Professionally-led advanced and metastatic cancer support groups: a scoping review to understand effectiveness and factors influencing implementation success

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Background

People with advanced or metastatic cancer have cancer that has spread to other parts of their body. It is usually incurable. Novel therapies mean that many people are living much longer with an advanced or metastatic diagnosis. It is important that they are supported to live well in the years that they have. Support groups are a great way of helping people to understand their cancer, its treatment and what they can do to help themselves.

Methods

Databases (MEDLINE; PsychINFO; CINAHL) and the grey literature were searched for empirical publications and evaluations.

Articles were double-screened for eligibility and data systematically extracted, charted and summarised using a modified Arksey and O'Malley scoping review methodology.

Implementation factors, including outcomes, barriers and enablers, were mapped against the Consolidated Framework for Implementation Research (CFIR 2.0).

Study characteristics

- 1690 publications identified of which 20 eligible for inclusion (8 RCTs; 8 qualitative; 2 cohort; 2 mixed-methods)
- 19 studies reported on tumour-specific cancer support groups
 (15 metastatic breast; 1 metastatic prostate; 1 advanced ovarian;
 1 brain cancer; 1 mesothelioma); 1 on a mixed tumour group
- Majority reported on groups (n=16) for patients; n=4 reported on groups for family members and caregivers
- All reported on groups delivered face-to-face, one of which had a hybrid format (simultaneous face-to-face/teleconference)
- Most groups met weekly
- Many were informed by a psycho-theoretical framework, typically supportive-expressive group therapy

Results: effectiveness (n=8 RCTs and 2 cohort studies)



Psychosocial functioning

Significant improvements in:

- Mood disturbances (n=5)
- Stress (traumatic stress, depression) (n=4)
- Social functioning (n=1)

No significant improvements in:

Overall quality of life (n=3)

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Illness-related pain

Significant improvement in:

• Self-reported pain (n=2).

Results: perceived benefits (n=10 qual / mixed methods studies)



Psychosocial functioning Loneliness and isolation

Helped to deal with

existential distress

(n=6)

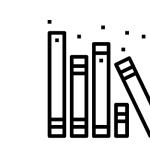
Regained hope (n=2)

Regained a sense of

control (n=2)

Improvement in:

- Connection (n=8)
- Relationships with family (n=3)



Knowledge

Improved knowledge:

- Treatment (n=6)
- Resources (n=6)



Communication

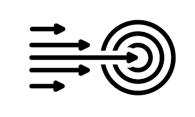
Improved communication with:

 Health care professionals (n=3)

Results: factors affecting implementation (n=13 studies)







Acceptability Feasibility (n=12 studies)

Appropriateness (n=1 study)

Key determinants of implementation success:

- The extent to which the needs of people with advanced or metastatic cancer were accurately known and prioritized by the organization and staff delivering the support groups
- The capacity to adapt the running and delivery of a support group to meet the needs of a particular patient group within a particular organizational setting
- The capability of the support group facilitators to deliver the groups, including their skills, experience and access to training and ongoing clinical supervision







