Cancer remains a leading cause of death in both highly developed nations faced with an ever-aging population and in poor, developing nations that struggle with minimal healthcare resources for vast populations. In many nations, concurrent illnesses such as malaria, tuberculosis, and AIDS impact cancer care and the high mortality rates are accompanied by immense suffering due to factors such as lack of opioid availability and limited access to hospice or palliative care services.

In the United States, 570,000 people die of cancer annually and, worldwide, about 7.6 million people will die of cancer in 2011 (Jemal et al., 2011; Siegel, Ward, Brawley, & Jemal, 2011). For each of these people, the final chapter of their life can be not only a time of grief or suffering, but also an opportunity for profound healing, comfort, and growth. This opportunity is made possible by the expert psychosocial and physical care provided by compassionate and competent oncology nurses worldwide.

Challenging the Paradigm of Care

Nurses have contributed greatly to psychosocial care by challenging existing paradigms of care. Oncology has evolved as a specialty with a focus on extending life or curing disease despite the reality of the high prevalence of advanced disease and deaths from cancer. Bringing attention to psychosocial needs requires challenging existing values, beliefs, and systems of care.

An excellent example of nurses challenging existing paradigms of care is within the Veterans Administration (VA) hospitals in the Unites States. The VA has made a major commitment to advancing palliative care and nurses have been at the forefront of these efforts. These VA nurses have challenged the practice of hospital deaths being hidden or silenced, with patients who die