Investigating the experiences of post traumatic growth in individuals with metastatic cancer

1Department of Psychology, University of Bath, UK. 2Penny Brohn UK, Bristol, UK. 3Department of Life Sciences, Faculty of Science and Technology, University of Westminster, London, UK.

Introduction:

• To cope with the potentially traumatic threat of cancer, people attempt to reappropriate previously held assumptions about themselves and the world, which can lead to positive psychosocial growth, beyond that achieved prior to the diagnosis (Moore et al. 2011).
• Post traumatic growth theory (PTG) proposes a multidimensional framework of positive growth in 5 main areas; personal strength, new possibilities, appreciation of life, relationships with others and spiritual changes (Tedeschi & Calhoun 1997).

Penny Brohn UK:

• Penny Brohn UK is an integrative oncology cancer charity, supporting clients to live well with and beyond cancer.
• This focus is centred on the Bristol Whole Life Approach which recognises the importance of supporting an individual’s mind, body, spirit and emotions, alongside clinical cancer treatments.

Method:

• Semi structured interviews with 12 individuals with advanced/metastatic cancer who have used the services of Penny Brohn UK.
• Phenomenological thematic analysis was used as a flexible approach to identify common threads of experience across the sample, whilst also exploring individual perspectives.
• Participants were recruited via email and face to face interviews were held at Penny Brohn UK.
• Analysis procedure was based on the six stages of thematic analysis outlined by Braun and Clarke (2006).

Aims:

• This study will aim to further understand the potential experiences of the five areas of PTG in metastatic and advanced cancer populations.
• It will also aim to understand the ways in which the services at Penny Brohn UK may facilitate these experiences.

Results:

“I think we all live in a world where we feel we are in control (-) I can’t possibly be in control anymore”

“Meeting people who are from all walks of life, connected by this one common thread (-) you feel that you can be completely honest and it’s liberating”

“Putting up a pretence to those closest”

“just realise that everyone’s so terrified and doesn’t like talking about death and dying (-) we just don’t talk about dying”

“it took me a long time to recognise that acceptance wasn’t giving in”

“fighting for my life isn’t me than spending all of my time trying to make myself well”

“it’s almost cemented our relationship (-) I value my relationships much more”

“being scared of what’s in your head which is what I was then, so worried and avoidant of things (-) I’m in a much better place and that is thanks to Penny Brohn”

“you can talk to your family and friends at a level about cancer but you’re always aware that you don’t wanna upset them”

“It’s that sense of who’s good for me, what relationships do I want in my life”

“it’s an absolute gift to be in a place where, why wouldn’t you say it? Half of the time we don’t actually say it. Now I say it (-) So I think I have become more emotionally expressive than I ever have been”

“I don’t have to be strong but it has made me stronger”

Discussion and conclusions:

• Each theme provided insight into the experiences of PTG. An important aspect was the ability of participants to live a meaningful life whilst confronted with death, conceptualised as a ‘double awareness’ (Colosimo et al 2017)
• Relating to each theme, this study found experience of PTG in the dimension of: appreciation of life, personal strength and relating to others.
• Further growth beyond the PTG theory was also found in positive health behaviour changes, which has been found to be a unique aspect of growth in illness-related trauma (Morris et al 2012).
• Penny Brohn UK motivated individuals to take control of their health through self management techniques. The common sense model (Leventhal et al 1980), proposes that perceptions of illness controllability influence coping strategies. Coping strategies have been consistently associated with PTG (Cao et al 2018), providing a basis for the influence of illness perceptions on PTG in cancer patients.

Implications:

• Provides support for the whole person approach to oncology care, giving patients back personal control of health. Future research could investigate the influence of illness perceptions on PTG
• This evidence suggests the importance of facilitating acceptance of death to allow individuals to fully live and achieve growth.
• Future research should also assess the inclusion of health behavior changes as a dimension of positive growth after advanced / metastatic cancer.

References: