

The Importance of Patient Education

Patient education plays a major role in empowering patients and families with cancer. Educating patients about their disease, treatment, side effect management and quality of life can reduce patient anxiety, enhance coping mechanisms, reduce decisional conflicts, promote patient autonomy and improve the experience for patients and families. Patients who understand their disease and treatment have greater compliance with therapy, which translates into better outcomes.

Studies on information needs of cancer patients are well documented in the literature. Given the complex nature of the disease, the cancer care system and treatment modalities, cancer patients and families have a variety of information/educational needs throughout their cancer journey. Information concerning cancer diagnosis, treatment and support services is typically the highest priority for patients and families.

Adult Learning Principles

Health professionals should incorporate adult learning principles into patient teaching activities. Understanding and applying these principles will make learning more effective and individualized for patients and families:

- **Adults need to know why they need to learn.** Adults learn best when they perceive a need to learn. Ask patients about their goals and concerns; explain the importance of education to prevent and manage problems and provide self care, etc. Be alert to cues signaling the patient's need to learn. The more the patient recognizes the need to learn, the more relevant or important he/she perceives the information to be, the more motivated they will be to learn and use the information presented.
- **Adults need to be self directed.** Offer a variety of learning methods: readings, audiovisuals, demonstration, etc. Adults retain information when taught with tools that correspond to their own learning style.
- **Adults' past experiences are resources for learning.** Ask about past learning experiences or life experiences; use this knowledge to convey information or prepare patients for new tasks. Teaching should take prior learning and experiences into account.
- **Adults' readiness to learn emerges from life's developmental stages.** Capitalize on the readiness to learn prompted by this new life stage.
- **Adults' learning is task oriented or problem oriented.** Use patients' interest in learning about their new problems. Identify tasks that patients need to accomplish during cancer treatment. Adults are most interested in learning that will improve their well being or solve their problems, especially their immediate problems.
- **Adults are motivated by internal pressures.** Focus on issues important to patients as these enhance motivation to learn e.g. quality of life, ability to work, etc.

Learning Styles

There are four basic learning styles: visual, visual reading, auditory and kinesthetic. We use all four styles, but our preferences affect the way in which we best take in information. Adapting your teaching strategies to suit your patient's learning style will enhance their ability to learn.

People with Visual Preferences:

- Like to arrange their space and their work; remember what they see rather than what they hear, forget to relay verbal messages

- Need to see the 'whole picture' before they have a clear idea
- Respond to colour, art, mapping; may know what to say but have difficulty coming up with the right words
- Like to have a plan, good organizers, would rather show you than tell you
- Are often good spellers, usually need to have verbal instructions repeated

For these patients incorporate diagrams, videos, computer resources and demonstrations into your teaching.

People with Visual Reading Preferences:

- Enjoy reading and would rather read than be read to
- Often reread (silently), rewrite notes, ideas; remember written directions well
- Like handouts, prefer information in words as opposed to charts, diagrams
- Like to use dictionaries, manuals, texts; visualize word spellings

Providing these patients with handouts, brochures, reading lists and written instructions can be helpful.

People with Auditory Preferences:

- Talk to themselves; like to talk through a problem; read aloud; often move their lips and pronounce the words as they read; often repeat words to hear them
- Often good speakers; speak in rhythmic patterns; remember what they hear
- Don't visualize well; can spell better out loud; respond to patterns of sound, speech, music
- Find writing difficult; are talkative, love discussion; can find it difficult to read facial and body language

For these patients, verbally reinforce the steps of the procedure you are teaching and ensure you discuss any resources/instructions you share with them during the teaching session.

People with Kinesthetic Preferences:

- Need to move a lot; can't sit still for long periods; like to experiment and practice
- Like to touch and be physically involved with materials; memorize by walking and seeing
- May have messy handwriting; use a finger as a pointer when reading; gesture a lot
- Respond to movement, gestures, dance; want to act things out
- Have difficulty remembering a place unless they've actually been there

For these patients, make sure you incorporate movement into your teaching session (e.g. practicing a skill, touring different areas of the treatment centre, handling medical devices/models, etc.).

