



The Arts

What a picture can tell you about surviving breast cancer

For cancer survivors, the end of treatment does not mean that the experience is all over; rather, it is simply when the healing process can begin, a quiet path that many women with breast cancer decide to keep private and walk alone, and that many of us are unaware of. Although many cancer centres offer psychological support, support groups, and coping programmes for women during treatment, the need to come to terms with changes in their bodies in the post-treatment stage is more of a self-led project.

The distress of having had breast cancer can live on in survivors for years, lingering in the form of fears and other psychosocial issues, such as demoralisation, maladaptive rumination, and thought suppression. However, many questions remain unanswered about how cancer survivors can be best supported after discharge: what is their story after leaving primary cancer care? To what extent does the distress they feel influence their life decisions? With the aim to shed some light on these questions, we started a programme with breast cancer survivors at the University of Genoa (Genoa, Italy), based on a phenomenological approach, a qualitative research method used for analysing socio-anthropological phenomena. Because not everyone is a narrative soul, and in opposition to classic qualitative studies, we decided to replace the commonly used self-administered questionnaires, narratives, and interviews, and opted for a more personal and direct form of creative communication— photography. In a time when our understanding of the world and human interactions is increasingly becoming a visual process, we need to seek meaning by looking deeper into what we see. Just as a piece of art can reveal an intricate and special story through the artist's strokes and dabs of colour, so can a simple, modern-day photograph. With this idea in mind, we invited a group of breast cancer survivors to take pictures of anything they felt represented their inner experiences of disease and survivorship. The pictures would then be discussed by the survivor with one of the clinical researchers, in a venue where they felt most comfortable. The images served as a guide to their story-telling. By narrating their stories through photographs they had chosen, participants allowed us to gain insight into the meaning their photographs had, and about their present condition. Their photographs shed light on noticeable places, moments, ideas, and emotions that were otherwise ineffable.

The snapshots shared with us and their descriptions were unique, each representing a personal journey: the pizza dough left on the counter when the hospital called a woman in for surgery represented the sudden change of family plans; a brook creating a divide on an arid landscape conveyed emotional insecurity and lack of family understanding and

support; sandals on an empty pebble beach at dusk signified a need to elaborate fear and anger; a stormy sky seen from the deck of a boat and a waterspout approaching across the calm sea surface represented the inner insecurity dangerously whirling over the serenity of daily life; and a red wig no longer in use on the wig stand suggested an emotional attachment to a very important period of life.

The stories showed common themes across experiences. Pictures contained subtle details symbolising meaningful moments in the disease path, revealing a diffuse ambivalence between looking forward, and remembering and re-living the trauma of disease. Most women described themselves as being projected towards full recovery, having discovered inner resources and a new appreciation for life; however, for others, the shadow of uncertainty on their future and echoes of past grief were still present.

Although some of the survivors in the programme were able to cope better than others, our findings suggest there are unmet needs of survivors with regard to finding meaning when coming back to the routine of everyday life, and a general vulnerability and risk of developing clinically significant distress after discharge from oncological care. This simple act of sharing their feelings through an artistic experience offered these survivors the opportunity to focus and acknowledge their inner emotions—a welcomed and needed boost to move forwards in their survivorship.

**Gianluca Catania, Luca Ghirotto, Silvia Di Leo, Fiona Timmins, Ilaria Corsi, Annamaria Bagnasco, Milko Zanini, Giuseppe Aleo, Loredana Sasso*

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Department of Health Sciences, University of Genoa, Genova (GC, AB, MZ, GA, LS, IC), Scientific Directorate (LG), and Psycho-Oncology Unit (SDL), Azienda USL - IRCCS di Reggio Emilia, Reggio Emilia, Italy; Center for Health Outcomes and Policy Research, University of Pennsylvania School of Nursing, Philadelphia, PA, USA (GC); School of Nursing and Midwifery, Trinity College Dublin, Dublin, Ireland (FT)
gianluca.catania@edu.unige.it

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For more on the **report on psychosocial experiences of women with breast cancer** see *Psychooncology* 2017; **26**: 1711–21

For more on the **transition of patients from oncology to primary care** see *Cancer patient to cancer survivor: lost in transition*. Washington, DC: The National Academies Press, 2003



Waterspout approaching across the calm sea