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School of Occupational Therapy

A Program for Young Adults within the Community Cancer Survivorship Setting

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Abstract

Young adult (YA) cancer survivors and YAs impacted by familial cancer experience a variety of barriers that impact their overall well-being, however, there is a distinct lack of targeted programming for this population. As YAs are beginning to live more independently and establish themselves within the community, one can see how a cancer diagnosis would impact their development and ability to transition to their next stage of life. It is necessary to understand the unique needs of the YAs and how cancer impacts their independence and social wellness to better facilitate inclusivity and independence for this population. With education on occupational therapy (OT) services, self-care, stress management, and social wellness and participation in a social event, OT practitioners can educate and encourage independence and social participation within the community. The purpose of my Doctoral Capstone Experience (DCE) was to develop and implement the YA Cancer Support Program at the Cancer Support Community (CSC) Indiana with the goal of increasing knowledge on various topics and providing a social opportunity to the YA population. It was determined that all participants reported having a better understanding of what OT is and how OT can help in cancer survivorship. They also reported having a better understanding of social wellness and how to incorporate social activities within their lives. Additionally, all participants reported that they would be interested in attending future YA programming events. The results of this program indicate the positive impact OT can have within the community cancer survivorship setting which further advocates for OT within emerging practice settings.

A Program for Young Adults within the Community Cancer Survivorship Setting

With the most recent data in 2017, 1,701,315 new cases of cancer were reported in the United States, meaning that for every 100,000 people, 438 new cancer diagnoses were reported (Centers for Disease Control and Prevention (CDC), 2017). In Indiana, 34,318 cases of cancer were reported in 2017 (CDC, 2017). Not only does cancer affect the patient, it also affects family members, significant others, and friends of that individual (Al & Ahmad, 2018; Dionne-Odom et al., 2018; Metcalf et al., 2017; Morris et al, 2018; Patterson et al., 2017). Clearly, cancer has touched many lives.

The Cancer Support Community (CSC) Indiana is a non-profit organization that offers a wide variety of free, evidence-based programs and resources for cancer survivors and their support system. At CSC, the mission is “To ensure that all people impacted by cancer are empowered by knowledge, strengthened by action, and sustained by community. So that no one faces cancer alone” (CSC, n.d.). CSC recognizes the important role that occupational therapy (OT) can bring to cancer survivorship within the community setting and worked closely with me for ideas on program development. In 2021, CSC did not offer any programming for the young adult (YA) population, therefore, I collaborated closely with my site mentor, Lora Hays, and CSC’s program and outreach coordinator, Hunter Stafford, to develop YA programming. The purpose of my DCE was to increase knowledge on various topics and provide a social opportunity to the YA population through the development and implementation of the YA Cancer Support Program at CSC.

Background

Literature Review

Occupational Therapy within the Community Cancer Survivorship Setting

Cancer survivors may face many physical and mental impairments throughout their cancer journey which can have a significant impact on their daily functioning. Occupational therapy (OT) can provide a unique perspective that can benefit cancer survivors as they face limitations in daily activities (Baxter et al., 2017 & Polo et al., 2017). Within the community cancer survivor setting, OT can offer health and well-being services that help improve cancer survivors' participation in life roles, social participation, occupational and community engagement, and quality of life (Polo et al., 2017; Coss et al., 2017). These services can be provided in a group setting with client-centered services and OT can further refer to outpatient OT if the individual has any individualized needs (Polo et al., 2017). More specifically, OT can provide services addressing barriers such as cancer-related fatigue management, cancer-related cognitive dysfunction strategies, cancer-related peripheral neuropathy management, cancer-related pain management, lymphedema management, and psychosocial issues (Baxter et al., 2017). By addressing these barriers, OT can facilitate increased participation in daily activities aimed at improved health, well-being, and participation (Coss et al., 2020).

