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Health-Seeking Behaviors and Sexuality in Rectal Cancer Survivors in Taiwan: Associations With Spirituality and Resourcefulness

Tsay-Yi Au, PhD, RN, Jaclene A. Zauszniewski, PhD, RN-BC, FAAN, and Tai-Ming King, MD, MBA

ectal cancer survival in Taiwan has greatly increased from a 51% five-year survival rate in 1997 to a 56% in 2011 (Taiwan Department of Health, 2011) because of screening and early detection, as well as innovation in treatment. However, adverse effects on sexuality for rectal cancer survivors remain an important issue (Au, Zauszniewski, & King, 2011). Living with a chronic illness and experiencing sexual dysfunction can produce overwhelming stress and further compromise an individual's physical and psychological health and well-being. Literature has shown that patients with cancer are more likely to abandon sexual activity than their healthy partners because they are emotionally and psychologically unprepared (Andersen & ven der Does, 1994). For patients with cancer, sexuality may have special significance of life and vitality, and experiencing cancer and its treatment may cause them to reassess their meaning of living (Rice, 2000).

Spirituality is perceived as an important dimension in helping people reach their sexual potential (Helminiak, 1998), and resourcefulness is a learned collection of cognitive-behavioral skills that are important to assist individuals in coping with stressful situations, which may have an impact on their well-being (Zauszniewski, 2006). Spirituality and resourcefulness can be defined as an individual's health-seeking behaviors (HSBs) for coping with stressful situations. Little is known about the effect of HSBs, such as spirituality and resourcefulness, and sexuality on patients with rectal cancer undergoing treatment. The goal of this analysis was to examine the relationships between those two HSBs and indicators of sexuality in this patient group (see Figure 1).

Background

Rectal cancer survivors' sexuality often is overlooked or neglected in terms of quality of life (Au, Zauszniewski, Daly, Gary, & Deimling, 2010). Prior research in **Purpose/Objectives:** To examine the relationships between two health-seeking behaviors (HSBs), spirituality and resourcefulness, as well as demographics, cancer-related factors, and sexuality indicators, within the context of Schlotfeldt's health-seeking model in rectal cancer survivors.

Design: Secondary analysis, correlational, and cross-sectional.

Setting: A teaching hospital in southern Taiwan.

Sample: 120 adults with rectal cancer.

Methods: Data were collected during face-to-face interviews using the Body-Mind-Spirit Well-Being Inventory–Spirituality scale; Resourcefulness Scale; Sexual Self-Schema Scale (male and female versions); Evaluating and Nurturing Relationship Issues, Communication, Happiness (ENRICH) Couple Scale–Communication; ENRICH Sexual Relationship Scale; International Index of Erectile Function; and the Female Sexual Function Index. Correlational analysis, one-way analyses of variance, and independent sample t tests were used to analyze data.

Main Research Variables: Spirituality, resourcefulness, HSBs, and sexuality.

Findings: Spirituality and resourcefulness were associated with sexual self-concept and sexual satisfaction in men and women. Spirituality was correlated with resourcefulness. Greater resourcefulness was found in women, as well as in men and women who had higher education and fewer comorbid conditions. Spirituality was not associated with gender, education, or number of comorbid conditions. Neither spirituality nor resourcefulness was associated with age, religion, stage of disease, time since surgery, type of cancer treatment, or sexual function.

Conclusions: Resourcefulness and spirituality were associated with the sexuality indicators of satisfaction and self-concept, which may have an impact on the physical and psychological health of adults with rectal cancer.

Implications for Nursing: The findings suggest a need to focus on strengthening HSBs through teaching resource-fulness and encouraging spirituality to enhance sexual self-concept and improve sexual satisfaction in this patient group.