March together: Couples Coping with Cancer in Palliative Care Setting

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What does a couple need when life is set to come to an end very soon?

The desire to strengthen their relationship. (McLean & Nissim, 2007)
In reality

- 33-50% of both partners experience relational distress in the terminal stages of illness (Mclean & Hales, 2010)

(Tan et al., 2005, Brown et al. 2000)
Why couple work with cancer clients

- Couple report similar level of distress, they react as an reciprocal emotional system, not as individuals, and common factors (relationship, communication) impact each partner’s adjustment. (Hagedoorn et al., 2008)

- Quality of relationship strongly associated with individual distress, good functioning couple tends to have lower levels of distress, depression, anxiety and psychological morbidity (Kissane, 2002).

- Effective intervention can result in reduction of psychological pain and distress, provide opportunity for relational growth and ease the process of bereavement and reduce the potential of complicated grief and mental health difficulties (Mclean & Nissim, 2007)
Goals for couple services for those who are terminally ill and their spouses

Facilitate adaptive coping:
• Identify, affirm and share priorities, values and sources of meaning
• Prepare physically and psychologically for death

Deepen emotional bonding:
• Enrich the quality of the present life
• Improve ease of communication

Schuler, Zaider, & Kissane (2012)
Hong Kong Cancer Fund

Hong Kong Cancer Fund strives to provide free and holistic care service for cancer patients and their families, aiming to achieving the mission of “No one faces cancer alone.”

Holistic Care is carried out in pathways of:

- **Transitional care**: from diagnostic phase to bereavement phase
- **Seamless Care**: spanning from homes, to hospitals and community
- **Holistic care**: physical - psycho - social - spiritual care
- **Multi-disciplinary**: social workers, clinical psychologists, nurses, dietitians, art therapist, professional and community volunteers
Our support Network
Service Highlights

- **Hotline** – all calls answer by social worker or nurse
- **Nursing** – one-on-one consultation
- **Professional Counselling** – by social worker or clinical psychologist
- **Self-enhancement Programme** – such as management on pain, fatigue, lymphoedema, treatment’s side effect…
- **Workshop and Talk** – address the concerns of patients, carers and family members, such as depression, genetics and cancer, bereavement
- **Complementary Therapy** – working on physical and emotional well-being through yoga, music, dance, art, meditation, diet and nutrition…
Service Highlights

• **Peer Support** – provides encouragement, information and support on a more personal level, serves as role-model, “Buddy system”

• **Friends of CancerLink** – 21 self-help groups

• **Home Care** – tailors to the needs of homebound clients or those who live alone, such as help with basic household chores, shopping for groceries, providing escort to and from hospital appointments

• **Public Education** – for better understanding of cancer, treatment, diet, early detection…

• **Advocacy** – regular roundtable discussions to discuss topics which are relevant to cancer care in our community to advocate the importance of seamless and affordable cancer care, such as subsidized cancer drugs, cancer care in public hospitals, mandatory life insurance, tobacco control…
Service Protocol for those with cancer and their partners in facing the end of life

- Case Work
- Psychotherapeutic Groups
- Psycho-educational Workshops
- Psychosocial Programmes

Degree of intensity
The CARE concept in helping couples in end of life

Connection
Affirmation
Resources
Existential concern
The Psychotherapeutic Group

愛・擁抱・希望 - 晚期癌症患者夫婦成長小組
**Themes and objectives**

**Major objectives:**

Cultivate mutual support among members

Explore the strengths in their life journey as a way of coping with terminal cancer

Renew the connection and intimacy between couples that are being blocked by distress

Facilitate the couples to have greater courage in facing separation and death
The couple’s individual work - The Story of Mr and Mrs Wong

- Unknown
- 50 Terminal Liver cancer
- 29
- 25
- 37 New arrival from mainland
The background

• Mr Wong, aged 50, terminal stage of liver cancer

• Found EMA of ex-wife and was forced to divorce 10 years ago, one child had committed offender and was put in jail.

• Depression and under psychiatrist’s treatment since then.

• Met his existing wife 4 years ago. With good support from his wife’s original family. He decided to put all his savings and invest a domestic tea restaurant in mainland and start a new page.

• All in a sudden, he was diagnosed with terminal stage of liver cancer and he was soon disillusioned.
How do we CARE the couple

**Couple Counselling**
Enhance quality of bonding and communication

**Financial Support**
Soothe financial strain caused by illness

**Nursing Care**
Enhance carer’s capability and skill in handling the illness

**Social Activities**
Maintain normality by joining social programmes
The couple

The wife:

• Overwhelmed with the fear of losing the husband.
• Made every endeavors to improve his health condition.

The husband:

• Feeling of helplessness and shameful in facing his deterioration of health
• Stressful to response wife’s expectation.
• Criticized to his wife of not capable to take care of him
What we can see in the process

• Facilitated a healing platform to allow the couple to share their vulnerabilities of facing death

• Facilitated the couple to dialogue truly especially for issue which is being blocked by the distress

• Captured the meaningful experience in their couple relationship

• Ease the tension by conveying humorous

• Ensure Support
HOPE
the core value of being a caring profession

Here and now

Optimistic view
Persistency
Emptiness
Thank you

Special thanks all couples who genuinely shared their time and photos with us.
References


