I wonder if April is a better month to follow through on New Year’s Resolutions than in January. After the holidays, with all the celebrating and relaxing, getting back into a routine is difficult enough without adding new behaviours and expectations about improving oneself based on resolutions. I think April would be easier to accomplish this change. After all, the weather is improving, the daylight hours are longer, and there is a sense of renewal in the air, as spring arrives.

With that in mind, I propose we all make New Year’s Resolutions this April related to improving care for patients and their families.

At first glance, you may say that improving care of patients sounds like it requires practice changes that are so large it would seem impossible to accomplish. But I would suggest that is the long-term goal (just like losing weight to fit into that new dress). The starting point is taking the first step—identifying your own action.

I would propose you can take a first step by resolving to read a new article once every month between April and December this year. Pick a certain patient population and read articles on that group of patients, their needs and experiences with cancer.

I have three patient populations from which you can choose. These populations reflect ones that nurses can take a leadership role to influence practice change. Additionally, there have already been gaps identified in the provision of their cancer care and calls for needed improvements:
1. Adolescents and young adults (ages 15–39)
2. Older adults

Adolescents and young adults are a population with unique needs. Cancer strikes this age group at a time in their lives when they are starting to build their careers and families. The actual disease can be aggressive and its treatment can have a large impact on coping and quality of life. Based on what I have read, individuals in this population often feel isolated and alone, and think that no one really understands what is happening to them or how they truly feel.

The older adult population with cancer is growing. As the general population in Canada ages, there will be greater numbers of older adults requiring care. However, this is a heterogeneous population. There is a wide range in the capabilities of individuals in this age group and in the availability of resources to meet their needs. Understanding the supportive care needs and how to meet those needs appropriately is clearly within the scope of oncology nursing practice and ought to be a priority.

Survivors of cancer are also a growing population. Advances in science and technology have resulted in diagnosis and treatment improvements that have, in turn, led to an increasing number of individuals who are living longer with controlled disease or without clinical evidence of disease. There is a mounting trend to have some of these individuals followed in the community setting by primary care providers. This requires careful preparation, communication, and coordination among the health care providers to ensure the transition occurs without difficulties and adding to the emotional angst felt by the survivor.

Each of these areas has already been identified as needing improvements. I see wonderful opportunities for oncology nurses to be engaged and influence the care of these patient populations.

The first step is taking it upon yourself to understand more about the patient needs and where actual change can make a difference. After your reading, you will be in a position to look at your own practice setting and identify what can be done. And taking action can be next year’s resolution!

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