The cancer survivor community setting has been considered an emerging practice area for OT (Polo et al., 2017). OT practitioners have faced several barriers to providing services including not being recognized as an important service at interdisciplinary program planning meetings (Polo et al., 2017). Due to the lack of awareness of what OT can offer, providing clear documentation and gaining reimbursement for OT services within the cancer survivorship

community setting has been difficult. Due to this, OT practitioners must continue to increase awareness of the cancer survivor community setting within the OT profession, develop supporting documentation of OT's role, advocate for a larger role for OT within this setting, and document and disseminate the efficacy of interventions in cancer survivorship programs (Polo et al., 2017). According to a scoping review, there has been minimal research on OT within the YA cancer survivor population indicating that there is a need for advocacy for OT within this population (Wallis et al., 2020). Completing my DCE within the cancer survivorship community setting has advocated for OT programs within CSC, provided documentation of successful programming within the YA cancer survivor population, and shared awareness of this emerging practice setting with fellow colleagues and professions.

Young Adults Impacted by Cancer: Physical and Psychosocial Impacts

For YA cancer survivors, there have been many physical and psychosocial impacts. Some common physical symptoms of cancer included lymphedema, fatigue, pain, and peripheral neuropathy (Polo & Smith, 2017). Cancer-related fatigue has been one of the most prevalent, severe, and debilitating symptoms in the YA cancer survivor population and early fatigue intervention has been warranted before any maladaptive rest-based behaviors develop during this YA age (Spathis et al., 2015; Spathis et al., 2017). These cancer-related symptoms can negatively impact participation in daily activities, including self-care, which can directly impact overall quality of life (Baxter et al., 2017; Wallis et al., 2020). The psychosocial effects of cancer can also have detrimental impacts on YAs' mental health. YA cancer survivors tend to experience increased feelings of depression and anxiety and their social wellness can be negatively impacted (Penn & Kuperberg, 2018). Also, considering the significance of peer relationships during young adulthood, social-based interventions can play an important role in

development and psychological adjustment and may potentially lead to a decrease in depression and anxiety (Penn & Kuperberg, 2018). In one study, more than 50% of the psychosocial needs of YA cancer survivors remained unmet due to limited availability of intervention programs and services that specialize within this unique population (Aubin et al., 2018). In another study, many YA cancer survivors reported unmet health care needs, including physical and occupational therapy and mental health services (Keegan et al., 2012). This indicates a need for advocacy for OT services and psychosocial intervention within the YA cancer survivor population.

For YAs impacted by familial cancer, there have been many reports of unmet needs including conflict among their social roles, lack of education on the caregiving role, time restriction for leisure activities, strain in familial and friend relationships, psychological distress, and diminished physical and mental wellbeing (Kim & Carver, 2019; Morris et al., 2018; Patterson et al., 2017). Due to the increased household and caregiving responsibilities, YAs impacted by familial cancer tend to experience isolation from those outside of the family and activity restrictions (Metcalf et al., 2017; Morris et al., 2018). In a study that focused on examining the psychosocial impacts of parental cancer on YAs, it was found that YAs reported higher state and trait anxiety and a lower social support satisfaction (Metcalf et al., 2017). These findings suggested that having a larger and more satisfying social support network predicted lower state and trait anxiety in YAs affected by parental cancer (Metcalf et al., 2017).

Poor coping strategies, increased responsibility, the caregiving role, and decreased social support can have a significant impact on the mental health of YAs (Kim & Carver, 2019; Metcalf et al., 2017; Morris et al., 2018; Patterson et al., 2017). In a study focusing on describing levels of and relationships between distress and psychosocial unmet needs in YAs impacted by familial cancer, it was found that these individuals experience 3 to 6 times the levels of high or very high

distress (Patterson et al., 2017). These levels were similar to the levels of other YAs who seek treatment for mental health issues (Patterson et al., 2017). Clearly, the mental health of YAs has been negatively impacted when a parent or family member received a cancer diagnosis.

