

‘ I wish I could fix it ’

Supporting your partner through breast cancer



About us

Breast Cancer Network Australia (BCNA) is the peak national organisation for Australians affected by breast cancer. We provide a range of free resources, including the *My Journey Kit* for women newly diagnosed with breast cancer and *Hope & Hurdles* for women with secondary breast cancer. Our free quarterly magazine, *The Beacon*, includes stories from women sharing their experiences, as well as information on a wide range of breast cancer issues. Visit our website www.bcna.org.au for more information or to connect with others through BCNA's online network.

BCNA's partners and sponsors raise much needed funds to ensure we can continue to support people affected by breast cancer.

Major Partner



Supporting Sponsors

sussan



Contents

Introduction	2
Learning about breast cancer	3
Common challenges for partners	9
Challenges for female partners	20
Summary	22
More information	23



Introduction

Women often tell us that they feel shock, disbelief, fear and uncertainty when diagnosed with breast cancer.

As the partner of a woman diagnosed, your feelings can be similar. It's normal for partners to feel overwhelmed and to experience a whole range of emotions: shock, numbness, uncertainty, fear, helplessness, sadness, anger, depression or anxiety.

As a man, when something is broken you immediately want to fix it, but when it comes to the most precious thing in your life, your partner, you can't, and that's very distressing. – Jacques

You may try to put your own feelings aside in order to focus on helping your partner get through this difficult time. While this is important, consider taking time to look after yourself.

We have our own journey which is also life changing. – Simon

Many partners tell us that their biggest fear, at least at first, is that they may lose the person they love. **It's important to remember that most women survive breast cancer.** Constant improvements in breast cancer treatment mean that more women are surviving. Australia has the highest survival rates in the world. Of all the women diagnosed with breast cancer in Australia, 89 per cent are alive five years later; and 83 per cent after 10 years. The majority of women recover and the breast cancer does not return.

This booklet aims to help you through your partner's breast cancer diagnosis, and to help you support her during treatment and beyond.

Please note that in this booklet we refer to people diagnosed with breast cancer as women. This reflects the 15,000 women who are diagnosed each year in Australia. We acknowledge, however, that around 100 men are also diagnosed with breast cancer each year. We also acknowledge that partners of those diagnosed with breast cancer can be male or female.

Fighting breast cancer is a long haul, with ups and downs. It usually ends well, but has to be faced as a long journey. – John



Learning about breast cancer

Knowing more about breast cancer and its treatment may help you to feel more in control. The following information is a general summary of breast cancer and its treatments. For information about your partner's breast cancer, we suggest you talk to her and ask her if you can go to her medical appointments with her. At these appointments you can ask questions if there is something you don't understand, and take notes that you and your partner can refer to later.

Be aware that there is a lot of information about breast cancer on the internet, and it is not all trustworthy. We list some reliable websites at the end of this booklet.

Types of breast cancer

There are many different types of breast cancer. Your partner's pathology report will have information about her particular type of breast cancer. Sometimes the cancer is referred to as a 'tumour'. BCNA's *Breast cancer pathology* fact sheet can help you understand the pathology report. See the 'More Information' section for information on how to order a copy.

The main types of breast cancer are:

Early breast cancer

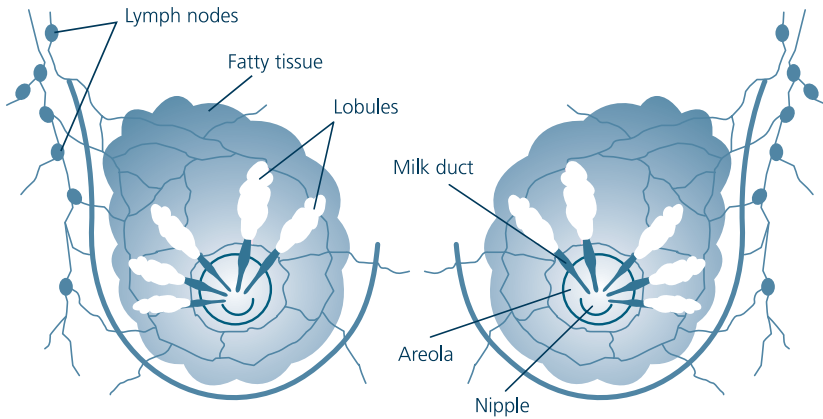
Early breast cancer is breast cancer which started in the breast's ducts or lobules and has spread into the surrounding breast tissue. It is sometimes called 'invasive' breast cancer. Early breast cancer may also have spread to the lymph nodes in the breast or armpit. The most common type of breast cancer is 'invasive ductal carcinoma', which is breast cancer that has started in the ducts of the breast and has spread into the surrounding breast tissue.

