

Improving Oncology Nurses' Knowledge About Nutrition and Physical Activity for Cancer Survivors

Merel R. van Veen, MSc, Meeke Hoedjes, PhD, Joline J. Versteegen, MSc, Nienke van de Meulengraaf-Wilhelm, Ellen Kampman, PhD, and Sandra Beijer, PhD

van Veen is a junior researcher at the Netherlands Comprehensive Cancer Organisation in Utrecht and a PhD student in the Division of Human Nutrition at Wageningen University in the Netherlands; Hoedjes is a postdoctoral researcher in the Department of Health Sciences and the EMGO Institute for Health and Care Research (EMGO+) at Vrije Universiteit (VU) Amsterdam in the Netherlands; Versteegen is a researcher in the Division of Human Nutrition at Wageningen University and in the Department of Health Sciences and the EMGO+ at VU Amsterdam; and van de Meulengraaf-Wilhelm is an advisor of oncology care and an oncology nurse at the Netherlands Comprehensive Cancer Organisation; Kampman is a professor in the Division of Human Nutrition at Wageningen University; and Beijer is a senior researcher at the Netherlands Comprehensive Cancer Organisation.

This research was funded by Alpe d'Huzes/Dutch Cancer Society.

van Veen, Hoedjes, Versteegen, and Beijer contributed to the conceptualization and design and provided the statistical support and analysis. van Veen, Hoedjes, Versteegen, van de Meulengraaf-Wilhelm, and Beijer completed the data collection. All authors contributed to the manuscript preparation.

van Veen can be reached at m.vanveen@iknl.nl, with copy to editor at ONFEditor@ons.org.

Submitted October 2016. Accepted for publication December 16, 2016.

Keywords: patient education; health-promotion behavior; nutrition; physical activity

ONF, 44(4), 488–496.

doi: 10.1188/17.ONF.488-496

Purpose/Objectives: To assess what percentage of oncology nurses perceived themselves as having insufficient knowledge to provide advice on nutrition and/or physical activity (PA), which characteristics were associated with nurses' perception, and whether the content and information sources differed among those nurses.

Design: A cross-sectional study.

Setting: A web-based survey among oncology nurses in the Netherlands.

Sample: 355 oncology nurses provided advice on nutrition; of these, 327 provided advice on PA.

Methods: From May to July 2013, oncology nurses were invited to complete an online questionnaire. Pearson's chi-squared tests and uni- and multivariate logistic regression analyses were conducted.

Main Research Variables: Oncology nurses' perception of having sufficient or insufficient knowledge to be able to provide advice on nutrition and PA, the content of the advice, and the information sources on which the advice was based.

Findings: 43% of oncology nurses perceived themselves as having insufficient knowledge to provide advice on nutrition, and 46% perceived insufficient knowledge to provide advice on PA. Factors associated with perceiving insufficient knowledge on nutrition were being aged younger, having lower education, and providing counseling during treatment only. Those nurses were more likely to suggest taking oral nutritional supplements or visiting a dietitian and were less likely to provide information on fluid intake. Nurses perceiving insufficient knowledge about PA used oncology guidelines less often.

Conclusions: Almost half of the oncology nurses providing advice on nutrition and PA perceived themselves as having insufficient knowledge to be able to provide such advice. In particular, younger oncology nurses and oncology nurses with an intermediate vocational education may benefit most from education about these topics.

Implications for Nursing: Educational training for oncology nurses should include nutrition and PA. Oncology nurses should collaborate with dietitians to discuss what information should be provided to patients by whom, and specific PA advice should be provided by a physical therapist.

Oncology nurses play a key role in the provision of information for cancer survivors, defined as people who are living with a diagnosis of cancer, including those who have recovered from the disease (World Cancer Research Fund/American Institute for Cancer Research, 2007). Oncology nurses frequently meet with cancer survivors from diagnosis until follow-up after treatment, generally having more time to spend with survivors than oncologists. Therefore, they have ample opportunities to provide information and advice and to answer questions that may arise throughout the treatment process and thereafter (Ewing, 2015; Ocker & Plank,