Post-Traumatic Growth and Psychosocial Adjustment of Daughters of Breast Cancer Survivors

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This article has been chosen as being particularly suitable for reading and discussion in a Journal Club format. The following questions are posed to stimulate thoughtful critique and exchange of opinions, possibly leading to changes on your unit. Formulate your answers as you read the article. Photocopying of this article for group discussion purposes is permitted.

1. This article addresses a concept that is new to the oncology nursing literature—post-traumatic growth. What do we learn from the literature review about this concept?
2. Considering our patient population, in what ways have we or might we recognize this concept in our patients or in their family members?
3. Which components of post-traumatic growth were assessed in the research subjects?
4. Which elements were correlated with post-traumatic growth in this study?
5. In what ways might content learned from reading this article be applied to everyday practice?
6. What is the level of evidence provided by this research?

At the end of the session, take time to recap the discussion and make plans to follow through with suggested strategies.

Key Points . . .

➤ The extent of post-traumatic growth or positive life changes among the sample of women in this study who had maternal histories of breast cancer parallels previous reports of growth among breast cancer survivors.
➤ Actively managing one’s emotions and the stressors associated with maternal breast cancer in a supportive social context can be positively related to post-traumatic growth.
➤ The co-occurrence of positive affect and depressive symptoms supports a multidimensional model of adjustment to maternal breast cancer.

Purpose/Objectives: To examine post-traumatic growth, or positive life changes, and its correlates among adult daughters of breast cancer survivors and to compare their psychosocial adjustment to women with healthy parents.

Design: Descriptive, cross-sectional survey.

Setting: Outpatient oncology units in two urban hospitals and two breast cancer organizations.

Sample: 30 adult daughters of breast cancer survivors (X age = 38.1 years) and 16 women with healthy parents.

Methods: Participants were recruited by hospital or research staff or responded to an announcement in a newsletter. Respondents completed the Post-Traumatic Growth Inventory and standardized assessments of psychosocial adjustment.

Main Research Variables: Post-traumatic growth and demographic, stressor, and psychosocial variables.

Findings: Women who cared for their mothers following breast cancer diagnosis and perceived their mothers’ illness to be stressful reported greater post-traumatic growth. Life satisfaction, social support, emotional processing strategies, and problem-focused coping strategies also were positively associated with growth. Women with maternal histories of breast cancer and those with healthy parents did not differ in psychosocial well-being, including affect, life satisfaction, and social support.

Conclusions: Findings suggest that some daughters of breast cancer survivors experience positive life changes following their mothers’ illness.

Implications for Nursing: For nurses seeking to adopt a holistic approach to practice, the personal growth of women following life-threatening familial illness warrants attention.