

Author: Nidhi Gupta

Date: April 22, 2018

“How expressive writing can decrease stress and improve quality of life in breast cancer survivors”

Abstract

This article aims to highlight the effects of expressive writing on lowering stress and improving quality of life in breast cancer survivors. With breast cancer becoming one of the most common forms of cancer and leading medical advances resulting in more women transitioning into survivorship, low-cost and highly therapeutic interventions such as expressive writing can help women improve their overall well-being and state of mind.

Introduction

Breast cancer is now considered the most common cancer amongst Canadian women, and the second most leading cause of death after lung cancer (Canadian Cancer Society's Advisory Committee on Cancer Statistics, 2017). While increasing medical advances have led to impressive survivorship rates with a five-year survival rate for women of 87% (Canadian Cancer Statistics, 2017), there are many psychological and psychosocial issues that breast cancer survivors continue to live with many years after their initial diagnosis, which affects their stress levels and considerably affects their quality of life (Thomas, Gifford, & Hammond, 2017). Some of these issues include ongoing physical pain, anxiety, distress, fatigue, decreased sexuality, career stagnation or career loss, PTSD, fear of recurrence, fear of death, sleep issues, depression, low self-esteem, changing roles, inability to be caregiver to others, financial stress, body image issues, and the development of lymphedema (Guo, Tang, Li, Tan, Feng, Huang, Bu & Jiang, 2013; Adler & Page, 2008). Survivors, both short and long-term have reported that while their medical needs are over, their transition into survivorship has been fraught with distress and that they have lingering psychological and psychosocial issues, resulting in a decreased quality of life (Thompson, Stan, Solberg, Jenkins, Lackore, Pruthi, 2014). The purpose of this paper is to determine how expressive writing can be used as a viable intervention to help breast cancer survivors express their emotions in order to reduce their stress and increase their quality of life and overall well-being, and how to best promote a psychosocial adjustment to the disease.

Background

The benefits of expressive writing have long been associated with better health and stronger immune systems and Pennebaker was the first person to introduce expressive writing as a healing tool in his groundbreaking study on writing to relieve HIV related-anxiety (Pennebaker, Kiecolt-Glaser, & Glaser, 1988). Since then, other studies using creative arts such as painting and music therapy as an intervention have been conducted on cancer survivors, however, there seems to be a gap in research on writing interventions in particular to benefit quality of life in breast cancer survivors (Rieger & Schultz, 2014). To date, there are no quantitative studies that have been done on examining the relationship between expressing emotions through writing to lower stress and expressing emotions through writing to improve quality of life in breast cancer survivors, and this proposal aims to bridge that gap.

Topic A. Writing to decrease stress levels in breast cancer survivors.

The benefits of writing are that it allows a person to vent, rage, pour out, empty, or articulate any thoughts or feelings that are going on inside the body thereby allowing them to examine their emotions and perhaps even gain deeper insights into their thoughts and feelings. Over time, this can help to regulate emotions and alleviate stress (Lindquist, Snyder, & Tracy, 2014).

Topic B. Writing to improve quality of life in breast cancer survivors.

Writing about the strengths and coping resources in which a person has managed their cancer can give a survivor a better sense of control, and increased confidence to move forward in their life in a happier and more hopeful way, thereby improving their quality of life (Pennebaker & Chung, 2011).

Ways to measure stress.

The Impact of Events Scale (IES) by Horowitz, Wilner, & Alvarez (1979) is widely used to measure event-specific distress and is especially useful for measuring cancer-specific distress. It assesses the frequency of disturbing thoughts and avoidant behaviours in a given week, using a 15-item self-report measure to provide a total subjective stress score. Of the 15 questions, 7 measure intrusive symptoms, such as intrusive thoughts, nightmares, intrusive feelings and imagery, and 8 questions ask about avoidant behaviours, such as numbing of responsiveness, and avoidance of feelings, situations and ideas. The answers are rated using a 4-point scale

ranging from 0 (not at all), 1 (rarely), 3 (sometimes) to 5 (often). Questions for this specific study will be prefaced with, “With respect to your experience of cancer...” in order to measure the emotional impact of cancer on the participant and how much the impact of the cancer is currently bothering the participant.

Ways to measure quality of life.

To effectively measure the multidimensional quality of life in patients with breast cancer, the Functional Assessment of Cancer Therapy Breast (FACT-B) will be used (Brady, Cella, Mo, Bonomi, Tulksy, Lloyd, Deasy, Cobleigh, & Shiimoto, 1979). A breast cancer subscale (BCS) has been added to the FACT-General (FACT-G), with a particular emphasis on quality of life in breast cancer survivors’ values and time left in life. FACT-B is a 37-item self-report instrument yielding 5 subscale scores: physical well-being (seven items), social/family well-being (seven items), emotional well-being (six items), functional well-being (seven items), and breast cancer specific concerns (ten items). The physical well-being subscale evaluates a respondent’s physical concerns such as pain and fatigue, the social/family well-being subscale explores social and family support, the emotional well-being subscale assesses feelings, thoughts, concerns, fears of death, and general state of happiness, the functional well-being subscale measures the individual’s ability to work, play their various roles, acceptance of illness and general state of contentedness, and the breast cancer subscale rates the individual’s concerns about sexuality, appearance, femininity, stress, pain and brevity. Higher scores will indicate a better quality of life.

