

# An Online Forum Exploring Needs for Help of Patients With Cancer: Gender and Ethnic Differences

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**Purpose/Objectives:** To explore gender and ethnic differences in needs for help among patients with cancer.

**Research Approach:** Qualitative.

**Setting:** Internet and community settings.

**Participants:** 16 self-identified patients with cancer aged at least 18 years who could read and write English.

**Methodologic Approach:** Using six discussion topics on needs for help, an online forum was administered for one month. Data were analyzed with thematic analysis.

**Main Research Variables:** Need for help.

**Findings:** Four major themes emerged: (a) from side effects to racism, (b) same or double stress, (c) cultural hesitance and God, and (d) a family disease with mistrust. Depending on gender and ethnicity, the participants' concerns were various and ranged from a simple physical need to a social need for elimination of racism in United States society. Women tended to report double burden and stress as patients with cancer resulting from their gender. Ethnic minorities tended to be hesitant to talk about cancer or seek help because of the stigmatized nature of cancer. Ethnic minority patients perceived cancer as a family disease that they needed to go through as a family, and they tended to mistrust healthcare providers.

**Conclusions:** The overriding theme was a marginalized experience for ethnic minority patients with cancer.

**Interpretation:** Researchers should include cultural needs as a separate category of needs and consider contextual factors influencing the needs of patients with cancer in their daily lives.

Gender differences in needs for help of patients with cancer have not been explicitly explored. Rather, most studies have implicitly supported gender differences in diverse aspects of cancer-related needs (Sanson-Fisher et al., 2000; Thome & Hallberg, 2004). In a recent study examining concerns of patients with lung cancer, women tended to report a significantly larger number of concerns than men (Hill, Amir, Muers, Connolly, & Round, 2003). The instruments measuring needs for help of patients with cancer were developed separately for breast cancer and prostate cancer (Dale, Jatsch, Hughes, Pearce, & Meystre, 2004; Templeton & Coates, 2001). Gender differences in help-seeking behaviors also imply gender differences in perceived needs for help: Men are more likely to seek information, whereas women are more likely to seek encouragement and support (Dale et al.;

## Key Points . . .

- ▶ Patients with cancer have various types of needs for help, ranging from a simple physical need to a social need for elimination of racism in U.S. society.
- ▶ The Confucian culture of Asian populations prescribes that women should be wise mothers and good wives, meaning that Asian women can suffer from the additional burden of household work while struggling with cancer.
- ▶ A cultural attitudes stigmatizing cancer of sexual organs and emphasizing “macho men,” causes some Hispanics to not seek help because of embarrassment.
- ▶ Ethnic minority patients might not disclose their diagnoses or openly seek help for their needs because of the stigmatized nature of cancer.

Klemm, Hurst, Dearholt, & Trone, 1999; Sharf, 1997). Also, studies on pain and symptoms of patients with cancer imply gender differences in physical needs. In a systematic review of the literature on gender differences in pain, fatigue, and depression, Miaskowski (2004) reported that research studies yielded inconsistent results. Some recent studies reported no differences (Edrington et al., 2004; Turk & Okifuji, 1999),

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