Ductal carcinoma in situ (DCIS)

DCIS is breast cancer which is contained within the milk ducts of the breast. These breast cancer cells have not spread outside the ducts into the normal surrounding breast tissue. DCIS is sometimes called 'non-invasive' breast cancer.

Lobular carcinoma in situ (LCIS)

LCIS is breast cancer which is contained within the lobules of the breast. These breast cancer cells have not spread outside the lobules into the normal surrounding breast tissue. LCIS is sometimes called 'non-invasive' breast cancer.



Less common types of breast cancer include:

Locally advanced breast cancer

This is breast cancer that has spread from the breast to other nearby areas such as the chest wall, or skin or muscle nearby to the breast.

Paget's disease of the nipple

Paget's disease of the nipple is a rare form of breast cancer where cancer cells grow in the nipple or the areola (the area around the nipple). The nipple and areola often become scaly, red, itchy and irritated.

Inflammatory breast cancer

Inflammatory breast cancer is a rare form of breast cancer that affects the blood vessels in the skin of the breast. It usually starts with the breast becoming red and inflamed, rather than a lump in the breast.

Secondary breast cancer

Secondary breast cancer (also called advanced or metastatic breast cancer) occurs when the breast cancer cells spread to other parts of the body, such as the bones, liver or lungs.

Hormone and HER2 status

Your partner's pathology report will also indicate whether there are any receptors on the breast cancer. This information will help the medical team decide the best treatment options for your partner.

Hormone status

'Hormone receptor positive' breast cancer means that the hormones oestrogen and/or progesterone, which are found normally in a woman's body, help the cancer cells to grow. Up to 80 per cent of women with breast cancer have hormone receptor positive breast cancer. The term 'oestrogen receptor positive' breast cancer is commonly used to describe hormone receptor positive breast cancer.

HER2 status

'HER2-positive' breast cancers are those where the breast cancer cells have more of a protein called HER2 than normal. The HER2 affects how quickly the cancer cells divide and grow.

Breast cancer can be both HER2-positive and hormone receptor positive.

Triple negative breast cancer

Triple negative breast cancers are those that have no hormone or HER2 receptors on the cancer cells. This means that neither oestrogen, progesterone nor the HER2 protein help the cancer to grow.

For more information about the different types of breast cancer, refer to the 'More Information' section of this booklet.

You may see other terms used on your partner's pathology report, like 'type', 'grade', and 'stage'. BCNA's *Breast cancer pathology* fact sheet can help you understand these terms. See the 'More Information' section for information on how to order a copy.

Breast cancer treatments

It's important to remember that breast cancer is not one disease – there are many different types and many different treatments. Your partner's treatment will depend on her type of breast cancer (the pathology) and her personal preferences and circumstances, so it may not be helpful to compare her treatment with the treatment of other women with breast cancer.

This section summarises common breast cancer treatments. To find resources that explain treatments in more detail, refer to the 'More Information' section of this booklet.

Surgery

The aim of surgery is to remove the cancer cells from the breast. During the operation, the surgeon will remove the area of breast that is affected by the cancer. The main types of breast cancer surgery are:

- breast conserving surgery (also called lumpectomy, partial mastectomy or wide local excision) – where the part of the breast with the cancer is removed
- mastectomy – where the whole breast with the cancer is removed
- bilateral (or double) mastectomy – where both breasts are removed.

After the breast cancer is removed, it will be sent to a pathology laboratory to be tested. This will indicate what type of breast cancer it is (the pathology) and will help the medical team to decide what further treatment may be best.

Chemotherapy

Chemotherapy is the use of drugs to kill cancer cells that may be present in the body. It is often used after surgery to kill any cancer cells that may be left in the breast or lymph nodes, or cells that may have started to spread to other parts of the body. Chemotherapy is prescribed by a medical oncologist and is usually given through a drip in the arm which slowly releases the drug into the bloodstream. This is called an intravenous, or IV, infusion. Not all women will need chemotherapy; this will depend on the particular type of cancer.

Chemotherapy can also be used before surgery to reduce the size of a large tumour and make it easier for the surgeon to remove it. This is called 'neoadjuvant chemotherapy'.

Radiotherapy

Not all women with breast cancer will have radiotherapy. It is often recommended after breast conserving surgery, and sometimes after a mastectomy. Radiotherapy aims to kill any cancer cells that may be left around the area of the surgery, such as the breast or chest wall. If your partner needs radiotherapy, she will be asked to see a radiation oncologist who will plan her radiotherapy treatment. Radiotherapy is usually given five days a week for around five to six weeks. Each treatment takes only a few minutes, although sometimes your partner may have to wait for a radiotherapy machine to become available.

Hormone therapy

Hormone therapy drugs are used to treat hormone receptor positive breast cancer. Common hormone therapies include Arimidex, Femara, Aromasin and tamoxifen. Hormone therapies lower the amount of oestrogen in the body, or stop it from feeding the cancer. They are tablets taken every day, usually for five years or more.

Targeted therapy

Targeted therapies are drugs used to treat certain types of breast cancer. Herceptin is a targeted therapy often used to treat women with HER2-positive breast cancer.

For more information about breast cancer treatments, refer to the 'More Information' section of this booklet.

Treatment-related side effects

All breast cancer treatments can cause unwanted side effects. Information on side effects and strategies to help manage them can be found on BCNA's website, in the *My Journey Kit* for women with early breast cancer, or *Hope & Hurdles* for women with secondary breast cancer. See the 'More Information' section of this booklet for more details.

The treatments can be harsh and demanding. – John



Common challenges for partners

We know that a breast cancer diagnosis can significantly affect partners. Following are some of the common challenges you may face, and tips from other partners that may help you cope with these challenges.

We found taking things back to basics helped, for example, finding our love and remembering why we are together. We went on dates and on the good days during chemo we made plans to take full advantage of Liz being well. – Scott

Not being able to fix the situation

Both you and your partner will probably feel distressed about her diagnosis. However, after a woman starts her treatment she will often feel a bit better because she is doing something. You, on the other hand, may feel like you are unable to do anything and this may leave you feeling frustrated. It can be especially hard if you are the type of person who likes to fix things.

As a man, when something is broken you immediately want to fix it, but when it comes to the most precious thing in your life, your partner, you can't, and that's very distressing. – Jacques

Things that may help

- Going to medical appointments with your partner with a list of questions and writing notes that you and your partner can read later. Prioritise your list so the most important questions are at the top, in case you run out of time.
- Reading about breast cancer with your partner.
- Asking your partner what you can do to help her. Suggest she write a list for you. The list can include things such as driving her to appointments, or just listening to her when she needs to talk.

My partner drove me to appointments and took notes. He arranged for the house to be cleaned and walked the dog. – Christy

I would encourage Ann to make each treatment decision based on the information she had. Seeing Ann exercising her will by choosing to confront her future choices was empowering for her. – Andrew

Feeling like you have to be strong for her

Partners tell us they often find it hard to know what to say, and some think that they need to always stay strong and 'put on a brave face'. Saying things like 'you'll be fine' or 'try to keep positive' may not be helpful. They may actually make it harder for your partner to talk to you about how she really feels.

Men try to be supermen, but you realise in this circumstance you can't be. You have to sit back after a while and just be Clark Kent. – Steve

There is a huge expectation on our partners that they have to stay positive, and my husband was overwhelmed sometimes. – Kylie

Things that may help

- Listening to your partner and letting her talk about her fears and hopes for the future. This will help her feel she is being heard and understood.
- Talking to your partner about how you are feeling.

Things to avoid

- Feeling like you need to fix the situation – women often just want someone to listen.
- Saying things like 'be positive', 'keep your chin up' or 'you'll be fine'.

Jane wants more of my emotional support – something that I find hard to do but something I am slowly starting to learn. – Clive

My husband gave me lots of cuddles and reassured me I was still beautiful. He filtered the phone calls when I didn't want to talk. He drove me to doctors' visits, hospital and treatments and stayed with me. This was good because you feel a bit vulnerable and you don't always take in all the information. – Tonya

Taking on more roles

Since your partner's diagnosis, you may have had to take on more roles to help. These may include household tasks such as cleaning, shopping or taking care of children, caring for your partner, or sorting out the finances. At the same time, you are probably still working. Many partners tell us that they find it hard to get used to these new roles and this can add to their stress.

Be aware that it may also take some time for your partner to get used to doing less, especially if she is used to doing things herself.

Things that may help

- Ask your family and friends for help. Tell them exactly what you need from them. Give them a list of things you would find helpful and let them choose what they can do for you.
- Call your local council, community health service or volunteer resource centre and ask what help they may be able to provide. More information about these services can be found in BCNA's *Financial and practical assistance* fact sheet.
- Talk with your boss at work about flexible working arrangements if this would help you.
- Talk with your partner about how you are both coping with the change in your roles.

Things to avoid

- Feeling guilty about asking your partner how to do things, especially household tasks.
- Beating yourself up if you don't get everything done.

