

Acceptability of Bibliotherapy for Patients With Cancer: A Qualitative, Descriptive Study

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Purpose/Objectives: To determine the acceptability of a self-help workbook, *Mastering the Art of Coping in Good Times and Bad*, for patients with cancer.

Research Approach: Descriptive, qualitative.

Setting: Participants were recruited from the psychosocial support cancer centers of two tertiary care teaching hospitals in Montreal, Quebec, Canada.

Participants: 18 individuals diagnosed with cancer.

Methodologic Approach: A semistructured interview guide with open-ended questions was used to gather feedback from participants about the workbook.

Findings: 18 participants completed the interviews from which the data emerged. Two main categories were identified from the respondents' interviews regarding the acceptability of the workbook. The first category focuses on content, whereas the other focuses on recommendations. Interviewees specified the following content as most helpful: (a) focusing on the positive, (b) mindfulness, (c) relationships, and (d) skill reinforcement. Recommendations to improve the intervention centered on having access to additional support while reading the workbook.

Conclusions: Bibliotherapy gives patients access to knowledge to help them cope and engage in their own self-management. The workbook *Mastering the Art of Coping in Good Times and Bad* may be an acceptable means of helping them manage their stress.

Interpretation: Bibliotherapy is not only cost-effective and easy to administer but also an acceptable minimal intervention.

Various interventions to treat distress and improve quality of life for patients with cancer have been extensively researched and are highly effective (Carlson, Waller, Groff, Giese-Davis, & Bultz, 2011). The interventions offered typically involve psychoeducation, cognitive behavioral training (group or individual), group supportive therapy, and individual therapy (Carlson et al., 2011). However, a significant proportion of patients with cancer who report psychological distress do not take advantage of available psychosocial care (Krebber et al., 2012). Barriers to receiving adequate psychosocial care include a lack of adequate screening for anxiety and depression in oncology settings, reluctance by patients to be referred, absence of trained mental health professionals to complete assessments and deliver interventions, stigma associated with receiving mental health services, inconvenient locations, and traditional models of psychosocial care delivery that do not meet current patient demands (Carlson, Waller, & Mitchell, 2012; Hutchison, Steginga, & Dunn, 2006; Krebber et al., 2012; Leykin et al., 2011).

To address some of the obstacles faced by those attempting to access psychosocial care, self-help approaches with little or no therapist input are being researched. Self-help interventions that use treatment books are referred to as *bibliotherapy* (Bilich, Deane, Phipps, Barisic, & Gould, 2008). Advances in