

# The Impact of Yoga on Quality of Life and Psychological Distress in Caregivers for Patients With Cancer

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**C**ancer statistics and projections indicate that, at some point, the majority of the population will know a close social network member with cancer (Segrin & Badger, 2010). The acute and long-term effects of a cancer diagnosis extend beyond the patient with cancer to social network members, including spouses or partners, immediate family members, and friends (Kim & Given, 2008; Kitrungroter & Cohen, 2006; Northouse et al., 2007). As the prevalence of cancer increases, a greater amount of patients will need to rely on informal caregivers for support from diagnosis into survivorship (Edwards et al., 2002). Cancer survivors with increasingly complex needs are cared for at home at some point during the cancer continuum, and more than half of the care required by survivors is provided by an informal caregiver (Blum & Sherman, 2010).

Informal caregivers are required to meet the multidimensional needs of the survivor, including treatment monitoring; symptom management; emotional, financial, and spiritual support; assistance with personal and instrumental care; transportation to and coordination of medical appointments; administering treatments; and assisting with activities of daily living (Cameron, Shin, Williams, & Stewart, 2004; Given, Given, & Kozachik, 2001; Kim & Schulz, 2008). These responsibilities may adversely affect caregivers who lack adequate resources or are insufficiently prepared for the complex role (Baider, 2011). The physical and psychological toll of caring for a cancer survivor often results in psychological distress that is greater than or equal to the distress experienced by the survivors (Braun, Mikulincer, Rydall, Walsh, & Rodin, 2007; Couper et al., 2006; Grunfeld et al., 2004; Hinnen et al., 2008; Hodges, Humphris, & Macfarlane, 2005; Kim, Kashy, Spillers, & Evans, 2010; Manne et al., 2007; Matthews, 2003; McCorkle, Siefert, Dowd, Robinson, & Pickett, 2007; Mellon, Northouse, & Weiss, 2006; Rabin et al., 2009; Sjövall et al., 2009). Caregivers whose psychosocial needs are not met have reported poorer mental health and quality of life (QOL) (Rivera, 2009).

**Purpose/Objectives:** To assess the effects of a six-week Vinyasa yoga (VY) intervention on caregivers' overall quality of life (QOL) and psychological distress.

**Design:** A single-group, pre- and post-test pilot study.

**Setting:** University public recreational facility.

**Sample:** 12 informal caregivers for patients with cancer.

**Methods:** Caregivers participated in a six-week VY intervention and completed measures of QOL and psychological distress pre- and postintervention. Program satisfaction was measured with open-ended survey questions.

**Main Research Variables:** QOL, psychological distress, and program satisfaction.

**Findings:** Significant improvements were found in the mental component score of overall QOL and in overall psychological distress. Several subdomains of QOL and psychological distress were also improved significantly. Open-ended survey question responses revealed participants perceived physical and mental benefit from the intervention, highlighting improvements in flexibility, core and upper-body strength, balance, breathing, and energy.

**Conclusions:** Informal caregivers may benefit mentally and physically from participating in VY.

**Implications for Nursing:** Caregivers of patients with cancer characterize a group worthy of attention, research, and interventions focusing on their healthcare needs.

**Key Words:** yoga; quality of life; distress; caregiver; cancer  
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Caregivers of patients with cancer are a group worthy of attention, research, and interventions focusing on their unique healthcare needs (e.g., psychological and emotional distress, personal care or medical issues, unmet activity needs) (Kim et al., 2010). Because of the evidence regarding the negative effects of caregiving, interventions aimed at improving overall QOL and reducing psychological distress in caregivers are long overdue. Maintaining or improving QOL and reducing the psychological distress of caregivers is important not only for caregivers' health, but also for the caregivers'