A Mixed-Methods Study of the Experiences and Impact of the Nankind Programing for Families Living with Cancer

FINAL REPORT

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EXECUTIVE SUMMARY

This final report is prepared for Nankind and provides a detailed account of the study titled "A Mixed-Methods Study of the Experiences and Impact of the Nankind Programing for Families Living with Cancer".

BACKGROUND

Approximately 50% of Canadians are projected to face a cancer diagnosis during their lifetime. Post-diagnosis, individuals grapple with changes to their daily lives, navigating both the challenges of coping with illness symptoms and the additional responsibilities of managing medical appointments and treatments. The complexities of chronic illness management are particularly daunting for parents with young children, who must balance the demands of living with illness alongside their family's needs. Existing research has shed light on the experiences of young families living with cancer, yet there remains a gap in understanding their specific support needs, especially regarding childcare. This mixed-methods study evaluated the impact of the suite of services/programs that Nankind provides.

METHODS

A sequential mixed-method explanatory study designed was employed using a utilization focused evaluation approach. This involved collaboratively establishing the evaluation goals, methods and data collection instruments with Nankind and conducting a cross-sectional survey and interviews with Nankind clients who received Nankind services in 2021 and 2022.

Survey

An online survey was administered to eligible Nankind clients from April 8, 2023 to May 8, 2023. The survey assessed participant characteristics, views of Nankind processes, and use and perceived impact of Nankind services. Descriptive statistics were calculated.

Interviews

Qualitative semi-structured interviews were conducted between December 2023 and February 2024. Interview guide questions focused on the impacts of cancer diagnosis and treatment, needs and access to support, and experiences and impacts of using Nankind services. All interviews were audio recorded and transcribed. Interview transcripts were coded using a thematic analysis approach. Thematic analysis entailed multiple readings of the transcripts to explore patterns in the data and identify analytical concepts.

RESULTS

Quantitative: Seventy-three participants completed the survey. Survey participants were predominately female (93%), college/university education (88%), married (60%), with two children and diagnosed with breast cancer (52%); 41% identified as white and 43% had a household income of less than $40,000. The majority of Nankind clients (87%) were highly satisfied with Nankind services. Most learned about Nankind during treatment (60%) through a referral from a healthcare provider (77%); while most would prefer to receive Nankind services earlier (52%). Participants were more satisfied with the intake process (89%) than the graduation process (64%) and 74% felt that the wait-time for services was acceptable. Between 100%-91% were satisfied/very satisfied with the Homework Club, Teddy Bear Club, Fun in a Box, In-Home Nanny Angel Service; 86-83% were satisfied with the Virtual Mom and Peer Connections Support Groups; and 79%-75% were satisfied with the Meal Support and Grief Support Service. Participants were also highly satisfied with the Child Life

Specialist and Volunteer and reported strong interpersonal relationships with both. Participants and their children experienced numerous practical (e.g. more informed, time for self-care, and time to care for children) and psychosocial (e.g. less anxiety, depression, loneliness, and guilt and greater coping skills and feelings of connectedness with children) benefits from Nankind services to varying degrees depending on the goals and effectiveness of the service.

Qualitative

Qualitative semi-structured interviews were conducted with 10 eligible Nankind clients. Of the 10 participants, nine identified as women living with cancer and one a bereaved caregiver. The qualitative interviews conducted provided valuable insights into the satisfaction levels of Nankind's clients, indicating that the majority expressed high levels of contentment with the services they received. These services not only fulfilled practical needs but also contributed significantly to their psychosocial well-being. While participants appreciated the shift to virtual programing during the pandemic, most explained that in-person service delivery was favorable, particularly where child support was concerned. Nankind was perceived as a distinctive and vital program, particularly for young families affected by parental cancer, offering support and a sense of genuine care/”love” that was viewed as indispensable. However, despite its many benefits, there were areas where Nankind's procedures and services could be strengthened for even greater effectiveness. Suggestions put forward by participants emphasized the importance of raising awareness about the Nankind program within healthcare settings and adopting a more systematic approach to informing clients about Nankind services to ensure that more families could benefit. Further, there was a call for services to be more flexible and delivered over an extended period to better cater to the diverse needs and experiences of families facing young families living with parental cancer. Additionally, participants identified specific gaps in care where Nankind could make a meaningful difference through the introduction of new services, thus further enhancing its impact on the lives of those it serves.

CONCLUSIONS

Prior research on women’s experiences within Nankind demonstrate the overall benefit of this organization for young moms living with cancer. However, no evaluation has yet assessed the benefit and value of each individual program that make up the Nankind, nor has any evaluation been done to determine the value of the virtual programs that were added during COVID-19. Overall, this evaluation indicates that most Nankind clients are highly satisfied with Nankind services, and experience numerous practical and psychosocial benefits. Nankind is regarded as a unique and critically important service for young parents with cancer. However, there are areas in which Nankind procedures and services could be enhanced to better address client needs and maximize benefits. Recommendations for improvement reflect a desire for greater awareness of Nankind procedures and services and for services to be delivered more flexibly and for a longer duration to accommodate the extent and diversity of family needs and experiences.

ACKNOWLEDGMENTS

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