The Need to Be Superman: The Psychosocial Support Challenges of Young Men Affected by Cancer

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For many cancers, young adult survival outcomes have not improved in decades (Bleyer, 2011), and general consensus is that this lack of improvement stems from a combination of biologic, medical, and social influences (Bleyer, 2011; Fernandez et al., 2011). As a result, the psychosocial aspects of the young adult cancer experience are receiving increased focus (Morgan, Davies, Palmer, & Plaster, 2010; Zebrack, 2008), including consequences for quality-of-life indicators (e.g., relationships with partners and family, inability to engage in daily activities, fertility issues) (Clinton-McHarg, Carey, Sanson-Fisher, Shakeshaft, & Rainbird, 2010).

Through several mechanisms, psychosocial support can affect health and well-being (Fernandez et al., 2011). Clinician-patient communication has been linked to health and well-being through proximal outcomes of agreement, trust, and understanding, as well as increased adherence and enhanced self-care (Street, Makoul, Arora, & Epstein, 2009). Considering the importance of psychosocial support, young adults reporting age group-appropriate support as a consistent unmet need in various facets of their lives, including mental health and relationships, is troubling (Zebrack, 2008).

Adding to the challenge is that men are less likely to seek support and information than women, more reluctant than women to consult their doctors, less knowledgeable about health, and show poorer psychosocial adaptation to cancer than women (Chapple & Ziebland, 2002; Galdas, Cheater, & Marshall, 2005; Nicholas, 2000). Disparities in men’s and women’s health outcomes are, in large part, attributed to men’s beliefs that they should be independent and not seek help (Chapple & Ziebland, 2002; Nicholas, 2000). These beliefs are a ubiquitous feature of social life created by and through individual interactions with others (Courtenay, 2000; Moynihan, 1998; Oliffe, 2007). In the context of health, these displays of masculinity put men at greater risk and create challenges to identity reconstruction (Courtenay, 2000; Gurevich, Bishop, Bower, Malka, & Nyhof-Young, 2004).

How men with cancer view their own masculinity is not only influenced by cultural ideals about what a man is and should be (i.e., stoic and independent) (Moynihan, 1998), but also is constrained by the inherently chaotic and emotional experience of cancer (Becker, 1997). Research on men with testicular and prostate cancers is focused mostly on older men and illustrates the tension between appearing strong and feeling ill, being independent and needing help (Gurevich et al., 2004; Oliffe & Thorne, 2007; Oliffe, Ogrodniczuk, Bottruff, Hislop, & Halpin, 2009). Importantly, this research