Anticipated Results

It is anticipated that in writing this paper, I will be able to determine a causal effect between expressive writing and decreased stress levels leading to an improved quality of life. This will become an important step towards understanding how writing is equally as useful an intervention for breast cancer survivors, as the more well-known and oft-used Mindfulness Based Stress Reduction (MBSR) intervention (Kabat-Zinn, J., 1982). This study will also determine the usefulness of expressive writing in guiding a person’s health and well-being, and how writing can be administered from the very start of a diagnosis and used well into survivorship. The success of this study can greatly contribute to an enhanced meaning of life in cancer survivors which could make them less reliant on the health care system and more in control of their happiness and quality of life. It is anticipated that as a result of this study, survivors will develop a long-term writing practice to help them adapt to the

changing demands and circumstances of their own disease and to assist them to cope more effectively with changes in health and their environment also.

Positive Implications

As breast cancer is now considered the most common cancer amongst Canadian women, and the second most leading cause of death after lung cancer (Canadian Cancer Society's Advisory Committee on Cancer Statistics, 2017), more women will increasingly seek out counselling to help them manage their thoughts and emotions, both through cancer treatment and during transition into survivorship. Since there are numerous studies showing the positive effects of art-based interventions to boost well-being in cancer survivors, (Lu et al., 2012; Luzzatto & Gabriel, 2000; Monti et al., 2006; Visser & Op'T Hoog, 2008), yet scant community-based programs offering this support, counsellors who recommend journaling to their clients could develop themes or prompts for journaling and be more aware of the process of reflective writing, and may even consider offering journaling workshops to cancer patients and/or survivors.

Another key area of consideration would be to conduct family counselling sessions, to include not only the patient, but the immediate family members also, in an effort to address thoughts, fears, concerns of everyone involved, as cancer often impacts the whole family (Corbett, 2015). Counsellors would also need to understand the role women play in the household or in their extended family and the impact of her being sick and needing to ask for help where typically she has always been the supportive and “strong” one to others, and how this may affect her psychological well-being and her own self-care, (Mackenzie, 2014).

Summary

The main reasons for writing this paper is to highlight how expressive writing is a therapeutically effective intervention for stress-related cancer and a relatively low-cost technique to administer. More recent research is still needed in this area, and as not only breast cancer, but all cancer incidences are on the rise, with the latest statistics showing that 1 in 2 Canadians is expected to get cancer (Canadian Cancer Society's Advisory Committee on Cancer Statistics, 2017). This will put a huge strain on our already stressed health care system, as patients transition into survivorship with little or lack of coping resources to manage their psychological and psychosocial symptoms (Thompson, Stan, Solberg, Jenkins, Lackore, Pruthi, 2014). Also, as mentioned earlier,

breast cancer is a disease most afflicted upon women. Since women are often the key caregivers in their families and in the community, it is imperative that early intervention steps are taken to ensure that survivors continue to put their own needs around health and well-being above the needs of others and find a suitable balance in life after breast cancer (Mackenzie, 2014).

Conclusion

The benefits of this research are to contribute to the ongoing successful transition from patients to survivors after a breast cancer diagnosis. The success includes integration of interventions such as expressive writing to help decrease stress and thereby improve quality of life in survivors. Since expressive writing is a non-pharmacological approach and can be used for the effective treatment of not only stress management, but any illness such as depression, anxiety, chronic pain, cancer, hypertension or cancer-related lymphedema (Niazi & Niazi, 2011) and in a variety of clinical settings, such as group work, online or through e-counselling, making it accessible for those who cannot travel or have limited mobility or resources.

