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Renewing Life: A Complementary Approach to Healing

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Renewing Life: A Complementary Approach to Healing

Renewing Life: A Complementary Approach to Healing

By

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MSW Clinical Research Paper

Presented to the Faculty of the

School of Social Work

Saint Catherine University and the University of Saint Thomas

St. Paul, Minnesota

in Partial fulfillment of the Requirements for the Degree of

Master of Social Work

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The Clinical Research Project is a graduation requirement for MSW students at Saint Catherine University/University of Saint Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

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Abstract

The Renewing Life program is offered through Pathways Health Crisis Resource Center. It is a unique approach designed to complement conventional medical care for individuals with life threatening or chronic illness, such as breast cancer. Renewing Life utilizes a manual that participants use as a tool throughout the sessions. Renewing Life has a specifically developed curriculum to assist participants in better understanding and processing the management of their life threatening disease or chronic illness. It teaches participants to live their lives genuinely in order to get the quality of life they may be seeking.

Pathways Health Crisis Resource Center received a grant from Susan G. Komen to offer the Renewing Life program to low income women managing a breast cancer diagnosis. Pathways utilized this support to offer the Renewing Life program over the course of an inspirational retreat weekend. This research is meant examine, from the participant's perspective, how Renewing Life impacted them.

This was a mixed methods study that comprised of a focus group and a survey. The focus group results revealed three consistent themes. It was found that Renewing Life increased self-confidence, increased the feeling of connectedness and a sense of community, and allowed for individuals to better let go of fear they carried and find peace. The survey utilized the Self-Assessment of Change tool, a scale containing word pairs. The word pairs consisted of a positive word and a negative word, for example depressed and hopeful. The results revealed a significant positive difference from the negative word to the positive word; therefore participants felt more positive feelings about their life after part taking in Renewing Life. These results illustrate the impact the Renewing Life program has on participants.

Acknowledgements

This project has been a passion of mine since I began working on it in late September. I would like to extend gratitude to Pathways Health Crisis Resource Center for allowing me to not only participate in the Renewing Life program as an observer, but also to conduct this research. It is my sincere hope that this organization can utilize this research to continue providing the Renewing Life Program to their participants and hopefully others in the Twin Cities.

Thank you to Tim Thorpe, Executive Director of Pathways for all your support and positivity. Also thank you to Carol Burling and Erin Herder for your help, thank you for taking your time to help complete this research, it could not have been done without you. Also thank you to my amazing committee chair and professor, Pa Der Vang, Ph.D. You have been supportive, motivating, and inspiring. I admire you very much. Additionally, thank you to Mary Johnson, PhD, for the work she has done with Pathways, being part of my committee, and the eye for detail that pushed me to work hard on this project. You are also an inspiration. I extend immense appreciation to Liz Peterson for facilitating the Renewing Life group that I was able to participate in and also for sitting as a committee member. You are a wonderful, intelligent, and calming presences Liz, and I am grateful to you.

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Introduction

Beginning the journey toward healing after a life threatening or chronic illness diagnosis is a process. At times this journey may feel isolating, lonesome, and terrifying. People going through this experience need support. Quality support is ideal to cultivating the mindset that can bring healthy coping strategies into one's life. Quality support may come from family, friends, and loved ones. It can also come from a community of people who are experiencing the same type of health crisis. Connecting with other individuals who are going through a similar experience is beneficial on many levels. Communicating with others through the shared experience of a life threatening or chronic illness can help one figure out how to plan their medical care, cope with the changes that accompany an illness, and navigate relationships with their loved ones. Renewing Life is a curriculum based support group for people working toward healing from a life threatening or chronic illness.

Renewing Life is a course offered through Pathways Health Crisis Resource center and facilitated to people experiencing a life threatening or chronic illness. The curriculum based group is run by two professionals who are qualified and have participated in Renewing Life teacher training. Renewing Life is meant to help individuals better understand themselves and how to cope with a health crisis. When diagnosed with a chronic or life threatening illness, finding a health care team and determining a treatment method can be exhausting. Not only do patients make decisions about their treatment method, but they have to cope with the emotional component that accompanies their illness. This can have a significant impact on their ability to heal.

