

PORTFOLIO TITLE: Cancer and the Older Person

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Signed statement:

This portfolio contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and to the best of my knowledge and belief contains no material previously published or written by another person except where due reference has been made in the text.

I give my consent for this copy of my portfolio, when deposited in the University Library, being available for loan and photocopying.

Signed:

Date:

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Overview of research field

This portfolio focuses on cancer in people 65 years and older. It incorporates two research studies conducted at different time-points in the healthcare trajectory: early detection and treatment of cancer. Cancer was chosen from the many chronic illnesses that affect older people because it is feared almost universally as a potentially life threatening illness, has a greater incidence in this population and was an area of professional interest for an oncology nurse practitioner as researcher. The cancer experience was firstly explored with respect to early detection of the most common cancers in a solid organ. The second time point of research documented a lived experience after diagnosis and during treatment for people with newly diagnosed cancer. The selected participants/subjects were people 65 years and older who represent a complex patient population. Compared with younger people, their likelihood of a cancer diagnosis in the setting of co-morbidities is higher and greater longevity allows for a twenty or more year survival span. As a result, they are not a homogeneous group when presenting for cancer screening or with a cancer diagnosis.

Although the cancer experience was studied at two time points, detection and treatment, the studies were conducted in the reverse fashion, the treatment experience studied first. This was because a review of medical and nursing literature pertaining to older people and cancer revealed the research to be fragmented across age groups and cancers with little qualitative research in the newly diagnosed patient. A qualitative approach was chosen as it can reveal aspects and nuances of a healthcare experience that empirical inquiry cannot capture and in the case of this study allowed the study group opportunity to describe their experience of diagnosis and treatment. Hearing about an experience ‘first hand’ from a study population can provide caregivers with a better understand of healthcare needs and highlight need for improvement in care during treatment.

This research portfolio commences with documentation of a lived experience of older people newly diagnosed with cancer after treatment was initiated. One sub theme identified in this study was misinformation about age as a risk factor for cancer. This sub theme and a subsequent literature review revealed little research about the state of cancer knowledge among older people. This concept was used to develop the second study in older people with no prior history of cancer. This study measured knowledge about

cancer, attitude to cancer and self-reported personal history of early detection tests for the most common cancers, and then utilized correlation tests to explore positive or negative relationships between health beliefs and health behavior. The findings from both studies have been used to present a viewpoint about and recommendations for further research about cancer, older people, their healthcare and healthcare providers.

The portfolio is structured as follows; section 1 introduces the portfolio with overviews of each study and the conclusion. Section 2 contains the qualitative study titled ‘The Lived Experience of Elderly People Receiving Conventional Treatment for a New Cancer Diagnosis’. Section 3 presents the quantitative study titled ‘Knowledge, Attitudes and Perceptions about cancer risk in the 65-year and older population. Is there an influence on screening behavior for breast, prostate and colorectal cancers?’ while section 4 contains the conclusion to the portfolio.