

Identification of the strengths in postoperative gastric cancer patients

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Abstract

This study aimed to identify strengths of postoperative gastric cancer patients. Subjects were five postoperative gastric cancer patients who were members of a patient aid association. Semi-structured interviews were conducted and contents analyzed using a qualitative and inductive approach. 31 components of strength were extracted from the analysis. These components were divided into two categories, namely, the strength to take care of oneself and the strength to form a new perspective for living. These two categories were further divided into 6 and 5 subcategories, respectively. We surmise that the strengths of the postoperative gastric cancer patients are identified.

Introduction

Recent advances in medical technology as well as aging have spurred an increase in the number of cancer patients. Today, cancer affects 1 in 2 men and 1 in 3 women, and with such a high prevalence, it is now considered a chronic disease. Consequently, the attitude to live with cancer has become firmly fixed among people. So, Importance of supporting the empowerment of cancer patients, are well known [1-3]. Although the incidence rate of gastric cancer continues to be the highest of all cancers among

both men and women in Japan, with early detection and treatment made possible by advanced medical care, patients with gastric cancer have a 60-70% overall survival rate, with a stage-specific 5-year survival rate of 98.7% for stage I and 72.5% for stage II [4]. At present, following early detection and treatment, patients receive thorough guidance on, e.g., diet control, which helps them overcome the fear of recurrence and improve long-term survival. Self-help groups for cancer survivors have also been formed, allowing patients to support each other through relationships and strengthen their power to survive [5].

Cancer patients have received support physical and psychosocial from the people and the living environment. However, the patient has an own power to live. For example, strength and merit that everyone has, which can be utilized in order to survive deriving it is an important perspective to support cancer patients to live proactively. Some studies have examined cancer patients [6-10]. These studies demonstrated positive changes in the psychological dimension of cancer patients, and influenced nursing support aimed at the recovery of cancer patients [11] described empowerment as “a process of regenerating one’s own identity.” [12] revealed aspects of the empowerment process and identified powers that

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can be achieved or enhanced. Those forces are the ability to take action necessary to rebuild their lives. The forces showed the coordination of one's own life, physical condition, feeling of stability, and role performance [13] mentioned that strengths were physical ability, motivation, ambition, supporters, resource. Also, 23 cases of a care management model of strength for elderly, intellectual and physical disabilities were reported, and Strength model was effective in the patient's potential ability. According to [14] has studied strength of the patient with Incurable diseases, so, four strengths were found, such as identifying what she is flight against, connecting to people who are important for her, shifting values, and establishing targets. Strength components are classified into the individual and the environment [15]. However, the subject is not identified. Therefore, we considered components of strength, which may be specific to another disease.

In this content, we focused on the strength to understand the existence of a force on the nature of the patients suffering from cancer, to promote the ability of cancer patients to survive [16] described the understanding and importance of strengths and merit that can lead to empowerment in cancer survivor support. According to [17], the strengths perspective has drawn attention since the late 1980s in the United States. She notes that, "strengths are one's abilities to live effectively, which are possessed not only by individuals but also shared by a group or community ("resources"); strengths are not fixed but rather generated, and developed." [18] suggests, "tentatively, that strengths are abilities, resources, or assets, and stated that cultural and personal stories and traditions serve as gold mines where such strengths can be found." Studies concerning empowerment and strengths have greatly contributed to the practice of social work aimed at supporting people with disabilities [18-21]. Other concepts similar to "strengths" are

resilience [22] and hardiness [23]. [18] listed resilience as one of the strength concepts, explaining that it is a 'quickness to recover' and emphasizing the importance of incorporating this concept into empowerment support.

In this study, we focused on the strengths in order to develop support the power to live of cancer patients in the future.

Purpose

The purpose of this study was to identify strengths of postoperative gastric cancer patients by analyzing their interview data.

Research Method

Definition of Terms

Postoperative gastric cancer patients are those who have undergone surgical treatment after a diagnosis of gastric cancer, and who are leading a continuous social life after hospital discharge.

Strengths are defined as capacities, resources, or assets that a person is either born with or acquires through life experiences.

Design

An exploratory study using qualitative and inductive methods was conducted.

Subjects

Subjects of this study were five postoperative gastric cancer patients who had been informed by a doctor about their cancer diagnosis and were thus aware of the disease. All subjects were members of a patient aid association of Hospital A (Table 1).