Theoretical Framework

Since my project focused on a population that has not been directly addressed through CSC, it was important to understand the needs of the whole YA population in order to address the individual needs. The KAWA model emphasized the importance of addressing the whole system rather than just an individual self, therefore, helped guide my program development and implementation (Lim & Iwama, 2011). For my project, the river walls and bed included CSC and all the programs that they offered. For the river itself, the upstream, or the past, included an YA's life prior to a cancer diagnosis while the downstream, or the future, included life after a cancer diagnosis. The barriers or rocks that the YA population may face include decreased quality of life, lack of support, decreased mental health, increased stress, lack of education on available services, and feelings of loss. The driftwood, or resources that can be helpful or obstructive include attitude, personality, personal values, and time. The KAWA model has helped implement the goal of enabling and enhancing the "life flow" of each young adult by connecting them with others that are going through a similar experience (Lim & Iwama, 2011).

Additionally, the lifespan frame of reference (FOR) helped guide my DCE. The lifespan FOR focused on the use of transitional tasks, establishing or restoring occupations, and adapting to changes (Cole & Tufano, 2008). For my project, I focused on restoring occupations that may be more difficult to participate in due to a cancer diagnosis. Also, I focused on educating clients on healthy ways to adapt to this life change and how to balance personal roles and routines related to self-care, stress management, and social wellness.

Methods

Needs Assessment

CSC Indiana has offered many programs; however, these programs primarily included those aged 55+. CSC has adapted their programming to this age group and does very well with targeting the 55+ population. Although CSC Indiana has had young adults, aged 18-35, participate in programs in the past, in 2021, less than two percent of their participants fell within the YA 18-35 age range. During the needs assessment, it was determined that a program specifically for the YA population aged 18-35 would help serve a population that CSC has not directly created a program for before. In the past, CSC had not created a program specifically for the YA population and there were not any similar programs available for the YA population within the Indianapolis area. After collaborating with Lora and Hunter, we determined that I would create programming for the YA population aged 18-35.

Marketing

To market the YA Cancer Support Program, I collaborated closely with Lora and Hunter and CSC's marketing Lead, Karissa Rates. I took the lead on marketing the program and there were many different marketing strategies that were utilized. First, I created a poster that included a picture of younger adults, explained the program, and included prizes for the social event. Next, I created a document with contact information to the communities I wanted to reach within the YA population. I reached out to local colleges, hospitals, CSC's support group leaders, and local community organizations that may have YA cancer survivors, such as multiple YMCA Indianapolis locations, local breast cancer organizations, and the Leukemia and Lymphoma Society. Next, I utilized CSC's social media platforms (Facebook and Instagram) to market the

program and I shared these posts on my social media accounts, as well. These posts were advertised the week prior to the events and the day before the events. Lastly, all inquiries were forwarded to my email and I answered any questions about the program to those who were interested.

Participants and Target Population

The target population for the program included YA cancer survivors and YAs impacted by familial cancer. However, the participants in the educational session included 2 YA cancer survivors and the social event included 2 YA cancer survivors and 1 significant other. Only 1 participant had attended CSC programs in the past while the other had not.

Program Design and Implementation

The purpose of my DCE was to increase knowledge on various topics and provide a social opportunity to the YA population. Originally, I planned to host separate educational sessions and social events for YA cancer survivors and YAs impacted by familial cancer. However, since there were only 2 participants interested in attending the YAs impacted by familial cancer, I combined the educational sessions and social events. After the changes to the YA Cancer Support Program were made, I developed and led 1 educational session and 1 social event.

I presented the virtual educational session on 03/09/2022 from an OT perspective covering self-care, stress management, and social wellness which supplemented an in-person social event. Since only 1 participant was able to attend the live zoom meeting, I adapted the presentation to be more of a discussion about her life and provided client-centered recommendations. The other 2 participants that could not come were provided with a

VoiceThread presentation of the information. For the social event, I gathered donations from various local businesses such as Chick-fil-A, Target, Indy Fuel tickets, and a few prizes CSC donated from a silent auction. Prior to the social event, I utilized CSC's food donation by gathering and preparing desired food items and for the participants to enjoy during the event. The social event took place at CSC's building on 03/25/2022. During the social event, participants were encouraged to ask questions about the educational session, share their cancer journey, and enjoy the night with trivia games and prizes.

