Need for Return to Work Support and its Related Factors among Korean Young Adult Cancer Survivors

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Background

Young adult cancer survivors (YACSs) refer to young adults aged 19 to 39 years diagnosed with cancer. The term ‘YACS’ corresponds to young adulthood from a developmental point of view, which is a challenging period of social development involving separation from parents and formation of friendships with colleagues as well as confronting society and building a career through work. However, being diagnosed with cancer during this period requires the prioritization of “survival” rather than personal development, which can hinder age-appropriate activities such as work life.

For YACSs who spend considerable time at work, employment and return to work (RTW) are important factors that improve quality of life by satisfying social needs as well as economic motivations. Korean cancer management policies focusing on cancer prevention and treatment, which make RTW difficult for cancer survivors after cancer treatment.

Purpose

To identify the need for RTW support among Korean YACSs and factors affecting RTW including cancer fatigue, cancer stigma, and social support.

Methods

Design

In this study, a descriptive and correlational design was applied to investigate the extent of need for RTW support, cancer fatigue, and cancer stigma among Korean YACSs and to identify factors affecting the need for RTW support.

Samples

Participants eligible for the study were those diagnosed with cancer between 19 and 39 years who were working after being diagnosed with cancer or who were looking for a job to RTW after resignation due to cancer.

Data collection/procedure

To recruit the participants, public notices were posted on four internet community cafés for cancer survivors. A total of 154 electronic questionnaires were returned; from these, 134 individuals were selected as the final participants in the study.

Data analysis

The collected data analyzed using descriptive statistics, independent t-test, one-way ANOVA, Pearson’s correlation coefficients, and multiple regression using SPSS WIN 22.0 program (IBM Co., Armonk, NY, USA).

Result

The average participant age was 34.18±3.31 years (range, 24–40 years). The mean scores for the need for RTW support, cancer fatigue, cancer stigma, and social support were 6.05±2.13 out of 10, 24.63±5.03 out of 52, 60.82±13.85 out of 96, and 41.84±5.27 out of 60, respectively.

Variables that did not significantly affect the need for RTW support were excluded, and the final regression analysis model was constructed to include the type of cancer, occurrence of metastasis and recurrence, number of treatments, and cancer fatigue. The factors influencing the need for RTW support were as follows: type of cancer (β=−0.29, p<.001), occurrence of metastasis and recurrence (β=−0.25, p=.004), number of treatments (β=0.23, p=.012; Table 1).

The need for RTW support was greater for diagnoses of urological cancer than for gynecological cancer and was less when metastasis and recurrence were experienced. In addition, the fewer the treatments received and the worse the cancer fatigue were associated with the greater the need for RTW support. These variables explained 26.4% of the variance.

Conclusion

In this study, the need for RTW support was investigated among the YACS population who have not yet been actively studied, and influencing factors were identified. We believe that it is possible to identify subgroups with an increased need for RTW support and provide customized support to those in need. Moreover, our findings are meaningful because they confirmed specific requirements related to RTW and thus can be used to provide basic data to develop interventions and policies for RTW according to the characteristics of Korean YACSs.

In future studies, YACSs should be classified according to their need for RTW support for interventions that can meet their needs. It is hoped that the results of this study will help identify the necessary interventions to encourage YACSs to RTW.

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Table 1. Influencing Factors of NRTWS (n=134)

<table>
<thead>
<tr>
<th>Variables</th>
<th>B</th>
<th>SE</th>
<th>β</th>
<th>TOL</th>
<th>VIF</th>
</tr>
</thead>
<tbody>
<tr>
<td>constant</td>
<td>3.96</td>
<td>1.29</td>
<td>3.96</td>
<td>&lt;0.001</td>
<td>1.22</td>
</tr>
<tr>
<td>Number of treatments received</td>
<td>-0.51</td>
<td>0.19</td>
<td>-0.23</td>
<td>2.74</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Type of cancer (gynecological cancer)²</td>
<td>-1.50</td>
<td>0.40</td>
<td>-0.29</td>
<td>3.79</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Occurrence of metastasis &amp; recurrence</td>
<td>-1.13</td>
<td>0.39</td>
<td>-0.25</td>
<td>2.94</td>
<td>&lt;0.004</td>
</tr>
<tr>
<td>Fatigue</td>
<td>0.07</td>
<td>0.03</td>
<td>0.19</td>
<td>2.34</td>
<td>&lt;0.012</td>
</tr>
</tbody>
</table>

R²=0.29, Adj R²=0.26, F (3,69)=12.95 (<0.001), Durbin-Watson=1.58

NRTWS: need for return to work support, SE=standard error, TOL=tolerance, VIF=variance inflation factor, *Dummy variables (reference=urological cancer).