Ask for and accept all the help you can get – physical, emotional and spiritual. Don't be too proud to ask. A community of family, friends, helpers, doctors and nurses is not to be underestimated. – Andrew

I worried about my husband. He was holding down a full-time job as well as looking after me. He's a very capable cook – but I wished that he'd felt he could ask his family for some help with meals. I wish he had felt he could ask for a bit of support for himself. – Kym



Telling your children about their mother's cancer

It can be hard telling your children that their mother has been diagnosed with breast cancer; but research shows that being open with them is the best thing. Keeping them informed will ensure that they won't feel left out, and that they won't fill in the blanks with their imagination. If they find out some other way, they may become angry and resentful.

Your children may feel a range of emotions and express these in different ways, from behaving badly to putting on a brave face. Making sure that your child understands that their own needs and concerns will be addressed can reassure them.

Cancer Council NSW has developed a comprehensive booklet on talking to children about cancer; which may help you handle this issue. The booklet includes information on helping children of different age groups – toddlers, young children and teenagers. The booklet also includes words that you can use to explain cancer to children of different age groups. See the 'More Information' section of this booklet for information on how to order a copy.

Things that may help

- Talk to a breast care nurse, social worker, psychologist or counsellor about the best ways to talk to your children about breast cancer.
- Talk openly with your children. Make it clear that the cancer is not their fault. It's best to use clear, short sentences, and provide information in small doses.
- Reassure your children that someone will be available to look after them.
- Allow your children to see that you are upset sometimes, rather than shielding them.
- Let your children ask questions and talk about difficult things.
- Maintain routine and structure in your children's lives – encourage them to participate in sport and normal activities. Routine provides a sense of normality which is reassuring to children.
- Let your children's class teacher and school principal know about the situation.
- If you have older children, consider asking them if they would like to attend your partner's treatment sessions with her. This will allow them to see what happens during treatment and may reduce fears that they have.

Things to avoid

- Keeping secrets.
- Letting go of structure and rules.
- Giving orders.
- Telling children to be good for mummy or daddy.
- Always rushing to reassure them, and trying to fix everything for them.
- Always pretending everything is okay.

Tears are very healthy and a great form of release, not something to be feared. – Andrew

Finding it hard to cope

If you are looking after your partner, you may be finding it hard to cope yourself. Maybe you have put your own wellbeing on hold to give all your attention to caring for your partner. Doing this for a little while is okay, but by putting your own needs on hold for too long, you may 'burn out' and no longer be able to support your partner very well. Looking after yourself will help you better support your partner.

You need time for yourself; that's not a crime. – Andrew

I felt it was really important for my husband to spend time just to himself. He was there if I needed him, but by having some time to visit friends and not talk about breast cancer, he would come home relaxed and ready to help. – Kylie

Things that may help

- Think about looking after yourself as beneficial, not as an indulgence.
- Take some time to do something you enjoy – going for a walk or spending time with friends. Even 30 minutes a day will help.
- Talk about your concerns with a close friend or family member, or call the Cancer Council Helpline (13 11 20) or MensLine Australia (1300 789 978). Both offer free phone counselling. The Cancer Council will be able to let you know if there is a local support group for partners.
- Talk to your GP, who may be able to give you strategies to help you cope or refer you to a counsellor or social worker.
- Make sure that you get enough sleep, eat a healthy diet, and exercise often. Together these things can help to lower stress and tiredness, and improve your mood.

Things to avoid

- Hiding your feelings from others.
- Feeling guilty about being depressed or anxious – get help if you feel you need it.
- Feeling like you always need to be positive or uplifting – just be yourself.

Changes in body image and sexual wellbeing

After breast cancer treatment, women experience a variety of physical changes. In addition to the loss of a breast, or part of a breast, she may also find herself having to deal with weight gain or loss, hair loss, scars, and skin changes. These changes can make women feel less attractive and lose confidence in themselves.

Many women tell us they grieve for their lost breast/s and their old body. While some women adjust quickly to their new body, others find it hard to come to terms with the changes. Some feel they are 'not quite whole' without two breasts, and using breast prostheses or having a breast reconstruction is really important. For others, having a breast shape is not so important. Everyone is different, and adjusting to these changes can take time.

Many women also find that their sexual wellbeing is changed by breast cancer and its treatments. Some women experience physical issues such as vaginal dryness and hot flashes, while others experience emotional effects like loss of confidence. Fatigue can also be an issue for women long after their treatment has finished, which can be debilitating. Many women tell us that these changes mean that they lose the desire to have sex. This can have a big impact on their relationship with their partner.