Program Evaluation and Dissemination

For the project evaluation, I developed and administered a pre and post survey. I collaborated with Lora and Hunter on their standard registration and adapted my pre and post survey to align with their registration and feedback survey. The pre-survey included a participant information section focusing on demographics that CSC collects and another section with the PROMIS Item Bank v2.0 - Satisfaction with Social Roles and Activities – Short Form 8a. The participant information section asks for demographic information including name, age, email, and if they are a young adult cancer survivor or young adult impacted by familial cancer. Also, this section specifically addresses if the dates and times for the events work for them and if they have other dates or times that may work better, food allergies, if they would like to receive more information about the programming that CSC offers, and a photo consent. All information within this section was utilized to help organize the events, get contact information, and collect information for CSC to report. Within the second section, the PROMIS Item Bank v2.0 - Satisfaction with Social Roles and Activities – Short Form 8a was utilized. This tool has a 5 point Likert scale ranging from “*Not at all*” to “*Very Much*” to measure satisfaction with performing one's usual social roles and activities. Since social wellness was established within

the literature to be impacted within the young adult population, this assessment identified social roles and activities that were negatively impacted due to a cancer diagnosis. The information from the PROMIS Item Bank v2.0 - Satisfaction with Social Roles and Activities – Short Form 8a assessment was utilized to adapt the educational session by including intervention strategies to address the lower reported scores on the assessment. The post-survey was a summative assessment that included questions regarding understanding OT, self-care within a daily routine, and social wellness. Additionally, the post-survey included questions regarding satisfaction with the program, how the program could improve, and if participants were interested in attending future events.

For dissemination of my DCE, I created an organized binder and presented it to Lora and Hunter. The binder included information on marketing the program, resources for the educational session and social event, results, references, and my scholarly report, poster, and presentation. When I presented the binder to Lora and Hunter, I reviewed all the information within the binder and gained feedback from them. Lastly, I adjusted the binder based on feedback so that CSC could easily access information on YA programming for future events.

Results

Pre-survey

The pre-survey indicated that 100% of participants were YA cancer survivors from ages 18-33. The pre-survey indicated that 100% of participants were available for the educational session and in-person social event, however, 1 participant reported that they were not able to attend the social event due to being immunocompromised. The PROMIS Item Bank v2.0 - Satisfaction with Social Roles and Activities – Short Form 8a assessment determined that 66.7%

of participants reported being “*Not at all*” satisfied with their ability to do fun things with others, feel good about their ability to do things for their friends, their ability to do fun things for fun outside their home, and their ability to meet the needs of their friends. Additionally, 66.7% of participants reported being “*A little bit*” satisfied with their ability to do the work that is really important to them and their ability to meet the needs of their family. Refer to Figure 1 for more detailed results on The PROMIS Item Bank v2.0 - Satisfaction with Social Roles and Activities – Short Form 8a.

Post-survey

The post-survey indicated that there were 2 YA participants and 1 YA family member or friend. All participants reported having a better understanding of what OT is, how OT can help in cancer survivorship, and having a better understanding of social wellness and how to incorporate social activities within their lives. Examples of what participants reported learning about OT and cancer survivorship include topics related to energy conservation and self-care participation. When asked about how they would include social activities within their lives, participants reported spending more time with family and friends and going to social events more frequently. Participants were asked to provide examples of what they learned, what was most helpful, and how the program could have been more helpful which can be referenced in Table 1. Participants reported that having more meeting times and having more participants would improve this program. The post-survey determined that all participants reported that they would be interested in attending future educational sessions and social connectedness events. Additionally, 66.7% of participants were interested in attending other programs offered by CSC Indiana.

