The impact of cancer on the entire family has received greater research and clinical attention since 2002 (Braun, Mikulincer, Rydall, Walsh, & Rodin, 2007; Kim & Given, 2008). Given the reduction in healthcare resources and the growth of outpatient care, family caregivers increasingly have assumed responsibilities previously performed by healthcare professionals. Family caregivers include those who assist a relative or friend diagnosed with cancer. That assistance includes medical and personal care, as well as informational, emotional, or financial support (Nijboer et al., 1998; Stajduhar et al., 2010). The role of caregiving frequently is associated with multiple stressors, including disrupted household and work routines, family role changes, emotional distress, financial burden, and health problems of the caregiver (Gaugler et al., 2005; Molassiotis, Wilson, Blair, Howe, & Cavet, 2011a; Östlund, Wennman-Larsen, Persson, Gustavsson, & Wengström, 2010; van Ryn et al., 2011).

Family caregivers of patients with cancer have reported as much or greater emotional distress than the patients themselves (Carmack Taylor et al., 2008; Grunefeld et al., 2004; Hasson-Ohayon, Goldzweig, Braun, & Galinsky, 2010; Molassiotis et al., 2011b). An estimated 20%–30% of family caregivers of patients with cancer report clinically significant distress (Pitceathly & Maguire, 2003), and positive associations between patients’ and caregivers’ psychological adjustment have been found (Hodges, Humphris, & Macfarlane, 2005; Northouse, Mood, Templin, Mellon, & George, 2000). Although fewer studies have focused on the physical health of caregivers of patients with cancer, research does show impaired physiologic responses in naturalistic (King, Atienza, Castro, & Collins, 2002) and laboratory (Kiecolt-Glaser, Marucha, Malarkey, Mercado, & Glaser, 1995) settings and worsening physical health as the patient’s illness progresses (Kurtz, Given, Kurtz, & Given, 1994). For example, caregivers...