Periods

May 2008 to October 2008.

Method of Interview

In semi-structured interviews using an interview guide, subjects were asked to recall and talk about how they felt throughout their cancer

Table 1. Subject profiles

Subject	Age	Sex	Disease	Surgical procedure		Years after surgery	Years enrolled in patient association	Family composition
A	70s	Male	Gastric cancer	(Stomach)	N=5	3.5 years	3.5 years	Lives with wife
B	60s	Male	Gastric cancer	Partial gastrectomy		12 years	12 years	Lives with wife
C	70s	Male	Gastric cancer Colon cancer	(Colon)	N=1	19 years	12 years	Lives with wife
D	50s	Female	Gastric cancer	Enterectomy		15 years	12 years	Lives with mother
E	70s	Male	Gastric cancer			21 years	12 years	Lives with wife

Table 2. Content of Interview

- (1) How do you perceive your current situation?
- (2) What were the hardships associated with your disease?
- (3) How did you cope with difficult times associated with your disease?
- (4) Was your past experience helpful in overcoming hardships?
(Are there any memorable events in your life?)
- (5) In what areas do you feel that you have grown psychologically since you became sick?
- (6) How do you plan to live the rest of your life?

experience, and how they approached their own experience in order to overcome difficult times. In addition, our interview employed open-ended questions to make it easier for subjects to tell their stories (Table 2). All conversations were recorded with an IC recorder. The interviews were performed in a private room, each taking approximately 60 minutes.

Data Analysis

Our study is similar to that of [12], whose aim was to reveal various factors by using a qualitative and exploratory approach. We judged this approach to be valid and conducted an exploratory study using qualitative and inductive methods.

Data analysis was performed on a verbatim record of all interviews. Verbalized contents were summarized for all subjects, and the contents were verified orally to obtain approval from all subjects. Following this, the contents were read repeatedly and analyzed using qualitative and

inductive methods. Ideas or perceptions of events that hinted at patient strengths, and contexts that indicated positive aspects, were extracted one by one and coded. Then, extracted parts were read repeatedly to interpret the data, and sub-categorization was performed through classification of groups based on similarity. Furthermore, those correlated by meaning were categorized at a higher level of abstraction.

Ethical considerations

The aim of this study was explained to the president and members of the patient aid association both verbally and in writing, and agreement was obtained along with the subject's signature. It was guaranteed to the research collaborators that cooperation was voluntary and could be discontinued, and that discontinuation would not result in any disadvantages. Throughout the duration of the study, data obtained that could be used to identify the subjects or individuals were coded to ensure

protection of privacy. Approval was obtained to record the entirety or part of interviews through verbal and written explanations. This study was reviewed and approved by the ethics committee of the Niigata University of Health and Welfare.

Results

1. Subject strengths

Analysis revealed six categories indicating strength to take care of oneself and five categories indicating strength to form a new perspective for living. Below are explanations for the extracted categories. In this report, categories are shown in square brackets [] and subcategories are shown in angled brackets < >. Examples of subject stories are enclosed in quotations “ ”, and necessary supplementary explanations are shown in parentheses () (Table 3).

1) Strength to take care of oneself

(1) [Sense of a place for oneself]

As indicated by experiences such as <finding a great mentor> and <the presence of a supportive mother>, subjects were surrounded by people with whom they could be themselves throughout their lives. Furthermore, continuation of human relationships represented <the presence of caring friends>, which created a positive environment for patients who fell ill with cancer. Finally, <a place for self-expression> and <knowledge obtained through rich human relations> provided a basis to learn about cancer treatment.

(2) [Strength to flexibly accept]

After being diagnosed with cancer, subjects committed themselves to the <search for the possibility of survival> rather than the possibility of death, and maintained their desire to live. They tended <not to be pessimistic> about having cancer and coped with difficult situations.

(3) [Strength to search for acceptable supporters]

Subjects possessed a strong <desire to have their feelings understood> and were anxious to have a trusting relationship with a doctor after developing cancer. Moreover, subjects were

<finding physician-centric explanations annoying>, suggesting that cancer patients were frustrated with the weakness of their position.

(4) [Understanding of physical changes]

Over time, subjects acquired <confidence that the body is recovering from cancer> and also experienced weight gain and a sense of regained physical strength. In addition, subjects thought that cancer was now behind them, replacing it with current activities and having confidence in recovery. As for <understanding of conditions>, subjects had a detailed understanding of the actual condition of their cancer and are living their lives accordingly to this day. As for the <ability to handle a physically challenging situation>, subjects understood and managed postoperative dumping syndrome well.

