“Gauging the Effects of Self-efficacy, Social Support, and Coping Style on Self-management Behaviors in Chinese Cancer Survivors”

Changrong Yuan, PhD

**Background:** Better self-management control in cancer survivors would benefit their functional status, quality of life, and health service utilization. Factors such as self-efficacy, social support, and coping style are important predictors of self-management behaviors of cancer survivors; however, the impact of these factors on self-management behaviors has not yet been empirically tested in Chinese cancer survivors. **Objectives:** The aim of this study was to examine how self-efficacy, social support, and coping style affect specific self-management behaviors. **Methods:** A secondary data analysis was completed from a cross-sectional study; A total of 764 cancer survivors were recruited in the study. Validated instruments were used to assess patients’ self-efficacy, social support, and coping style. Structural equation modeling (SEM) was used to test the hypothesis. **Results:** The SEM model fits the data very well, with root mean square error of approximation of 0.034; close-fit test cannot reject the hypothesis of root mean square error of approximation of 0.05 or less, comparative fit index of 0.91, Tucker-Lewis index of 0.90, and weighted root mean square residual of 0.82. For the measurement models in the SEM, all items loaded highly on their underlying first-order factors, and the first-order factors loaded highly on their underlying second-order factors (self-efficacy and social support, respectively). The model demonstrated that self-efficacy and social support directly and indirectly, via coping style, affect 3 self-management behaviors (ie, communication, exercise, and information seeking). **Conclusions:** Our results provide evidence that self-efficacy and social support impose significant direct effects, as well as indirect effects via coping style, on the self-management of cancer survivors. **Implications for Practice:** Our findings may help nurses to further improve their care of cancer survivors in terms of their self-management behaviors, specifically communication, exercise, and information seeking.

**Special congratulations to**

Changrong Yuan, PhD

Changrong Yuan, PhD, is a professor at the School of Nursing of Fudan University, as well as director of the Research Center of Patient Experience, a PhD supervisor, a fellow of the American Academy of Nursing, and an honorable professor of the New York University. She has been appointed by the PROMIS Health Organization (PHO) as the official representative for PHO in China (PNC-China). Dr Yuan is also the vice chairman of the Chinese Association for Life Care, Humanity Nursing Society; vice chairman of the Chinese Health Information and Big Data Association, Committee of Nursing; and vice chairman of the Shanghai Anti-Cancer Association, Committee of Cancer Nursing. Dr Yuan has completed more than 10 funded research projects related to long-term care, cancer nursing, and nursing informatics, and she has published 203 articles, including 34 SCI articles. Dr Yuan is a member of the editorial board for Cancer Nursing and is a peer reviewer for 5 other SCI journals as well. More than 40 PhD, master’s, and postdoctoral students have successfully graduated with the guidance of Professor Yuan. In 2018, she was selected as a high-citation scholar in China by Elsevier.
“Perceptions of Support Groups Among Older Breast Cancer Survivors: ‘I’ve Heard of Them, But I’ve Never Felt the Need to Go’”

Huibrie C. Pieters, PhD, DPhil, RN

Background: Cancer survivors transitioning from active treatment to posttreatment may lack critical support and information about their posttreatment care. Support groups have the potential to address this gap. **Objective:** The aim of this study was to describe how breast cancer survivors 65 years or older perceived professionally led, in-person support groups. **Methods:** Individual interviews with 54 women were analyzed using grounded theory informed by constructivism. **Results:** Strong negative assumptions about cancer support groups were described. Tension existed between 2 opposing categories: participants’ preconceptions of support groups and characterizations of their members and the women’s perceptions of their own informational and emotional needs. Participants also described what sources of support they used in lieu of professionally led support groups. **Conclusions:** Despite awareness and availability, most participants did not use support groups as a resource during their primary or post–cancer treatment. **Implications for Practice:** Structural changes can benefit existing models of support groups including how and when support needs and services are discussed with survivors and a shift toward the inclusion of practical information.

Special congratulations to

Huibrie C. Pieters, PhD, DPhil, RN

Huibrie C. Pieters, PhD, DPhil, RN, is an associate professor at the University of California, Los Angeles School of Nursing, Dr Pieters has global experience in nursing, clinical psychology, and neuropsychology. Her research explores shared decision making about healthcare choices from the personal viewpoint of the patient, particularly characteristics such as the disease and its treatments, the patient’s preferences and values, family and primary support person, and patient-provider communication. Knowledge about how recipients of healthcare make treatment decisions is critical to increasing the role of patients in their own care and to integrating patient-centered care in clinical practice, both of which are key goals of our federal healthcare reform. Her present research includes older women diagnosed with breast cancer where Dr Pieters is exploring how the patient receives, interprets, and ultimately acts on treatment options.

The focus on her research program, healthcare decision making among women, is informed by her international and domestic experiences in nursing and clinical psychology. Within this area of expertise, Dr Pieters is most interested in the effects of age, culture, and being underserved in the process of treatment decision making. Specifically, her past research investigated psychological factors that influence therapy decisions made by older women affected with locoregional breast cancer. Within this domain of psychoger-oncology, Dr Pieters has published on the women’s perceptions of the concept of “cancer survivorship,” accessing healthcare across the early cancer trajectory, and the multifaceted process of decision making about treatment options such as persistence with aromatase inhibitors.