As her partner, it is important to be sensitive to her needs and desires for intimacy. BCNA's booklet on sexual wellbeing has been written for women diagnosed with breast cancer, but you may also find the information in it helpful. Details on obtaining a copy are in the 'More Information' section of this booklet.

Things that may help

- If you are missing the intimate aspects of your relationship, speak to your partner about how you are feeling. Try talking with her outside the bedroom, where you both may feel less pressure.
- Tell her how much she means to you, and regularly reassure her about how you feel about her physically.
- If your partner does not want to have sex, invite her to be intimate with you without having sex. Try other ways of being close like holding hands, kissing, hugging, massage and touching.
- If your partner wants to be physically intimate but feels too self-conscious to be naked, suggest that she may like to try wearing lingerie to provide some coverage.
- If you feel it would help, talk to a counsellor. Your GP or the Cancer Council Helpline (13 11 20) may be able to suggest counsellors in your area. Relationships Australia (1 300 364 277) also provides counselling on intimacy issues.

Things to avoid

- Pressuring your partner to be intimate with you.
- Avoiding your partner, as she may think that you no longer find her attractive.

My partner is my rock. He keeps me laughing. He doesn't bite back, just lets it pass because I am doing it tough. He doesn't say a lot but if I need to talk he answers me honestly. He shows no signs of loving me less because I am unwell, fat and bald. He loves me for who I am on the inside. There's been no pressure on me with regards to our personal life in bed. He knows things will get better and our life in that department will return.
– Michele

Returning to 'normal'

After a woman's treatment is finished, many partners expect things to go back to the way they were before the cancer diagnosis; however this doesn't always happen. Often women feel as though their lives have changed and they are not the same person they used to be. Many women tell us that, after their main treatment is finished, they feel scared as they no longer have regular contact with their specialist doctors. They worry about the breast cancer coming back.

It can be frustrating for you when you realise that life may not return to how it was before your partner was diagnosed. Many people who have completed breast cancer treatment have what they call a 'new normal'. This is a common experience, which may see them exploring new approaches to life, and re-prioritising their values and focus. They may not be as carefree as they once were, or they may be more carefree. They may learn to say 'no' to things and put themselves first. Many women enjoy their 'new normal' and the new focus it gives their lives, and many partners tell us that they are also able to adjust and resume a happy life together.



Things that may help

- Allow yourselves time to adjust to your 'new normal'.
- Be prepared that not all things will return to the way they used to be.
- Remind yourself that many women feel they are not the same person they used to be and, for them, life has changed.
- Encourage your partner to take her time finding her 'new normal' and reassure her she will have your support along the way.
- Seek help from a counsellor to help you both through this time. See the 'Counselling Services' section of this booklet.
- Consider planning something special to mark the end of treatment, for example, a short trip or celebration with the family.

Things to avoid

- Putting pressure on your partner to return to 'normal' life.

My tip for partners is to watch out afterwards. When you think it is all over, it probably isn't. It can take a while to recover. Take things as slowly as when she was having treatment. – Roslyn

Surviving breast cancer is life changing, and often in positive ways. – John



Challenges for female partners

Discussing your sexuality with health professionals

Sometimes women in same-sex relationships experience additional challenges when faced with a diagnosis of breast cancer.

Revealing to others that your partner has breast cancer immediately identifies that you are same-sex partners, which is somewhat confronting for some. – Judy, partner

Women diagnosed with breast cancer and their female partners sometimes tell us that they experience anxiety when considering whether or not to tell members of their medical team about their sexuality.

We know that women diagnosed with breast cancer sometimes worry about 'coming out' during their medical consultation, because they are not sure if their health professional will be understanding. As a female partner, you may also feel concerned that by mentioning your sexuality, you will be treated differently.

When I went to see my new oncologist, my partner Judy was shunned completely. It was as if she wasn't sitting next to me or even in the room. Every time Judy asked a question, the oncologist looked at me, but did not acknowledge Judy. – Becky, diagnosed with breast cancer

It's entirely up to you whether or not you tell your partner's health professionals about your sexuality. The knowledge and attitudes of health professionals vary, so be prepared to change your specialist if you feel that your needs are not being acknowledged. You do have a choice in the specialist you see, and if you are unhappy with who you have been referred to, consider asking your GP for a referral to a different specialist. Word of mouth is a powerful reference, so see if you can choose a specialist based on recommendations from other women.