(5) [Strength to endure a difficult situation]

Subjects went through the <challenging experience of one's lifetime beyond expectation>, yet managed to overcome this difficult time, for which they could not draw on their previous experience. Furthermore, they strived for the best possible results with the attitude to <work through hardships without giving up>.

(6) [Ability to accept responsibility for fulfilling a goal or purpose]

Subjects were highly conscious of their roles, based on the sense of <responsibility toward their work> and turned toward their work sincerely. They were <too busy to worry about the disease> and continued to meet tasks while making allowances for their health. Their busy daily lives left them no place for anxiety associated with cancer.

2) Strength to form a new perspective for living

(1) [Strength to allow medical professionals into one's life]

Subjects were grateful as they came to realize what medical professionals were actually like, when these professionals came face-to-face with the patients during cancer treatment. They were <impressed by thorough dietary instruction and

Table 3. Analysis of strengths (excerpt)

Strength classification	Category	Subcategory	Examples of subject's experiences
Strength to take care of oneself	Sense of a place for oneself	Finding a great mentor	"I was taught or guided by many teachers. They looked out for me."
		The presence of a supportive mother	"Everything, I owe to my mother. She made it possible for me to attend college." "You are free, as the second son, destined to leave home. I'll send you out at least with a good education, so go on your own way"
		The presence of caring friends	"I had someone who understood me. So it wasn't so painful, not at all."
	Strength to flexibly accept	Search for the possibility of survival	"(The 5-year survival rate is) almost 80%. I don't want to be part of the 20%" "If talk (of surgery) comes up, I don't want it - and I'd just refuse it. I want to live a little longer."
		Not to be pessimistic	"I am lucky."
	Strength to search for acceptable supporters	Desire to have their feelings understood	"For example, it might be dangerous if tumor markers go up, but there are many factors. You don't have to worry too much about them - said my doctor. The way my doctor speaks gives me peace of mind."
		Finding physician-centric explanations annoying	"I think patients will act a little differently if doctors would try to have an equal relationship with them."
	Understanding of physical changes	Confidence that the body is recovering from cancer	"My weight went down from 72 kg to 59 kg, but now, it is back to about 65 kg." "I am regaining confidence about my body, including my physical strength." "When I take a bath and look at the scar, it's like, 'yes, I did go through surgery...'" "I think of how healthy I am now that I can do all these things."
		Understanding of conditions	"It's only about 5 mm of the outer layer of the stomach skin that got cut off. It shouldn't affect my body so much." "My stomach cancer condition, it involved the right pyloric region of stomach, and was fairly advanced. It almost went through the outer part of the stomach..."
	Strength to endure a difficult situation	Challenging experience of one's lifetime beyond expectation	"For two years, I was relocated to a post without taking my family. I complained to the Human Resources Department." "I wondered, did stress from work make a hole in my stomach? I experienced it with my own body, that's the point."
Ability to accept responsibility for fulfilling a goal or purpose	Responsibility toward their work	"I cannot go halfway with my work." "One month after hospital discharge, I went to work"	
	Too busy to worry about the disease	"My job keeps me so busy that I don't have time to be depressed." "I was in an environment where, even though I felt a little sick, I was so busy with my work I could not care about it"	
Strength to form a new perspective for living	Strength to allow medical professionals into one's life	Impressed by thorough dietary instruction and support for the patient and family	"The way nutrition teachers instructed required my wife's attendance." "The nutrition person explained it all. 'You should not eat this,' and so on. It was so thorough. 'Fish is white meat,' etc."
		Trust and appreciation for nurses	"I am so thankful to nurses. They are the ones who take care of patients the most with everyday necessities."
		Noticed sincere attitudes of physicians toward patients	"If the doctor works this hard for me, the only thing I can do is to follow what he says." "For the first time, I felt that I was alive thanks to a person like this. I learned that doctors work from early in the morning to late at night."
	Strength to accept wife's support	Dependent on their wives	"(She said) 'let's fight cancer together', this made me feel like I have a very strong ally."
	Strength to confront cancer itself	Accepted the situation by giving a meaning to their experiences	"Stomach was cut. It was lost at the price of life. But I gained a lot instead. That's the significance." "I had surgery, and there is the meeting (patient aid association) where I got to hear doctors talk. It was indeed good for me. I really think so."
	Strength to find oneself through cancer experience	Being incapable of performing as before	"Now, I have been teaching how to take a picture of the flower. But, I just helped the people for their hobby. It is not really what I want to do."
	Acquiring a suitable place for oneself	Not push oneself beyond limits	"Now, I will do what I can do tomorrow, tomorrow." "In our time, we were repressed in many ways. At home too, I was told to be patient. I was the first daughter..."
		Create a place for self-expression	"Even after two years, the interaction with other patients, which is defined by club rules, is not easy to maintain." "I found my own world and started making friends through photography."