Discussion

The current literature indicates that there are many unmet needs within the YA cancer population including decreased participation in daily activities, decreased social wellness, and negative impacts on psychosocial wellbeing (Baxter et al., 2017; Kim & Carver, 2019; Morris et al., 2018; Patterson et al., 2017; Spathis et al., 2015; Spathis et al., 2017). The YA Cancer Support Program addresses these unmet needs by providing a client-centered, educational session, and social event. The goal of the program was to increase knowledge on various subjects within the educational session and promote social participation and social wellness through the social event.

According to the overall program evaluation results and the needs expressed from the YA population, the client-centered educational sessions and social events were essential in promoting overall well-being, independence, and social wellness within the YA population. More specifically, the educational session promoted learning in OT and cancer survivorship, self-care, and social wellness while the social event promoted social participation and social wellbeing. The feedback on the post-survey suggests that participants were, overall, satisfied with the program and would be interested in future YA programming. The results of this program indicate the positive impact OT can have within the community cancer survivorship setting which further advocates for OT within this emerging practice setting. Lastly, the YA Cancer Support Program adds value to CSC by providing programming for the YA population in central Indiana.

Limitations

There were some limitations within the YA Cancer Support Program development and implementation. First, there were limited participants within the program. Although there were 6 inquiries on participation within the program, only 3 filled out the pre-survey, 1 attended the educational session, and 2 attended the social event. A participant's significant other joined the social event, making 3 participants present at the social event. Also, we decided to combine the YA cancer survivors and YAs impacted by familial cancer populations due to a lower participation. Another limitation included availability of participants for educational sessions and social events. A participant that was immunocompromised could not participate and another participant could not attend the live educational session due to work conflicts. To address this, I provided a VoiceThread of the educational session to participants who were not able to attend and offered to zoom in the immunocompromised participant that could not be in-person. Ultimately, this inconsistency in availability and participation limited how many events I could host.

Implications for practice

OT emphasizes the importance of engagement in meaningful occupations and its impact on overall well-being for all individuals (Baxter et al, 2017; Wallis et al., 2020). The YA Cancer Support Program encouraged participation in meaningful occupations through an educational session and promoted social participation through a social event. Within the educational session, I addressed OT within cancer survivorship and how to gain access to OT services, which directly advocated for OT for participants. Additionally, I was given many opportunities to advocate for OT at CSC within various CSC organization meetings. This not only gave me an opportunity to advocate for my program, but, also, allowed me to educate employees on OT and how OT can

help the cancer survivorship population. Lastly, I was able to advocate for OT within an emerging practice setting to fellow classmates through a weekly online forum and presentation. This helped increase awareness to future OT practitioners on how OT can help within this setting which can be helpful if they come across this setting within their future practice.

Conclusion

Overall, the results of the YA Cancer Support Program indicate positive outcomes that CSC can continue to provide to the YA population. Throughout my experience, I gained a new perspective on the unique role OT has within the community cancer survivorship setting and how to incorporate program development and implementation to a population with many unmet needs. Also, I was challenged with self-directed learning and given many opportunities to advocate for OT. Overall, my DCE and CSC was great, and I gained many new perspectives and skills that I will be able to carry over into my future practice.

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Appendix A

Table 1

Post-survey Summative Response

Survey Question	Participant answers
	“OT can help me do daily things without feeling tired or bad.”
Please explain one thing you learned about occupational therapy (OT)	“I did not have OT but learned that OT can help with energy conservation. This would have been very helpful during treatment because I was always tired and it was hard to get things done.”
	“OT would have helped my girlfriend with energy and self-care when she was too tired from treatment to do these things.”
Please explain how you will incorporate self-care in your daily routine.	“I will go on more walks and take a break when it is too much.”
	“journal 2-3 times a week and start going on more walks (2-3 times a week) as it gets nicer outside.”
Please explain how you will incorporate social activities in your life.	“I will hang out with my sister and friends more on the weekend.”
	“try to plan hanging out with at least 1 family member or friend a week.”