I often mention my partner Judy, however not everyone is open to this. So for me, this is a loss of my own individuality and 'being' as I'm not able to openly share with others who I am, or share the experiences that Judy and I have together. – Becky, diagnosed with breast cancer

Access to tailored information and support

Dealing with a breast cancer diagnosis can take a significant toll on partners. Female partners in same-sex relationships tell us that, apart from close family and friends, there is very little support available to them. While counsellors are able to provide guidance on same-sex issues, little support is available specifically for same-sex couples who have experienced a breast cancer diagnosis. There are very few support groups specifically for same-sex couples experiencing a cancer diagnosis. If you find it hard to access support specific to your needs, it can make it even more challenging to cope, and can lead to feelings of isolation.

*In the past 18 years, apart from close friends and family, there has been very little support (if any) available to same-sex couples. I have at times felt lonely and isolated – no one to talk to about the lack of intimacy or changes to my relationship, no one to share my feelings of loss and sadness. Same-sex counsellors are not readily available. Nor do they seem to 'get it'. I've found they are unable to discuss issues surrounding homosexuality AND the effects of cancer on individuals and couples.
– Judy, partner*

I have attended many support groups, both metropolitan and rural. Although there are similar issues that both heterosexual and homosexual women diagnosed with breast cancer face, talking about intimate things you and your same-sex partner experience is not always understood or received well by others. We need a same-sex support group, led by lesbian women who have experienced similar things. – Becky, diagnosed with breast cancer

Breast care nurses often have good links in the community and may have information about useful sources of information and support. Your local Cancer Council (13 11 20) may have contacts with counsellors or support groups who will be sensitive to your needs. If you find out about helpful counsellors, websites or other resources, let your breast care nurse know so that this information can be shared with other women.

Summary

There is no right or wrong way for couples to cope with the challenges of a breast cancer diagnosis – find a way that works for you and your own situation. It's important to keep talking to your partner about how you are both feeling. Most people who share their feelings find it is a great relief.

If you need to, ask for help from others – a family member, friend, community organisation, or perhaps your GP or another health professional. Try not to feel uncomfortable asking for help – it's common for people to need a helping hand in hard times.

It is a shared journey; it has to be. The benefits of sharing the journey – the ups and the downs – far outweigh any alternative, and will probably be different for each partnership on the journey. – David

More Information

Resources

Breast Cancer Network Australia

- BCNA's *My Journey Kit* for women newly diagnosed with early breast cancer. If she doesn't already have one, your partner can order a kit, or you can order one for her. Visit www.bcna.org.au > New diagnosis > My Journey Kit, or call 1 800 500 258.
- BCNA's *Hope & Hurdles* for women diagnosed with secondary breast cancer. If she doesn't already have one, your partner can order a pack, or you can order one for her. Visit www.bcna.org.au > Secondary breast cancer > Hope & Hurdles, or call 1 800 500 258.
- BCNA's website has reliable, accurate information about breast cancer treatment and care, including information on treatment-related side effects. Visit www.bcna.org.au.
- In the *Personal stories* section of BCNA's website, male and female partners share their experiences of living with breast cancer to provide hope and inspiration to others in a similar situation. Visit www.bcna.org.au > Sharing and support > Personal stories.
- BCNA's *About breast cancer* webpage has a summary of breast cancer statistics in Australia. Visit www.bcna.org.au > About breast cancer, or call 1 800 500 258.
- BCNA's fact sheets and booklets cover a variety of topics on breast cancer treatment and care, including breast cancer pathology, hormone therapies and menopause, hair loss, lymphoedema, sexual wellbeing, and the practical and financial issues relating to breast cancer, such as patient assisted travel schemes, lymphoedema compression garment subsidies, and travel insurance. Visit www.bcna.org.au > Fact sheets and booklets, or call 1 800 500 258.
- Issue 44 of BCNA's free quarterly magazine, *The Beacon*, focused on sharing the breast cancer journey. Visit www.bcna.org.au > News > Beacon magazine > Beacon archive, or call 1 800 500 258 and we will download a copy and send it to you.

- BCNA's online network is a place for women diagnosed with breast cancer and their families and friends to connect and share with others in a similar situation. The group 'Partner Support' contains a number of blog posts from male and female partners seeking and providing support. The group 'Same Sex Partners Support Group' is a dedicated online group for women who partner women diagnosed with breast cancer. There is also a blog post on the network titled '*What can partners do to help*' which contains many comments from women about the useful things that their partners did to help them. Visit www.bcna.org.au > Online network.

At the end of the day all of our journeys are different, but the road to get there is not lonely; we partners are only a few clicks away.

