Does Blaming the Patient With Lung Cancer Affect the Helping Behavior of Primary Caregivers?

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Lung cancer is a devastating and stigmatizing disease that challenges interpersonal dynamics between the primary caregiver and the patient. The stigma associated with lung cancer is likely related to the fact that more than 90% of lung cancers in men and at least 70% in women are directly attributable to cigarette use (Gaudette, Altmayer, Wysocki, & Gao, 1998). Researchers also have found that cigarette smokers experience negative public sentiment (Kim & Shanahan, 2003), which can have a profound effect on the relationship between primary caregivers and patients.

How primary caregivers assist patients often is mediated by relationship characteristics between patients and caregivers (Aaronson, 1991; Phillips et al., 1995; Taylor, Ferrell, Grant, & Cheyney, 1993). Primary caregivers (i.e., spouses, family, friends, or informal or family caregivers) may blame the patient with lung cancer for having the disease through their tobacco use. The literature indicates that blaming or being angry toward patients with lung cancer can alter helping behavior and usual lines of communication between primary caregivers and patients (Chapple, Ziebland, & McPherson, 2004; Cooper, 1984; Zhang & Siminoff, 2003a). Changes in light of extensive media coverage of the link between tobacco use and lung cancer, a lung cancer diagnosis has become a stigmatization primarily brought on by the patient’s behavior.

A number of qualitative studies have reported that patients with lung cancer are confronted with intensely negative reactions from acquaintances, friends, family, and doctors, and feel unjustly blamed for their illness. Best practice for patients with lung cancer and their primary caregivers can be enhanced by routine nursing assessments that identify caregivers harboring negative judgments toward their patients. Educational interventions may help change illness attributions associated with a lung cancer diagnosis.

Key Points . . .

➤ In light of extensive media coverage of the link between tobacco use and lung cancer, a lung cancer diagnosis has become a stigmatization primarily brought on by the patient’s behavior.
➤ A number of qualitative studies have reported that patients with lung cancer are confronted with intensely negative reactions from acquaintances, friends, family, and doctors, and feel unjustly blamed for their illness.
➤ Best practice for patients with lung cancer and their primary caregivers can be enhanced by routine nursing assessments that identify caregivers harboring negative judgments toward their patients. Educational interventions may help change illness attributions associated with a lung cancer diagnosis.