Pathways Health Crisis Resource Center is an organization that provides a range of services to people living with a life threatening, chronic illness, and their caregivers. Individuals

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can use the services at Pathways to heal themselves in unique ways (Pathways, 2013). Services at Pathways are free of charge. They are provided by professionals who volunteer their time. Individuals who want to be Pathways participants are asked to complete a registration and are apprised of the participant bill of rights. They are also invited to an orientation which guides them through the process of participating in the services available. . Once this is complete participants can register for any of the healing approaches that are scheduled. Having the ability to use services that impact one's mind, body, and spirit allows for clients to feel better. Feeling better, whether it be emotionally, mentally, or physically can assist in the healing process, this can be unique for everybody but is an undeniable component for health care. At Pathways one participates in a holistic approach to healing, individuals can join in art therapy, meditation, individual counseling, massage therapy, group counseling, healing touch, acupuncture, tai chi, guided imagery, and Renewing Life.

Renewing Life is a complementary healing program for a group of 10 to 12 participants who are committed to attending and participating for nine sessions. The program may take place over a weekend in a retreat or over the course of 9 weeks in two-and-a-half hour sessions. Renewing Life is a curriculum based support group where participants are coached on skills which are rooted in evidenced based techniques designed to benefit the healing process. Through camaraderie, positivity, and words of wisdom written and read aloud, Renewing Life tweaks one's perception of their current and future experience. For some members this tweak might be incredibly slight and for others it may be more impactful. The relationship between group members is developed through stories, emotions, jokes, and shared experiences. These relationships are essential to the Renewing Life experience. Group members develop their skills with the help of a facilitator and other members. Stories, affirmations, and techniques are

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practiced during Renewing Life and participants can utilize what they learn to help them on their healing journey (Pathways, 2013).

The purpose of this research is to better understand the impact of Renewing Life on the lives of the participants from their perspective, in order to provide evidence for the benefit of this distinctive program. Understanding how Renewing Life is impacting those who participate in it is essential to finding the evidence needed to solidify the validity of this unique program. Evidence provided by this research will offer validity and insights to other organizations involved in supporting people with serious health challenges.

Literature Review

According to Pathways (2013) the Renewing Life program combines emotional support and educational programming that people can use to assist them in their healing journey.

Pathways' philosophy is rooted in the understanding that people can heal no matter where they are in the process of an illness; when confronted with a life threatening or chronic illness people set out on a healing journey, rather than a fight against their diagnosis (Pathways, 2013).

Pathways (2013), as an organization is rooted in the understanding that healing may be different for everyone; for example a client may not be able to physically cure their cancer but they may address their negative self-beliefs, making them more fulfilled with their relationships and their life.

Life threatening and chronic illnesses encompass a wide range of pathologies. This research will focus on breast cancer as a life threatening/chronic illness and will explore the impact that complementary approaches have on women with breast cancer. Complementary approaches are utilized along with conventional medical treatment and help patients on a holistic

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level (Sered & Agigian, 2008). A review of the literature on the use of complementary therapies found that when combined with conventional medical treatments, patients are more invested in their care and fulfilled emotionally (Balneaves, Kritjanson, & Tataryn 1999). This literature review discusses research surrounding patients with breast cancer and their use or non-use of complementary approaches. According to Sered and Agigian (2008) breast cancer is the most commonly diagnosed cancer in women in the United States. Breast cancer impacts all aspects of an individual's life from physical pain, emotional drain, and financial strain; living with breast cancer is a challenge.

Upon diagnosis of a chronic or serious illness such as breast cancer, there are options that patients can utilize for care. One option is conventional medical treatment; this may first involve the removal of metastasis tumors and is usually done through surgery (Chang, Glissmeyer, Tonnes, Hudson, and Johnson, 2006). Along with surgery conventional medical treatment methods for breast cancer include chemotherapy and radiation therapy (Change et al., 2006). Conventional medical treatment for breast cancer can be life saving for patients. Though such treatments can be lifesaving they can also be emotionally, physically, and financially draining. According to Sugermen (2013) side effects of chemotherapy can be brutal and include sores and sensitivity in one's mouth, nausea, vomiting, and fatigue. In addition to those side effects chemotherapy can destroy red blood cells making it more difficult to fight infections and drastically more susceptible to illness (Sugermen, 2013)

Due to the strain of conventional medical treatments as well as the emotional burden of a cancer diagnosis, individuals can become overwhelmed, depressed, and hopeless. This aspect can make their ability to heal more difficult. Fortunately there are complementary approaches to healing that can accompany traditional medical treatments that patients can utilize to help them

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to help manage breast cancer by sustaining their emotional and mental health. Complementary approaches provide emotional, mental, and psychological support that give patients the tools to cope with the draining results of a breast cancer diagnosis and conventional treatments.

