

## Chapter 8

# The Sense–Making Process in Adjustment to Breast Cancer Experience in Younger Women: A Clinical Healthcare Perspective

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### ABSTRACT

*The recent medical progress ensures high rates of long-term survival even in the face of illness previously with an unfortunate outcome: this is the case of breast cancer, which, to date, ensures more than 80% of long-term survival rates, and that for this reason can be interpreted as a chronic illness. In particular, the onset of breast cancer in under-50 women represents a potentially traumatic event that storms in the life of a young woman breaking the narrative sense of continuity, sameness, and integrity. This chapter discusses the role of narrative psychological devices for the understanding and the promotion of sense-making process and psychological adjustment to illness. Within a psychological risk preventive framework, the authors show findings from a longitudinal narrative research on the sense-making processes with breast cancer younger women highlighting narrative indexes of risks and resources during the first year of treatment. Implications for longitudinal support will be discussed.*

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## INTRODUCTION

To date, public health systems have to face new challenges and new demands emerging by the contemporary epidemiological scenario that is deeply different from that of a few decades ago. Relevant medical and demographic changes have characterized the last two decades and have made it necessary to make major economic and scientific efforts in order to make healthcare contexts the more prepared as possible to adequately respond to new health demands. These are especially related to the actual prevalence of non-communicable illness, which are non-infective illness characterized by their lasting nature, resulting in specific medical, social and psychological needs, which have to be recognized and addressed for an adequate sanitary assistance (Beaglehole et. al., 2011; Bennett et. al., 2018). The World Health Organization identifies cardiovascular illness, cancer, diabetes and chronic respiratory disorders as non-communicable illness.

Since some decades, we are witnessing progressive growth in the average life expectancy and, accordingly, in the ageing of population all over the world.

As the Global Health Estimates (WHO, 2019) over the past twenty years average life expectancy has globally increased from 66,8 to 73,3 years. This demographic change, however, has resulted in an increased of disability due to the prevalence of non-communicable illness: even if in 2019 people were living more than 6 years longer than in 2000, only 5 of those years were lived in good health. Indeed, most of older people often suffer from cardiovascular illness, diabetes, cancer and chronic obstructive pulmonary: these non-communicable illness have been collectively responsible for the reduction of healthy life-years and for the increase of disability from 2000 to 2019 (WHO, 2019).

The current prevalence of non-communicable illness is also due to social, economic and technological progress. Developments in these areas have in fact contributed to the increase of unhealthy lifestyles as the risk factors (Andreyeva et al., 2011; Fox et. al., 2019; Imam & Ismail, 2017; Lear et al., 2014; Lencucha & Thow, 2019; Willett et. al., 2006; Wu, 2019)

Finally, one of the major cause of the prevalence of long-lasting illness is medical progress. This apparently paradoxical affirmation finds its explanation in the fact that current progress in scientific, medical and technological fields have made possible the screening and the treatment of illness previously considered incurable and with a poor prognosis.

These advances, together with demographic and economic changes just discussed, have contributed to transform most of illness from acute to long lasting. Therefore, while until the second half of XX century medical demands were prevalently related to acute or infective illness, for some decades healthcare systems have more and more often faced challenges connected to long-lasting and non-communicable conditions (Epping-Jordan et. al, 2004; Graffigna & Barello, 2018; Holman & Lorig, 2004; McGrady & Moss, 2018). Acute illness are characterized by a sudden onset and a duration of few days or week. Therefore, like every other illness they consist of signs and symptoms and of some limitations of normal functioning, but their specific characteristic is that the duration of these symptoms is limited in time, due to quite fast healing or – as often happened until a few decades ago – to death (Scandlyn, 2000).

Long-lasting illness are instead characterized by their enduring nature: people have to live with them for many years (when not for their entire life), and have to face complex management and treatment plans while dealing with psychological effects of disability, loss of autonomy and changes in daily routines.

The medicine is capable of saving lives in many pathological conditions, but it is not yet able to cure some of these pathologies. The enormous increase in survival rates in oncological illness today generates an increase in people who face chronic conditions.

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