Assessment of Learning Needs

An assessment must be conducted before initiating patient education to identify learning needs, readiness to learn and situational and psychosocial factors influencing learning. Questions to be considered in the learning needs assessment include:

- Demographic information such as age, occupation, education, literacy level, ethnic/cultural background, etc
- What does the patient already know, what is their current level of knowledge/ understanding of the situation, treatment, self care, tests, etc.?
- What are their expectations of treatment?
- What does the patient need to know? Prioritize information based on need to know versus nice to know. Identify cognitive, psychomotor and affective learning needs.
- What does the patient want to know? This may differ from what you want the patient to know.
- How does the patient learn best? What is their preferred learning style?
- Is the patient physically and emotionally ready to learn? Are there vision, hearing, speech, language, or cognitive impairments to learning? Is the patient experiencing emotional distress?

- What are the patient's attitudes, reactions, and feelings about the disease and treatment?
- Are there cultural or religious beliefs that may impact teaching and learning?
- What are the patient's social supports? What social or environmental factors may impact learning or ability to carry out self care?

Approaches

Education is an ongoing process and should be provided in a variety of ways to meet the individual needs of patients. Formal or informal approaches using individual or group teaching supported by various teaching strategies such as print material, computer based education programs, interactive multimedia technology, audiovisual programs and support groups are widely used. Regardless of the approach used, health professionals must continuously reinforce learning throughout the provision of care.

Recognize and remove barriers to learning. For example, anxiety and emotional distress can impede learning. It is important to recognize and acknowledge the patient's emotional responses before proceeding with implementing teaching. Implement necessary environmental adaptations to ensure that teaching takes place in an environment conducive to learning.

Helpful Hints:

- Where possible provide education prior to first treatment. This helps to alleviate some of the anxiety associated with the treatment experience and may facilitate retention of information.
- Ensure consistency. Develop formal processes to ensure that each health professional conveys consistent information e.g. standardized education handouts, use of checklists etc.
- Give information in small amounts when possible so as not to overwhelm patients. Avoid information overload. Proceed from simple to complex. The depth and amount of information needs to reflect the patient's learning and coping styles and time constraints. Reevaluate learning needs on an ongoing basis and provide information throughout the disease continuum. Utilize opportunities for patient education during each encounter. Be aware of "teachable" moments.
- Ensure that the quality of print materials meets the patients' reading abilities, knowledge base and is culturally sensitive.
- Allow sufficient time and opportunity for repeat demonstration of motor skills and repetition of material.
- Involve family/significant other in the learning process where possible.
- Use plain, simple language without medical terminology.
- Reduce distraction and competition from other demands.
- Suggest patients prepare a question list before appointments; recommend they take notes or have a family member or friend accompany them to appointments/ teaching sessions.
- Make referrals to appropriate agencies for support/reinforcement of learning where necessary.
- Documentation of teaching and patient responses is essential if there is to be a coordinated and consistent approach to patient teaching.
- Evaluating the patient's understanding at the end of teaching is important to determine whether additional teaching/reinforcement is needed. Informal evaluations may be done during conversations with patients; subjective and objective data may be used in evaluating learning. Modify the teaching based on evaluation data.

Resources provided by CCNS via cancercare.ns.ca:

The CCNS website provides a wide range of information including: publications for patients and families; questions patients should ask during their first visit to the cancer centre; and information about treatment, clinical trials, palliative care and support services.

- Cancer Answers- a lecture series designed by *Cancer Care Nova Scotia*. Four lectures, each dedicated to a specific cancer-related topic, are held each year.
- Cancer Care: A Guide for Patients, Families and Caregivers. This booklet answers some practical questions about the first appointment, staying in the hospital, what to expect during treatment, and additional services in the area. Two versions of the booklet are available - one for patients who will be receiving treatment at the Cape Breton Cancer Centre and another for those receiving treatment at the QEII.
- Cancer Medication Patient Information Sheets –these resources address how to take medications, precautions and side effects. Patients and HCP can search for medications by name or by cancer diagnosis on our website. Copies are available via the CDHA print shop.
- Catalog of Patient Education Materials
- Guidelines for the Development of Patient Education Materials, which includes the Patient Education Resource Approval Process
- Living Well with Cancer patient information sheets covering a wide range of topics
- Nova Scotia Cancer Centre Radiation Therapy video.