– Scotty, BCNA online network member

Cancer Council

- Cancer Council Queensland's *Partners guide to coping with cancer* booklet has information and tips to help partners of women cope with breast cancer treatment, as well as relationship issues, coping with uncertainty, and other issues like fertility and helping children cope. Visit www.cancerqld.org.au > Information & resources > Order resources – patients, family and friends to download a free copy, or call 13 11 20 to find out if your state-based Cancer Council can send you a copy.
- Cancer Council NSW's *Talking to kids about cancer* is a comprehensive booklet that includes information on helping children of different age groups such as toddlers, younger children and teenagers. The booklet also includes suggested words that you can use to explain cancer to children of different age groups. Visit www.cancercouncil.com.au > Publications > Understanding cancer books > Talking to kids about cancer to download a free copy, or call 13 11 20 to find out if your state-based Cancer Council can send you a copy.

Cancer Australia

- Cancer Australia's website includes detailed information about breast cancer treatment and care. It also has information for partners of women diagnosed with breast cancer:
Visit www.canceraustralia.gov.au > Breast cancer or www.canceraustralia.gov.au > Breast cancer > Living with breast cancer > Managing emotional changes due to breast cancer > Impact of a breast cancer diagnosis on partners.
- Cancer Australia's *Guide for women with early breast cancer* has information to help you understand a diagnosis and treatment of early breast cancer. Visit www.canceraustralia.gov.au > Publications and resources, or call 1 800 624 973 for a free copy. (A copy of this guide is in BCNA's *My Journey Kit*, which your partner may already have.)
- Cancer Australia's *Guide for women with secondary breast cancer* has information to help you understand a diagnosis and treatment of secondary breast cancer. Visit www.canceraustralia.gov.au > Publications and resources, or call 1 800 624 973 for a free copy. (A copy of this guide is an optional extra to BCNA's *Hope & Hurdles*, which your partner may already have.)
- Cancer Australia's *When the woman you love has breast cancer* is a CD that talks about issues that men supporting women with breast cancer may face. Visit www.canceraustralia.gov.au > Publications and resources, or call 1 800 624 973 for a free copy. (A copy of this CD is included in BCNA's *My Journey Kit*, which your partner may already have.)
- Cancer Australia's *When the woman you love has secondary breast cancer* is a CD that talks about issues that men supporting women they love through secondary breast cancer may face. Visit www.canceraustralia.gov.au > Publications and resources, or call 1 800 624 973 for a free copy. (A copy of this CD is included in BCNA's *Hope & Hurdles*, which your partner may already have.)

*My husband has continually told every person along the way how fantastic the *When the woman you love has breast cancer* CD is, supplied in BCNA's *My Journey Kit*. I've discovered that it's still in the car CD player. – Adean*

Advanced Breast Cancer Group

Advanced Breast Cancer Group's DVD *Walking beside her: A partner's journey with secondary breast cancer* includes the personal story of Peter and his partner Fran, who was living with secondary breast cancer. Peter talks about their journey together from diagnosis to the final days, in the hope that this will help other partners of women with secondary breast cancer. Visit www.advancedbreastcancergroup.org, or call (07) 3217 2998.

Breast Cancer Care UK

Breast Cancer Care UK's *In it together: For partners of people with breast cancer* is a detailed booklet which has information on the issues that partners face, as well as tips to help them at different times during the breast cancer journey. Visit www.breastcancercare.org.uk > Publications > Diagnosed with breast cancer.

beyondBlue

beyondBlue has information on depression and anxiety, and where to get help. Visit www.beyondblue.org.au or call 1300 224 636.

Man Therapy

Man Therapy is a website developed by beyondBlue. It provides information for men on depression and anxiety. Visit www.mantherapy.org.au.

CanTeen

CanTeen's *Now What?* website is for young people aged 12–24 years who have a family member with cancer. It aims to help them cope by providing information, which can increase understanding, confidence and a sense of control. Young people can also connect with others in a similar situation and share their stories so they know they are not alone. Free information booklets can also be ordered from the website. Visit www.whatnow.org.au.

Books

Breast cancer husband: How to help your wife (and yourself) through diagnosis, treatment and beyond

Marc Silver, 2004

Available from bookstores and www.amazon.com.

Breast cancer: A husband's story

Bruce Sokol, 1997

Available from bookstores and www.amazon.com.

My mum has breast cancer: A family's cancer journey

Lisa & Harrison Sowards, 2006

Available from www.bcna.org.au > Shop.