	“Go to social events like this one more often”
	“To be with people that also survived cancer. to be part of a group”
What did you hope to gain or learn from attending this program?	“to get a bigger understanding of social-wellness and sleep” “gain friendship and a break from the rest of the world”
What was most helpful about this program?	“Everything” “having a chance to hang out with people who have been through similar life events” “having some background information over the things that are happening today”
How could this program have been more helpful?	“Find more dates to meet” “More people next time and something outside when it's warm” “Having better meeting times”

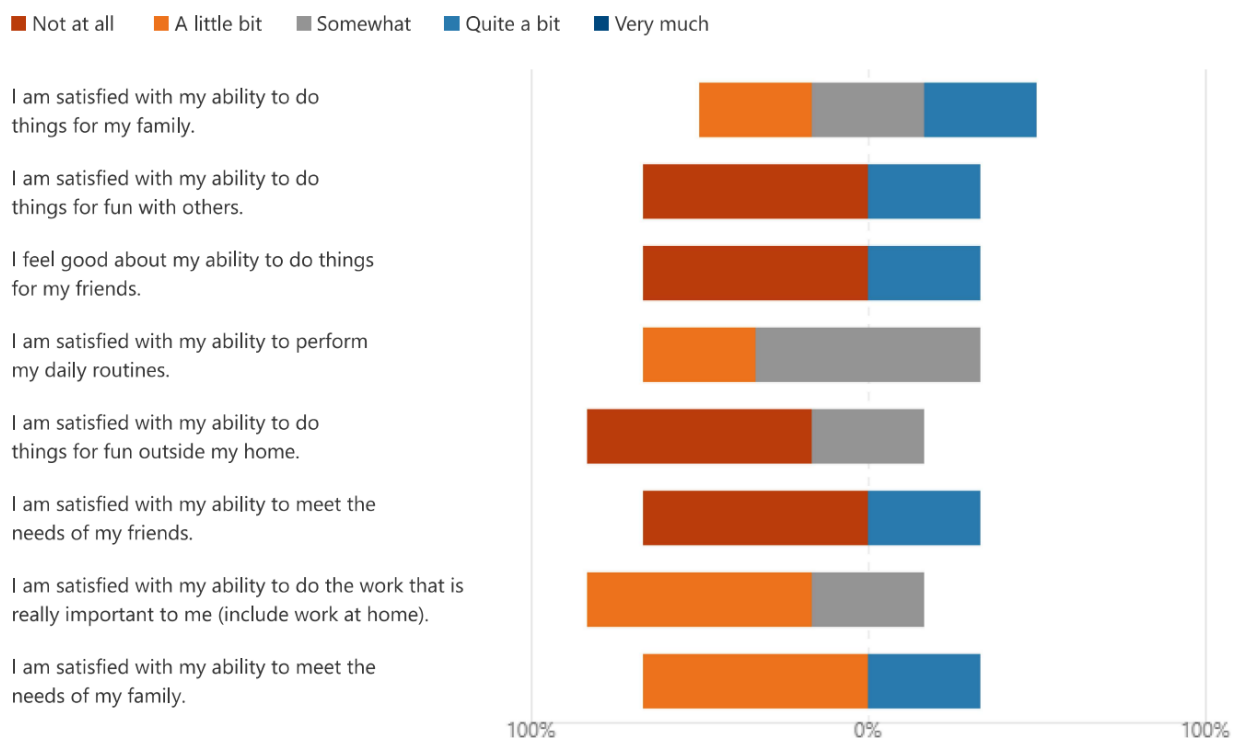
Please feel welcome to share any other comments, questions, recommendations, etc. here.