support for the patient and their family>, had <trust and appreciation for nurses>, and <noticed the sincere attitudes of physicians toward patients>.

(2) [Strength to accept wife's support]

Subjects, who had never been aware of the necessity to rely on their wives in daily life, underwent a complete transformation and became <dependent on their wives> after getting cancer, and furthermore, came to <appreciate the strengths of their wives>. In fact, they admired the strengths their wives had. The <wife's support for dietary control> with respect to postoperative diet enabled subjects to begin their recovery.

(3) [Strength to confront cancer itself]

Subjects took the initiative to confront cancer as indicated by <having control over cancer>. Moreover, a change was brought about in subjects as they <accepted the situation by giving meaning to their experiences>, understanding the present conditions and facing the realities of cancer.

(4) [Strength to find oneself through cancer experience]

Subjects were able to clearly see themselves in a pitiful state, as described by <being in shock>, <being negative>, or <being incapable of performing as before>. Nonetheless, with hope, they were <finding the capability to overcome cancer>, which renewed their resolve to live.

(5) [Acquiring a suitable place for oneself]

Subjects learned their own limitations and accepted them by <learning about themselves>. Then, upon reflection on their own past, subjects decided to <not push oneself beyond limits> in an attempt to change themselves for the future. They recognized the future self as a new self, which enabled them to <create a place for self-expression> and rebuild a new environment suitable for the new self. Furthermore, they fully used their talents and experience in attempts to expand new human relations.

Discussion

1. Strengths of postoperative gastric cancer patients

1) Significance of strength to take care of oneself

From the results, we discuss the concept of strength to take care of oneself.

One of the classification of strengths indicated strength to take care of oneself, and it was composed of [Sense of a place for oneself], [Strength to flexibly accept], [Strength to search for acceptable supporters], [Understanding of physical changes], [Strength to endure a difficult situation], [Ability to accept responsibility for fulfilling a goal or purpose]. And, so-called, this integrated force.

Strength components are classified into the individual and the environment [15]. Thus, the individual strengths, was limited to an abstract representation, such as ability and advantages. However, strength to take care of oneself and components that are derived from the results of this study, is a novelty. First, strength to take care of oneself is one that has been cultivated, and this is essential in the process of survival of cancer patients. In addition, strength to take care of oneself that is led out, and it is possible to understand the subjects who have a variety of social background.

[Sense of a place for oneself] was affected by the living environment, a place that nurtured self-affirmation and created human relations, and these were interdependent. It is essential for patients to have someone who can recognize their true self in order to live life the way they want to. We surmised that this self-affirmation helped them develop [Strength to flexibly accept], which made them less prone to negative attitudes toward hardship. According to [24], the sense of stability resulting from being present in a given place that is tightly linked to one's way of life is considered basic certainty, which is what helps a person overcome difficulty and become stronger. Therefore, the strength that comes from having

such places likely enables patients to minimize agitation, confront cancer, and ponder various ways to manage life with cancer.

Patients also sought solutions to cancer and looked for someone to rely on. This represents [Strength to search for acceptable supporters] that fosters self-determination to act for themselves, as well as willpower to assert their own views and take initiative. On the other hand, [Understanding of physical changes] made them confident in their own survival. Consciousness of one's roles demonstrated their ability to be sustainable in order to meet their goals, suggesting that even in the midst of suffering from cancer, patients had clear objectives that they worked toward. This was a consistent belief among the subjects, and is similar to how the concept of commitment, one of the key elements of hardiness, is perceived [23]. [25] stated that "client strengths constitute the fuel and energy for empowerment". Accordingly, these strengths are those directed towards the empowerment. In addition, according to the Maslow Hierarchy of Need, desire for self-esteem is satisfied, it is necessary to be met before the desire Social need [26].