References

- Adler, N. E., & Page, A. E. K. (2008). *Cancer care for the whole patient: Meeting psychosocial health needs*. Washington, DC: National Academic Press (US)
- Brady, M. J., Cella, D. F., Mo, F., & Shiimoto, G. (1997). Reliability and validity of the functional assessment of cancer therapy – breast (FACT-B) quality of life instrument. *Journal of Clinical Oncology*, *15* (3), 974-986 doi: 10.1200/JCO.1997.15.3.974 ·
- Brady, M. J., Cella, D. F., Mo, F., Bonomi, A. E., Tulsky, D. S., Lloyd, S. R., Deasy, S., Cobleigh, M., & Shiimoto, G. (1979). The functional assessment of cancer therapy scale: Development and validation of the general measure. *Journal of Clinical Oncology*, *11* (3), 570-579
- Canadian Cancer Society's Advisory Committee on Cancer Statistics. (2017). *Canadian Cancer Statistics 2017*. Toronto, ON: Canadian Cancer Society
- Corbett, C. (2015). Spotlight on: marriage and family therapists in cancer care. Retrieved from <https://www.cancer.net/blog/2015-01/spotlight-marriage-and-family-therapist-cancer-care>
- Goodwin, K. A., & Goodwin, C. J. (2017). *Research in psychology: Methods and designs* (8th ed.). Hoboken, NJ: John Wiley & Sons
- Guo, Z., Tang, H., Li, H., Tan, S., Feng, K., Huang, Y., Qing B., & Jiang, W. (2013). The benefits of psychosocial interventions for cancer patients undergoing radiotherapy. *Health and Quality of Life Outcomes* *11* (121) doi: 10.1186/1477-7525-11-121
- Horowitz, M., Wilner, N., & Alvarez, W. (1979). Impact of event scale: A measure of subjective stress. *Psychosomatic Medicine* *41*, 209-218
- Kabat-Zinn, J., (1982). An outpatient program in behavioral medicine for chronic pain patients based on the practice of mindfulness meditation. *General Hospital Psychiatry*, *4*, 33–47
- Lindquist, R., Snyder, M., Tracy, M. F., (2014). *Complementary & Alternative Therapies in Nursing* (7th ed., pp. 205-214). New York, NY: Springer

- Lu, Q., Zheng, D., Young, L., Kagawa-Singer, M., & Loh, A. (2012). A pilot study of expressive writing intervention among Chinese speaking breast cancer survivors. *Health Psychology, 31* (5), 548
doi:10.1037/a0026834
- Luzzatto, P., & Gabriel, B. (2000). The creative journey: A model for short-term group art therapy with posttreatment cancer patients. *Art Therapy, 17* (4), 265–269 doi:1080/07421656.2000.10129764
- Mackenzie, C. R. (2014). It is hard for mums to put themselves first: How mothers diagnosed with breast cancer manage the sociological boundaries between paid work, family and caring for the self. *Social Science and Medicine, 117*, 96–106 doi:10.1016/j. socscimed.2014.07.043
- Merz, E. L., Fox, R. S., & Malcarne, V. L. (2014). Expressive writing interventions in cancer patients: A systematic review. *Health Psychology Review, 8* (3), 339–361 doi:10.1080/17437199.2014.882007
- Monti, D. A., Peterson, C., Kunkel, E. J., Hauck, W. W., Pequignot, E., Rhodes, L., & Brainard, G. C. (2006). A randomized, controlled trial of mindfulness-based art therapy (MBAT) for women with cancer. *Psycho-Oncology, 15* (5), 363–373 doi:10.1002/pon.988
- Morgan, N. P., Graves, K. D., Poggi, E. A., & Cheson, B. D. (2008). Implementing an expressive writing study in a cancer clinic. *The Oncologist 13* (2), 196-204 doi: 10.1634
- Niazi, A. K., & Niazi, S. K. (2011). Mindfulness-based stress reduction: a non-pharmacological approach for chronic illnesses. *North American Journal of Medical Sciences, 3*(1), 20–23
doi.org/10.4297/najms.2011.320
- Pennebaker, J. W., Kiecolt-Glaser, J. K., Glaser, R. (1988). Disclosure of traumas and immune function: health implications for psychotherapy. *Journal of Consulting and Clinical Psychology 56* (2): 239–45 doi:10.1037/0022-006x.56.2.239
- Pennebaker, J. W., & Chung, C. K. (2011). *Expressive writing and its links to mental and physical health*. In H. S. Friedman (Ed.), *Oxford handbook of health psychology* (pp. 417–437). New York, NY: Oxford University Press

- Rieger, K., & Schultz, A. S. (2014). Exploring arts-based knowledge translation: Sharing research findings through performing the patterns, rehearsing the results, staging the synthesis. *Worldviews on Evidence-Based Nursing, 11* (2), 133-139 doi: 10.1111/wvn.12031
- Salsman, J. M., Schalet, B. D., Andrykowski, M. A., & Cella, D. (2015). The impact of events scale: a comparison of frequency versus severity approaches to measuring cancer-specific distress. *Psycho-Oncology, 24*(12), 1738–1745. <http://doi.org/10.1002/pon.3784>
- Thomas, R., Gifford, W., & Hammond, C. (2017). Writing toward well-being: A qualitative study of community-based workshops with breast cancer survivors. *Canadian Oncology Nursing Journal 27* (2), 178-185 (2017) doi: 10.5737/23688076272178185
- Thompson, C.A., Stan, D.L., Solberg Nes, L., Jenkins, S.M., Lackore, K.A., & Pruthi, S. (2014). Breast cancer survivors' self-reported needs and preferences of survivorship care. *Breast Journal, 20* (1), 107–109 doi:10.1111/tbj.12221
- Visser, A., & Op't Hoog, M. (2008). Education of creative art therapy to cancer patients: Evaluation and effects. *Journal of Cancer Education, 23* (2), 80–84