Counselling services

Cancer Council

- Cancer Council Helpline 13 11 20
The Cancer Council Helpline is a free, confidential telephone information and support service run by Cancer Councils in each state and territory. It is available to anyone affected by cancer, including partners and other family members. Trained health professionals are there to speak with you about breast cancer treatment and care, the financial and practical issues of cancer, and can refer you to other services in your area.
- Cancer Connect 13 11 20
This is a service run by the Cancer Council in each state and territory. People diagnosed with cancer, or family and friends are able to connect with someone who has been through a similar cancer experience. The service is free and confidential.
- Cancer Connections
Cancer Connections is an online forum that allows you to connect with others in a similar situation.
Visit www.cancerconnections.com.au > Family.

Relationships Australia 1300 364 277 www.relationships.org.au

Relationships Australia offers relationship counselling as well as other counselling services. Most of the counselling services are face-to-face, but there are also some online and telephone counselling services for people in remote areas (in some states only).

MensLine Australia 1300 789 978 www.mensline.org.au

MensLine Australia is a telephone support and information service for men with relationship issues.

Carers Australia National Carer Counselling Program

1800 242 636 www.carersaustralia.com.au

The National Carer Counselling Program provides short-term counselling and emotional and psychological support services for carers. The counselling helps lower carer stress and improve carer coping skills. The counselling program is delivered through state and territory carer associations.

Peer support

Think Pink Foundation Living Centre Supporting Blokes meetings

(03) 9820 2888

Visit www.thinkpink.org.au > The Living Centre > Upcoming Workshops and Seminars.

The Think Pink Living Centre in Melbourne holds a quarterly meeting for male partners of women diagnosed with breast cancer. The meetings are facilitated by a breast care nurse and include regular guest speakers.

We still have a long journey ahead of us with the reality being that the journey will never be over, and cancer will always be part of our lives. Our challenge is learning how to live with that and not allowing it to totally consume us so that, at some point, we can recommence as near-normal a life as possible. – Clive

Resources and support for women in same-sex relationships

Breast Cancer Network Australia (BCNA)

1800 500 258 www.bcna.org.au

- BCNA's online network is a place for women diagnosed with breast cancer and their families and friends to connect and share with others in a similar situation. The group 'Partner Support' contains a number of blog posts from female partners seeking and providing support. The group 'Same Sex Partners Support Group' is a dedicated online group for women who partner women diagnosed with breast cancer. Visit www.bcna.org.au > Online network.
- There are a few support groups (BCNA Member Groups) that provide specific support for lesbians with breast cancer, and their partners. To search for a group, visit www.bcna.org.au > Find services and support near you.
- BCNA's website contains a list of other resources that may be useful for women in same-sex relationships, including women's personal stories. Visit www.bcna.org.au > Resources > Reviews – books and other resources > Resources for lesbians.

Breast care nurses

Breast care nurses often have good links in the community and may have information about useful sources of information and support. To see if there is a breast care nurse available in your area, contact your local hospital or speak with your partner's surgeon or medical oncologist.

Cancer Council 13 11 20

The Cancer Council Helpline is a free, confidential telephone information and support service run by Cancer Councils in each state and territory. Your local Cancer Council may have contacts with counsellors who will be sensitive to your needs.

The Australian Lesbian Medical Association (ALMA)

The ALMA compiles a list of doctors and mental health professionals who are recommended by lesbian and bisexual women.

Visit www.doclist.com.au for more information.

The following state and territory-based organisations provide free confidential phone counselling, referral and information services to lesbians.

Gay and Lesbian Counselling Service of NSW

www.glcnsw.org.au (02) 8594 9596 1800 184 527 (regional callers)
5.30–9.30 pm, Mon–Sun

Lesbian Line (02) 8594 9595 1800 144 527 (regional callers)
5.30–9.30 pm Mondays

Gay and Lesbian Switchboard (Vic and Tas)

www.switchboard.org.au (03) 9663 2939 1800 184 527 (regional callers)
5.30–10.30 pm, Mon–Sun

Gay and Lesbian Community Services (SA and NT)

www.glcssa.org.au (08) 8193 0800
7–10 pm, Mon–Sun

Gay and Lesbian Community Services (WA)

www.glcs.org.au (08) 9420 7201 1800 184 527 (regional callers)
7–10 pm, Mon–Fri

The Gay and Lesbian Welfare Association (QLD)

www.glwa.org.au (07) 3017 1717 1800 184 527 (regional callers)
7–10 pm, Mon–Sun

Acknowledgements

BCNA thanks the women and partners who provided their feedback on this booklet. We also thank Associate Professor Jane Turner, Senior Lecturer in Psychiatry, University of Queensland, for her assistance in the development of the booklet.





Breast
Cancer
Network
Australia



Breast Cancer Network Australia

293 Camberwell Rd
Camberwell VIC 3124

1800 500 258
www.bcna.org.au