

Supporting One Another for 40 Years

Mary L.S. Vachon, PhD, RN, and Deborah K. Mayer, PhD, RN, AOCN®, FAAN

The Oncology Nursing Society's (ONS's) 40th anniversary stimulated our reflections on the professional and personal benefits of caring for people with cancer. We wanted to share a story about an oncology nurse support group that has continued to meet every six weeks for 40 years. Initially, we were all 30–49 years old and are now 70–89!

In the early 1970s, Phyllis Burgess, director of nursing at Princess Margaret Hospital (PMH) in Toronto, along with the staff at PMH, became concerned about the psychosocial needs of both the patients and the staff who were having increasing difficulty working with dying patients. Burgess brought a petition from the nurses to the director of PMH for psychological help and training in dealing with patients suffering from life-threatening illnesses. This petition led to the Clarke Institute of Psychiatry working with the staff to address these needs.

As a result, patient support groups began, and nurses from PMH and other centers were taught to facilitate these groups in the Coping With Cancer course. This was offered as a pilot program and sponsored by the Toronto Unit of the Canadian Cancer Society. Group meetings for inpatients and community groups for outpatients and their families aimed to help them cope with the challenges of cancer.

Our group of nine evolved from the course. In 1975, we became group facilitators in various Toronto hospitals and in the community. The support group included Mary Vachon, research scientist and mental health consultant at Clarke Institute of Psychiatry; Joan Wright Haines, nursing director of Oncology Outpatient Clinic, Toronto Western; Ellie Wasserman, head nurse, Oncology, Mount Sinai;

The 1970s . . .



Note. Pictured, from left to right, are Mary Vachon, Ellie Wasserman, Eileen Goodin, Ann Harrington, Bette Johnson, Marg Sigmundson, Marie Samuels, and Pat Walker. Not pictured is Joan Wright Haines.

In my working years, all the people in the group gave amazing support, just being with nursing colleagues and being able to speak freely and know that anything said remained within the four walls of our host's home. Now that I am retired, I love getting together for the great food, the chat, and the camaraderie.

Confidence in starting groups with parents, encouragement to take on Coping With Cancer course, solid group for sharing and problem solving, supportive group of friends for 40 years. Diverse but compatible group even though we don't see each other between meetings, we are there for each, lean on each other, always.



Note. Pictured, from left to right, are Ellie Wasserman, Pat Walker, Marie Samuels, Marg Sigmundson, Ann Harrington, Mary Vachon, Bette Johnson, Joan Haines, and Eileen Goodin.

. . . and today!

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Ann Harrington, Outpatient, Oncology, St. Michaels; Pat Walker, head nurse, PMH Lodge; Bette Johnson, community groups; Marie Samuels, head nurse, Radiation Oncology, PMH; Marg Sigmundson, head nurse, Medical Oncology, PMH; and Eileen Goodin, head nurse, Pediatric Oncology, PMH. (Deborah Mayer was an invited member of the support group while working at PMH from 1993–1995.) We provided support and learned from and comforted one another through professional and personal life events and challenges.

Once established, the group met every six weeks, rotating at each other's homes. The host would provide the dinner, and we enjoyed the good food along with the good company. That continued, regardless of the job we were holding or where we worked (as changes were inevitable over time). In later years, when we would meet at Marie's home on the outskirts of Toronto, a limo was hired to transport everyone. Our limo driver was moonlighting to put his daughter through nursing school, so we felt we were contributing to a good cause! However, in the past year or so, the group has met in a restaurant that is fairly equidistant for members of the group. We meet in the same restaurant and have the same table. The staff know us, so it feels like home.

Initially, the group primarily focused on work-related issues in which we needed support. Those sometimes were issues with patients, other times issues with the bureaucracy. We had a vow of confidentiality: What was said in the group stayed in the group. Annually, Mary Vachon would ask if the group was still meeting the members' needs. After a few years, Joan Wright Haines finally said, "The fact that we all keep coming to the meeting shows that it is meeting our needs, Mary. Stop asking the question!"

Even as group members left employment, we continued to meet as a group, feeling the bonds we had established still held us together. However, in the past few years, it became obvious that Pat Walker was having problems with her memory. We wanted her to continue to meet with us and provided transportation as she went into assisted living. Finally her daughter had to tell us that meeting with the group was too hard on Pat. We grieved the loss of Pat in the group and went together to her funeral in November.

When reflecting on becoming oncology nurses in the 1970s, it was clear that our group was important to all of us. As one member said,

Working as an oncology nurse in the 1970s was a scary and often daunting proposition. . . . What a relief it was to discover people who took it upon themselves to create an environment of learning starting with the Coping With Cancer groups. . . . The knowledge and confidence that I gained from each one of our support group made me into a much better nurse. . . . For me, the "fear factor" of what to say when a patient asked the difficult question lessened considerably. . . . Being able to talk about the stresses of providing care for a group of patients with a terminal disease, which most cancers were in those days, while attempting to maintain hope was a great gift.

Regarding the Coping With Cancer course, another member reflected on how helpful it was at a time when we were forging new roles.

This course helped us to organize and initiate support groups for patients in our individual clinic setting.

It gave us confidence in running such groups. It helped us better understand what the patient and family were experiencing and be better able to answer bothersome questions.

Some additional thoughts were shared about the impact of the group, both personally and professionally.

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Lasting friendships developed as we began to include personal support. During this time, we shared in life's trajectories, including five of the nine of us developing cancer, and Pat's recent death. For us, there have been rich rewards inherent in caring for people with cancer, shared and enriched through support from colleagues who have become friends. If you are part of a group, you may want to take a moment to reflect on where you have been together. If you aren't part of such a group, you might want to create one or participate in your ONS Chapter—something that wasn't available to us 40 years ago.