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The Feasibility and Effectiveness of Expressive Writing for Rural and Urban Breast Cancer Survivors

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Breast cancer remains the second most frequently diagnosed cancer for women in the United States, affecting about 250,000 women annually (American Cancer Society, 2010). Women diagnosed with breast cancer undergo a series of physical and psychological changes. Increases in stress levels and depressive symptoms, which can lower immune functioning and have negative implications for survival, commonly accompany the breast cancer experience (Anderson, Kiecolt-Glaser, & Glaser, 1994; Glanz & Lerman, 1992; Herbert & Cohen, 1993a, 1993b). Therefore, interventions that help alleviate stress, lower depression, and improve physical functioning without creating additional burdens (e.g., cost, time) are critical for helping women persevere in their battle against breast cancer. Because traveling to participate in interventions is not always feasible and may create additional burdens for patients with breast cancer (particularly for those living in remote, rural areas), identifying interventions that can be implemented effectively in patients' homes is important. As a result, the current research explored the feasibility of implementing an in-home writing intervention aimed at alleviating some of the physical and psychological costs associated with breast cancer survivorship.

Expressive Writing and Breast Cancer

The emotional expressive-writing intervention developed by Pennebaker and Beal (1986) has positively influenced participants' physical and mental health (Pennebaker & King, 1999). Initially, the expressive-writing paradigm asked participants to write generally about their thoughts and emotions regarding traumatic life experiences (Pennebaker & Beal, 1986), but researchers have used a variety of writing prompts, such as writing about life goals, one's best possible self, or an imagined traumatic event (King, 2001; King & Miner, 2000). Re-

Purpose/Objectives: To determine the feasibility and effectiveness of implementing an in-home expressive-writing intervention among breast cancer survivors living in urban and rural areas.

Design: Women who had completed radiation therapy were selected to participate in either expressive writing or a usual-care control condition.

Setting: All materials were completed in the privacy of participants' homes.

Sample: Of the 57 breast cancer survivors recruited, 40 participated in the writing intervention. An additional 40 women were assigned to the control group.

Methods: Participants completed measures of physical and psychological health at two time points prior to writing and at two follow-up time points three and nine months after writing.

Main Research Variables: Participation rates and physical and psychological health.

Findings: Results showed that engaging in a single in-home writing session for women with breast cancer was feasible and showed significant improvements in physical and psychological health compared to control three months (but not nine months) after writing. Although no difference was found in effectiveness of the intervention between women living in urban versus rural areas, rural women showed slightly higher participation rates.

Conclusions: The results illustrate the utility of employing remotely administered expressive-writing interventions for breast cancer survivors.

Implications for Nursing: Healthcare professionals who wish to use writing to facilitate improvements in their patients may suggest that patients write at multiple time points, offer for the intervention to be completed at home, and target rural populations in particular.

gardless of the prompt, researchers have documented the physical and psychological benefits of expressive writing among nonpatient (Burton & King, 2008; King, 2001; Pennebaker & Beal, 1986; Sloan & Marx, 2004; Smyth, 1998) and patient populations (Epstein, Sloan, & Marx, 2005; Frisina, Borod, & Lepore, 2004; Stanton et