancer survivors who had cancer as adolescents. A broad, data generating question was constructed to elicit

rich, narrative descriptions of participants' experiences of connectedness with healthcare providers, which were audio-taped and transcribed. The narrative data were analyzed using Colaizzi's method, which involved a systematic process of extracting and analyzing significant statements for formulated meanings and themes. Seven theme categories were identified and then used to develop a narrative of the essential structure of the experience of connectedness. Connectedness with healthcare providers is a multi-faceted experience that encompasses instances of not only connectedness, but also unconnectedness and disconnectedness. Effective strategies that foster connectedness with adolescents were identified. Behaviors that foster disconnectedness relate to a lack of respect for the adolescent's personhood. Findings indicate that connectedness with healthcare providers may make adolescents more likely to engage in care partnerships and effective self-management during treatment and into survivorship. When there is no connectedness or a disconnection with healthcare providers, a door shuts: there are feelings of helplessness and vulnerability, anger and resentment, and reluctance to connect with healthcare providers for cancer prevention. Clinical implications for healthcare providers are discussed. Future research should focus on connectedness theory development, measures, and interventions that foster adolescent-provider connectedness.

Description:

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