2) Significance of strength to form a new perspective for living

Components of strength to form a new perspective for living are [Strength to allow medical professionals into one's life] [Strength to accept wife's support] [Strength to confront cancer itself] [Strength to find oneself through cancer experience] [acquiring a suitable place for oneself]. These indicated strengths resulting from changes in values.

Subjects became aware of the emotional support they received. This signifies that the supporting person succeeded in building an equitable relationship with the patient by providing care from the patient's standpoint. We surmise that patients changed their values and gained new strengths, such as the [strength to

allow medical professionals into one's life] and the [strength to accept wife's support] through this experience. According to [18], people create meaning out of their own experiences based on the dominant stories that internalize the culture and society to which they belong. However, he also states that if people can redefine the dominant stories and change the meanings according to the hidden stories, strengths can be found there. Subjects lived their lives in an authoritarian society, which presumably means that they were comfortable with following authority (i.e., medical professionals). However, subjects accepted authoritative medical professionals through a change in their values ("It wasn't so much of a shock, but I feel like my doctor's encouragement gave me the will to live"). Furthermore, throughout their lives, they exhibited an attitude of authority toward their wives, but they learned to accept the position of being supported as they came to realize that support from their wives made them who they were ("my wife manages my health very well," "whenever something happens, such as hospitalization, I am most grateful to my wife"). What this signifies is an attempt to change their values, that is, a behavioral modification to acknowledge the strengths of their partners, or to put themselves in the hands of others. This can also be considered liberation from conventional ideas that had been internalized in an authoritarian society. The change of values brought them a sense of relief and opportunity to dispel feelings of bewilderment about cancer, which enabled them to identify a new self.

This prompted subjects to develop the [strength to confront cancer itself] and the [strength to find oneself through the cancer experience]. They accepted cancer for what it is in a subjective manner, and at the same time were able to achieve a new perspective on their own self, a self that had been incapacitated by cancer. In facing the truth about their present possibilities and

limitations, they finally accepted their reality.

Furthermore, with [acquiring a suitable place for oneself], subjects reflected on themselves and tried to rebuild a place where they could be themselves, which led to the empowerment. As [24] has explained, a sense of belonging is a necessary component of self-fulfillment, and hence, becoming empowered by learning about themselves and finding a suitable place for themselves can also be considered a sense of belonging.

2. Implications for nursing care intervention

This study revealed the strengths identification of postoperative gastric cancer patients. Our results suggest that, in supporting postoperative gastric cancer patients, nurses should try to understand these patients from various perspectives and perform intervention aimed at solving difficult situations. We believe that there are two important aspects in nursing intervention for postoperative gastric patients: strengths assessment and emotional support.

First, one of them is how strengths assessment of postoperative gastric cancer patients should be implemented. In order to understand difficult situations surrounding these patients, it is important to first assessment of the components of strength to take care of oneself and strength to a new perspective for living which reveal strengths active process. Furthermore, in order to derive the strength, there is a need for careful assessment of the individual and the environment [15]. Nurses need to learn, through involvement with cancer patients, the life history of each patient, their search for the chance of survival, and what they desire, because patient strengths can be identified by gaining these perspectives.

The second aspect is how nursing support should be provided for postoperative gastric cancer patients when they are in a powerless state. Assessment of the oppressed state of postoperative gastric cancer patients should be performed, and various factors contributing to the

sense of oppression should be sorted out in order to solve each problem. [6] and [27] studies indicate common traits in terms of emotional support. Our results suggest that many intervention clues could be drawn from the stories of postoperative gastric cancer patients. Furthermore, the significance of identifying strength is that it could potentially engender a transformation of the supporters, ranging from the type of nursing intervention that focuses on problem-solving to the kind that recognizes the importance of promoting patient initiative.

Limitation and Future Challenges

The limitation of this study is that the results were obtained from a limited subject group composed only of members of a patient aid association at Hospital A. In the future, the study will need to be repeated with different subjects. Furthermore, the identified categories require further investigation. Future studies should clarify the conceptualization of strengths, the process of strengths acquisition and a new self-formation process.

Conclusion

31 components of strength were extracted from the analysis. These components were divided into two categories, namely, the strength to take care of oneself and the strength to form a new perspective for living. These two categories were further divided into 6 and 5 subcategories, respectively. We surmise that the strengths of the postoperative gastric cancer patients are identified.

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