

POSTER PRESENTATION 3: PHYSICAL AND MENTAL HEALTH

Older cancer survivors' acceptance and compliance to web-based psychological interventions

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Purpose Older people suffer from mental health challenges like younger age groups. In old age, many must also accommodate to losses and disability caused by disease or age-related frailty. Psychological interventions may ease these burdens by helping adaptation and development of compensatory processes. Older people are willing to take part in psychological interventions, but may experience more obstacles entering psychological treatment programs because of limited access to transportation. Especially, the most vulnerable group of older adults have difficulties coming to weekly meetings with therapists. Web-based psychological intervention is therefore of special interest for this group. The question is whether older adults are willing to take part in online psychological treatment programs, if they are able to complete the treatment, or they drop out due to technical inabilities. **Method** In two online psychological interventions for cancer survivors aiming at improving cognitive function (A) and treating distress (B), respectively, we analyzed the acceptance and compliance rates in younger and older participants. The first intervention (A) was a cognitive training program for breast cancer survivors (Damholdt et al., 2016). Participants were recruited among cancer survivors who reported cognitive problems after cancer treatment; on average treatment were completed 4.5 years before. The program included 12 tasks and participants should train for a minimum of 5 days a week in 6 weeks. The second intervention (B) was an online mindfulness-based cognitive therapy program for breast- and prostate cancer survivors (Nissen et al., 2020). Participants were recruited during control visits to the oncology department 3 months to 5 years after completion of their cancer treatment. The program included eight weekly modules to be completed unassisted. **Results and Discussion** In intervention A, 110 younger survivors (<60 yrs) and 47 older survivors were included in the study. In the young group, 46 % did not complete the program, whereas 30% in the old group were non-completers. A subgroup of participants did not use the program at all; 6% of the young and 15% of the older. In intervention B, 204 younger and 179 older survivors were eligible for the intervention, of these 49% of the younger and 29% of the older were included in the study. Among the younger survivors, 1% declined participation because of no internet-access, whereas 7% of the older reported this reason. The completion rates were 45% in both the young and old group. The reasons for dropout were rather similar, but only among the older participants a few (4%) reported lack of IT-skills as reason for dropout. These results indicate that older cancer survivors were as likely as younger to complete online psychological interventions. Yet, older adults may be more reluctant to accept web-based interventions and they could experience more challenges with technical access to the programs.

References

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