“Morgan was great! She was super accommodating and it gave me an opportunity to not have to worry about cooking and just have a chance to relax”

“Had a lot of fun at the game night and would come again”

Figure 1

PROMIS Item Bank v2.0 - Satisfaction with Social Roles and Activities – Short Form 8a Results



Appendix B

DCE and Project Weekly Planning Guide at CSC

Week	DCE Stage	Weekly Goal	Objectives	Tasks	Date complete
1 01/10/2022- 01/14/2022	Orientation	1. Orientation 2. Office schedule 3. Program development 4. DCE assignments	Meet with Lora Hays and Hunter Stafford and review my weekly goals and project. Train on front desk duties. Review MOU with Lora and Hunter and make appropriate changes if needed.	Set up meetings with Lora and Hunter for check-in and set up meeting with Katie Polo (faculty mentor) to discuss project. Create a weekly meeting document with updates/goals/questions/reminders. Propose dates for activities/sessions for project. Determine which colleges/hospitals, get contact information, and form initial email. Work desk 1/11 1-4PM Finalize MOU DCE forum post by 01/14 at 11:55PM	01/14/2022
2 01/17/2022- 01/21/2022	Screening/ Evaluation	1. Program development 2. Office schedule 3. DCE assignments	Begin marketing program planning Add to literature review Review needs assessment from OTD 611	Finalize dates for activities/courses Reach out to colleges/hospitals. Create poster/flyer for program. Attend weekly meeting with Lora and Hunter to discuss program. Work office desk 01/18 1-4PM Complete literature review/needs assessment DCE forum post by 01/18 at 11:55PM and respond to 3 by 01/21 at 11:55PM	01/21/2022

3 01/24/2022- 01/28/2022	Implementat ion	1. Program Development 2. Office schedule 3. DCE assignments	Marketing the program Outcome measure Theory/Framework Draft Introduction	Create outcome measure for pre-post attendance to events. Meet with Katie for update on DCE. Attend weekly meeting with Lora and Hunter to discuss program. Work desk 1/25 1-4PM Review theory/framework for project Submit draft Intro by 01/28 at 11:55PM DCE forum post by 01/25 at 11:55PM and respond to 3 by 01/28 at 11:55PM	01/28/2022
4 01/31/2022- 02/04/2022	Implementat ion	1. Program development 2. Office schedule 3. DCE assignments	Background draft	Finalize outcome measures. Attend weekly meeting with Lora and Hunter to discuss program. Work desk 2/1 1-4PM Submit draft of background by 2/4 at 11:55PM DCE forum post by 2/1 at 11:55PM and respond to 3 by 2/4 at 11:55PM	02/04/2022
5 02/07/2022- 02/11/2022	Implementat ion	1. Program development 2. Office schedule 3. DCE assignments	Start on content for educational session Start reaching out for donations Project Design	Attend weekly meeting with Lora and Hunter to discuss program. Work desk 2/8 1-4PM Submit Project Design by 2/11 at 11:55PM DCE forum post by 2/8 at 11:55PM and respond to 3 by 2/11 at 11:55PM	02/11/2022
6 02/14/2022- 02/18/2022	Implementat ion	1. Program development 2. Office schedule 3. DCE assignments	Continue working on educational session content	Attend weekly meeting with Lora and Hunter to discuss program. Work desk 2/15 1-4PM	02/18/2022