Resources provided by other organizations:

- Canadian Cancer Society website cancer.ca provides information for cancer patients, survivors, caregivers and health professionals, as well as linkages to support services for cancer patients and families.
- Canadian Cancer Society Cancer Information Service info@cis.cancer.ca or 1 888 939-3333 is a national, multi-lingual service available to cancer patients, their families, the general public and healthcare professionals. The service provides access to a Cancer Information Specialist who can answer questions and provide print resources, website cancer.ca
- Canadian Virtual Hospice provides information and support on palliative and end-of-life care, loss and grief, website virtualhospice.ca
- CancerCare, a national (USA) non-profit organization that provides information and support services to anyone affected by cancer; people with cancer; caregiver, children, loved ones and the bereaved, website: cancercare.org
- CancerQuest is a cancer education and outreach program at Emory University, providing reliable information about cancer biology and treatment, website: cancerquest.org. The videos and animations on this website are particularly helpful.
- Cultural Competence resources, Nova Scotia Department of Health and Wellness, website: gov.ns.ca
- National Cancer Institute's Physician Data Query (PDQ)/Patient Information File (PIF), website: cancer.gov. This site provides information related to: cancer treatment, clinical trials that are open for enrollment and the names of facilities connected with cancer care.
- Pink Rose Program is a system of information and guided support developed to aid the patient diagnosed with breast cancer. Available from the Nova Scotia Breast Screening Program, website: breastscreening.ns.ca
- "Provider-Patient Communication: A Report of Evidence-Based Recommendations To Guide Practice in Cancer", available via the CCO website, cancercare.on.ca
- Reef Knot Kit an information kit, is available for all Nova Scotian men newly diagnosed with prostate cancer through their Urologist. The kit contains a welcome letter, "Prostate Cancer: A Booklet for Patients" and contact information for support groups in Nova Scotia.
- Smoking Cessation: Addictions Services, Nova Scotia Department of Health and Wellness, gov.ns.ca; Canadian Cancer Society Smokers Helpline 1-877-513-5333, cancer.ca

Web-based cancer information

Today, you can find an endless amount of information on the Internet. It is helpful to remember that not all information you will find is correct. The best advice is to treat everything you find on the Internet with caution unless you know it is from a reliable website. Look for sites that are [Health on the Internet](#) (HON) certified, they will display the HON icon.

Recommended websites:

- *Cancer Care Nova Scotia* cancercare.ns.ca
- BC Cancer Agency bccancer.ca.ca
- Brain Tumour Foundation of Canada braintumour.ca
- Canadian Association of Psychosocial Oncology capo.ca
- Canadian Breast Cancer Foundation cbcf.org
- Canadian Cancer Society cancer.ca
- CancerCare cancercare.org
- Canadian Virtual Hospice virtualhospice.ca
- Cancer View Canada cancerview.ca
- Colorectal Cancer Association of Canada colorectal-cancer.ca
- Kidney Cancer Canada kidneycancerCanada.org
- Leukemia & Lymphoma Society of Canada leukemia-lymphoma.org
- Lung Cancer Canada lungcancerCanada.ca
- Myeloma Canada myelomaCanada.ca
- Ovarian Cancer Canada ovarianCanada.org
- Prostate Cancer Canada prostatecancer.ca
- Smoking Cessation: Addictions Services, Nova Scotia Department of Health and Wellness, gov.ns.ca
- Smoking Cessation: Canadian Cancer Society Smokers Helpline 1-877-513-5333, cancer.ca
- Thyroid Cancer Canada thyroidcancerCanada.org
- Young Adult Cancer Canada youngadultcancer.ca

Information in languages other than English

There are a number of reputable sources of cancer information in languages other than English.

We recommend the following Canadian resources:

- Canadian Cancer Society cancer.ca or call 1-888-939-3333
- Cancer Care Manitoba cancercare.mb.ca
- Vancouver Coastal Health vch.eduhealth.ca

You may also be interested in accessing resources outside of Canada. Please note that there may be differences between Canadian information and the information you read on a website outside of Canada. The BC Cancer Agency and the Canadian Cancer Society both have comprehensive lists of websites in languages other than English:

- BC Cancer Agency bccancer.bc.ca
- Canadian Cancer Society cancer.ca

References

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- Cancer Care Nova Scotia*. Navigating the Cancer Care System, African Nova Scotians' Experience, 2001.
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