Relationship Between Depressive Symptoms and Social Cognitive Processing in Partners of Long-Term Breast Cancer Survivors

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Purpose/Objectives: To determine (a) if depressive symptoms in partners of long-term breast cancer survivors (BCSs) could be predicted by social cognitive processing theory and (b) if partners of younger and older BCSs were differentially affected by the cancer experience.

Design: A cross-sectional, descriptive study using self-report questionnaires.

Setting: Indiana University in Bloomington and 97 ECOG-ACCRIN Cancer Research Group sites in the United States.

Sample: 508 partners of BCSs diagnosed three to eight years prior to the study.

Methods: Secondary data mediation analyses were conducted to determine if cognitive processing mediated the relationship between social constraints and depressive symptoms. Age-related differences on all scales were tested.

Main Research Variables: Depressive symptoms; secondary variables included social constraints, cognitive processing (avoidance and intrusive thoughts), and potentially confounding variables.

Findings: Cognitive processing mediated the relationship between social constraints and depressive symptoms for partners. Partners of younger BCSs reported worse outcomes on all measures than partners of older BCSs.

Conclusions: As predicted by the social cognitive processing theory, cognitive processing mediated the relationship between social constraints and depressive symptoms. In addition, partners of younger BCSs fared worse on social constraints, intrusive thoughts, and depressive symptoms than partners of older BCSs.

Implications for Nursing: Results provide support for using the social cognitive processing theory in an intervention design with partners of long-term BCSs to decrease depressive symptoms.

The number of breast cancer survivors in the United States continues to increase, and, as this survivor group expands, so does the number of partners affected by the illness. An estimated 20%–40% of spouses suffer from mood disturbances, including depression, anxiety, and other affective disorders related to their spouses’ illness (Braun, Mikulincer, Rydall, Walsh, & Rodin, 2007; Nakaya et al., 2010). Previous literature has reported that partners of women with breast cancer report more depressive symptoms than partners of healthy controls or the patients themselves (Moreira & Canavarro, 2013; Nakaya et al., 2010).

Although survivors’ depressive symptoms tend to decrease over time, past research has found clinically significant levels of depression in 18%–27% of survivors even years after diagnosis and treatment (Champion et al., 2014). Because past studies have found varying degrees of concordance between survivor and