Cancer survivorship is most commonly described as a distinct phase in the cancer trajectory occurring between the end of primary treatment and recurrence or end of life.1,2 In Canada, there are currently close to one million people living as cancer survivors, and with further advances in prevention, screening and treatment, this number is expected to increase in the future.3 The Canadian health-care system will see a higher number of people living with survivorship issues and it is therefore critical to understand the unique needs of this growing population. Understandably, the cancer care system emphasizes disease treatment, however, but a change is needed in order to acknowledge survivorship as an important part of the cancer trajectory.

Fortunately, national recognition for the importance of cancer survivorship research is at an unprecedented level in Canada, but there are challenges in advancing the research and practice work, including a limited number of professionals working in the area, as well as funding constraints.

CANCER TRANSITIONS: MOVING BEYOND TREATMENT

Program design
The first step following the survivorship meetings that took place recently (see sidebar, opposite) has been to develop research projects that align with the identified survivorship research priorities. An example of one such project is the inter-provincial supportive care and lifestyle modification intervention for cancer survivors called Cancer Transitions: Moving Beyond Treatment. The Cancer Transitions program was originally developed, implemented and evaluated by The Wellness Community in partnership with the Lance Armstrong Foundation at 10 sites in the United States. This 6-week program is designed to help survivors (0 to 24 months post treatment) make the transition from active treatment to post-treatment care. The weekly sessions, led by a trained facilitator, with assistance from expert guest speakers, are as follows:

1. Get back to wellness: take control of your survivorship
2. Exercise for wellness: customized exercise
3. Emotional health and well being: from patient to survivor
4. Nutrition beyond cancer
5. Medical management beyond cancer: what you need to know
6. Moving beyond treatment: next steps towards survivorship

To test the program’s feasibility and effectiveness in Canada, the Cancer Transitions program was piloted in four Canadian locations (rural and urban). The sites were selected from both cancer agencies and community-based organizations.

Pilot program evaluation
Pre- and post-delivery questionnaires were used to quantitatively and qualitatively evaluate both the program itself and any changes that occurred in the participants’ physical and mental health status and overall quality of life. Participants were asked to complete a series of five validated questionnaires at the beginning of the first session and at the end of the last session, plus three additional questionnaires at the
end of the last session that evaluated the program content and process. At the end of each session they also completed weekly evaluations of the program and were given space to provide qualitative feedback. Facilitators provided weekly qualitative feedback via a group teleconference. The participants were mailed 3-month followup questionnaires to measure if any observable improvements resulting from the program were sustained. Although there was no control group included in the evaluation, the evaluation is ongoing and new site delivery will include control groups.

**Pilot program results**
The cancer survivors participating in the pilot Cancer Transitions program (n = 87) experienced significantly measurable improvements in health-related quality of life and lifestyle changes, at both 6 weeks and 3 months post-program. Attendance remained high throughout the program. In addition, the materials provided both structure and accountability and were rated as very relevant in content. Experiences rated most highly were education, discussion and sharing, advice and support. Among the topics rated as highly relevant by the survivors were “how to communicate effectively with healthcare professionals” and “understanding the long-term side effects of treatment.”

In addition to the pre- and post-delivery evaluation, a Knowledge Exchange – Decision Support (KE-DS) Toolkit was utilized, which offered a systematic approach to organize and document the process of program planning and implementation. The KE-DS Toolkit provided information about the social context that the program was operating within and was therefore useful in illustrating the impact of the cultural environment on the delivery of the program.

The significant participant and program evaluation results indicate that the Cancer Transitions program is a promising supportive care intervention for cancer survivors in Canada. The program materials have been modified based on the evaluation feedback and a Canadian version is now being integrated into supportive care for cancer survivors at a national level in Canada.

**Program implementation in Canada**
In the fall of 2009, 40 new facilitators from across Canada were trained at 2-day workshops by experienced facilitators from the BC Cancer Agency. All provinces, except Alberta, Newfoundland and the Territories, sent representatives to the training sessions. The majority of the trainees were experienced group facilitators with a background in social work and clinical counselling. Program managers, nurses, oncologists and psychologists were also trained. The trainees work in cancer foundations, hospitals, community organizations, cancer centres and health authorities.

In total, there are 24 sites with trained facilitators (hospitals, cancer centres, health authorities, foundations and community-based organizations) that can deliver the Cancer Transitions program in Canada. Based on the requests for participant workbooks from the pilot sites and new sites, at least 240 cancer survivors will attend the program this spring in Canada. The intention is for this to be a sustainable and uniformly available cancer survivorship intervention program in Canada.

**Recent initiatives for cancer survivorship research in Canada**
- **Recent meetings have taken place in Canada to encourage stakeholders to identify key survivorship research themes and form alliances to advance and align research with practice, policy questions and survivor experiences.**
- **Stakeholders: academic research institutions, cancer agencies, community-based organizations, funding and policy-oriented organizations, and importantly, cancer survivors.**
- **National Invitational Cancer Survivorship Workshop, March 2008, Toronto. Objective: promote uniform approaches to cancer survivorship care across Canadian provinces, organizations and programs. Priorities: develop and implement survivorship care plans, identify models of care delivery, establish national standards/guidelines, promote survivor advocacy groups, ensure effective knowledge translation and promote survivorship research.**
- **Pan-Canadian Invitational Workshop, Vancouver, November 2008. Objectives: identify cancer survivorship research priorities for Canada and integrate initiatives at both national and international levels. While gaps in survivorship research had been highlighted elsewhere, Canadian consensus was lacking.**
- **Five key research priorities identified for cancer survivorship: measurement and tool development, identification of mechanisms underlying long-term effects, needs and characteristics of unique populations, effective care models and effective interventions.**

**FUTURE SURVIVORSHIP INITIATIVES**
Delivery and evaluation of the Cancer Transitions program and other survivorship programs in Canada will contribute to evidence-based research and knowledge that can guide clinical practice. As well, different methods of program delivery will be evaluated for feasibility and benefit. In rural and remote Northern BC the use of telehealth delivery of Cancer Transitions is being considered. In order to increase
equal access to survivorship care throughout Canada, translation into French and other languages is planned. The program has generated interest in Australia and Italy and is currently being piloted in the United Kingdom. Cancer Transitions is just one successful example of a key research priority that can be developed collaboratively on a national and an international basis.

To solidify collaborations between survivorship research groups across Canada, a national consortium is currently being formalized through a partnership between the BC Cancer Agency and the University of British Columbia. This consortium will encourage large and small academic and research institutions, regardless of geographic location, to collaborate and advance survivorship research.

Cancer Transitions is an example of how survivorship evaluation research can aid new program development and redesign based on observational studies from early adopters. The research evidence can be used to make recommendations regarding subsequent care planning and clinical policy development. In addition, as a number of these experiential studies are critically reviewed and disseminated, the findings can be used to inform similar programs, both nationally and internationally. From a research, practice and policy perspective, now is the right time in Canada to invest in survivorship research.

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