				DCE forum post by 2/15 at 11:55PM and respond to 3 by 2/18 at 11:55PM	
7 02/21/2022- 02/25/2022	Implementat ion	1. Program development 2. Office schedule 3. DCE assignments	Continue working on educational session content Combined both populations to be one educational session and one social event Midterm	Attend weekly meeting with Lora and Hunter to discuss program. Meet with Katie for update on DCE. Work desk 2/22 1-4PM Midterm evaluation by 2/25 at 11:55PM DCE forum post by 2/22 at 11:55PM and respond to 3 by 2/25 at 11:55PM	02/25/2022
8 02/28/2022- 03/04/2022	Implementat ion	1. Program development 2. Office schedule 3. DCE assignments	Continue working on educational session content Collect all donations	Attend weekly meeting with Lora and Hunter to discuss program. Work desk 3/1 1-4PM and 3/5 form 9-12 DCE forum post by 3/1 at 11:55PM and respond to 3 by 3/4 at 11:55PM	03/04/2022
9 03/07/2022- 03/11/2022	Implementat ion	1. Program development 2. Office schedule 3. DCE assignments	Finalize content for educational session by 3/8 Methods section	Attend weekly meeting with Lora and Hunter to discuss program. Work desk 3/8 1-4PM Lead educational session on 3/9 Finalize Methods section based on Faculty Mentor feedback by 3/8 DCE forum post by 3/8 at 11:55PM and respond to 3 by 3/11 at 11:55PM	03/11/2022
10 03/14/2022- 03/18/2022	Implementat ion	1. Program development 2. Office schedule 3. DCE assignments	Start on planning for Social Connectedness Event: Trivia Night Create VT for participants that could not come to the virtual educational session Outcomes	Attend weekly meeting with Lora and Hunter discuss program. Work desk 3/15 1-4PM Gather prize items and make categories Meet with Katie for update on DCE.	03/18/2022

				<p>Send VT to participants by 3/18</p> <p>Draft of Outcomes for faculty mentor due 3/18</p> <p>DCE forum post by 3/15 at 11:55PM and respond to 3 by 3/18 at 11:55PM</p>	
<p>11 03/21/2022- 03/25/2022</p>	Implementat ion	<p>1. Program development</p> <p>2. Office schedule</p> <p>3. DCE assignments</p>	<p>Finalize everything for Social Connectedness Event: Trivia Night by 3/24</p> <p>Set up virtual zoom meeting for participants</p> <p>Dissemination Plan</p>	<p>Attend weekly meeting with Lora and Hunter to discuss program.</p> <p>Dissemination Plan due 3/25</p> <p>Work desk 3/22 1-4PM</p> <p>Lead virtual zoom meeting on 3/22</p> <p>Lead Social Connectedness Event: Trivia Night on 3/25</p> <p>DCE forum post by 3/22 at 11:55PM and respond to 3 by 3/25 at 11:55PM</p>	03/25/2022
<p>12 03/28/2022- 04/01/2022</p>	Implementat ion	<p>1. Program development</p> <p>2. Office schedule</p> <p>3. DCE assignments</p>	<p>Start on dissemination binder</p> <p>Work on results/discussion section in paper</p> <p>Outcomes</p>	<p>Attend weekly meeting with Lora and Hunter to discuss program.</p> <p>Work desk 3/29 1-4PM</p> <p>Begin Outcomes section</p> <p>DCE forum post by 3/29 at 11:55PM and respond to 3 by 4/1 at 11:55PM</p>	04/01/2022
<p>13 04/04/2022- 04/08/2022</p>	Discontinuat ion	<p>1. Program development</p> <p>2. DCE assignments</p>	<p>Continue working on dissemination binder</p> <p>Outcomes</p>	<p>Attend meeting for final and turning in dissemination binder on 4/7</p> <p>Finalize outcomes section based on faculty mentor feedback</p> <p>DCE forum post by 4/5 at 11:55PM and respond to 3 by 4/8 at 11:55PM</p>	04/08/2022
<p>14 04/11/2022- 04/15/2022</p>	Disseminatio n	<p>1. Program development</p> <p>2. DCE assignments</p>	<p>Complete binder</p> <p>Complete drafts</p> <p>Send final paper to Katie for edits</p>	<p>Attend weekly meeting with Lora and Hunter to get feedback on dissemination binder.</p> <p>Make final edits to paper and dissemination binder.</p>	04/15/2022

				<p>Final evaluation due by 4/15</p> <p>Draft of abstract, summary, and conclusion section and abstract due 4/15</p> <p>DCE forum post by 4/12 at 11:55PM and respond to 3 by 4/15 at 11:55PM</p>	
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