Coming of Age With Cancer: Physical, Social, and Financial Barriers to Independence Among Emerging Adult Survivors

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PURPOSE: To explore the transition to self-care among a sample of emerging adult cancer survivors after hematopoietic cell transplantation (HCT).

PARTICIPANTS & SETTING: 18 HCT survivors who were aged 18–29 years at the time of HCT for a primary hematologic malignancy and were 8–60 months post-HCT participated in the study. The study took place in the hematology outpatient setting at City of Hope National Medical Center.

METHODOLOGIC APPROACH: The authors conducted in-depth semistructured interviews and analyzed interview transcripts using grounded theory methodology.

FINDINGS: Health-related setbacks following HCT disrupted not only participants’ journey toward self-care, but also their overarching developmental trajectory toward adulthood. Physically, participants struggled with lack of personal space around caregivers, but felt unready to live on their own. Socially, they relied on multiple caregivers to avoid relying too much on any one person. Financially, participants worried about prolonged dependence and increased needs in the future.

IMPLICATIONS FOR NURSING: Nurses can support the transition to self-care among emerging adults after HCT by recognizing the broader developmental impact of their cancer experience.

KEYWORDS adolescent; young adult; emerging adult; hematopoietic cell transplantation; self-care

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Emerging adulthood refers to a distinct life stage between adolescence and adulthood, specifically from age 18 years to the mid to late 20s. Building on the work of Erik Erikson and Daniel Levinson in developmental psychology, Arnett (2004) first proposed emerging adulthood and defined five key attributes: identity exploration, instability, self-focus, feeling in-between, and possibilities. According to this theory, profound demographic shifts, social revolutions, and economic realities have resulted in a protracted developmental trajectory (Arnett, 2014; Blatterer, 2007). Specifically, compared with previous generations, emerging adulthood in the contemporary era reflects delayed entry into the traditional spheres of adulthood, such as marriage, parenthood, and a steady career.

During this life stage, young people experiment with possibilities, particularly in the areas of love and work, to define their preferences and gain a clearer picture of who they are and what they want out of life. No longer adolescents, but not yet fully adults, emerging adults occupy an in-between space. As individuals progress through the stage, they become more serious in their life choices and commitments. The developmental goal of emerging adulthood is self-sufficiency, which lays the foundation for an independent adulthood. Across multiple studies, emerging adults consistently identify accepting responsibility for oneself, making independent decisions, and achieving financial independence—rather than marriage or parenthood—as the key signifiers of adulthood (Arnett, 2014).

In general, emerging adults are an exceptionally healthy group, with nearly all (96.3%) in the age 18–24 year range reporting excellent, very good, or good health (Mulye et al., 2009). This norm makes a cancer diagnosis during this stage unexpected, complex, and