Rees, Fiegel, Vickers, Zollman, McGurk, and Smith (2000) defined complementary approaches as acupuncture, chiropractor/osteopath, spiritual or faith healer, medical herbalist, homeopathy, hypnotherapist, massage therapist/aroma therapist, nutritional therapist/special diet, reflexologist, relaxation, yoga, meditation, counseling, psychotherapists, support groups, and self-help groups. According to the National Center for Complementary and Alternative Medicines (2014) “complementary” refers to use of non-mainstream approaches to health care. The National Center for Complementary and Alternative Medicines argues that “A substantial amount of scientific evidence suggests that some complementary health approaches may help to manage some symptoms of cancer and side effects of treatment.” Complementary approaches can offer people many different options for their health care. The vibrant combination of conventional medical treatment and complementary approaches can impact a person in a number of significant ways. Many hospitals today are beginning to take an integrative approach to care they provide for clients, often including complementary approaches. As the evidence grows linking complementary approaches to positive outcomes, the use of these approaches will gain momentum. This will allow more patients to experience complementary approaches and benefit from them. With increase use of complementary approaches the medical community will shift their perception toward a more integrative stance.

There is a range of useful and dynamic complementary approaches. Some examples include acupuncture, chiropractor/osteopath, medical herbalist, homeopath, massage, nutritional therapist, reflexology, support groups, spirituality, meditation, counseling/therapy, relaxation

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techniques, guided imagery, and yoga. Complementary approaches can provide pain relief, ideas on improved nutrition, and mental health reassurance. Therefore combining complementary approaches and conventional medicine can treat all aspects of patients in a holistic manner.

According to Pathways (2013), the Renewing Life program combines emotional support and educational programs to help participants heal their emotional and physical health when challenged by a serious illness. Renewing Life is a complementary approach that patients can participate in to help them cope and gain resiliency after a breast cancer diagnosis.

Complementary/Alternative Approaches without Conventional Medical Treatment

According to Chang et al. (2006) complementary approaches used alone, without the use of conventional medical treatment, have shown outcomes that are not as effective as when combined with conventional medical treatment. When used alone, without conventional medical treatment, complementary approaches such as group therapy, psychotherapy, acupuncture, massage therapy, meditation, and guided imagery are considered “alternative”. However, when used in conjuncture with conventional medical treatment these types of therapies are considered “complementary” because they work alongside conventional medical treatment. Complementary approaches work with conventional medical treatment for a more holistic treatment.

Conventional medical treatments have incredible value to our society and have improved human health worldwide.

Chang et al. (2006) asserted that alternative therapies used as primary treatment for breast cancer are associated with increased recurrence and death; homeopathy instead of surgery resulted in disease progression in most patients. Chang et al. (2006) conducted a chart review of breast cancer patients who had refused or delayed standard surgery, chemotherapy, and radiation therapy; results showed out of eleven patients that refused surgery and opted for some type of

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complementary therapy, 10 developed disease progression. Therefore it was found that patients who choose to not partake in conventional medical treatment and solely utilize complementary therapies will have a higher risk of mortality. Chang et al. (2006) stated that “although alternative medicine/complementary therapies are associated with worse patient prognosis, treatment strategies that incorporate alternative medicine while continuing standard therapy (i.e. complementary medicine) may have more positive outcomes.”

Conventional Treatment without Complementary Approaches

Although complementary approaches are available for cancer patients, they often times go unutilized. According to Beatty, Koczwara, Knott, and Wade (2012) patients choose not to use complementary services for several reasons. Beatty et al. (2012) found that complementary therapies are not often pursued due to resource barriers. Beatty et al. (2012) found in a focus group study that participants believed that the potential cost, lack of time, and lack of energy to be the main resource barriers that hindered patients from seeking complementary approaches. Beatty et al. (2012) asserted that in terms of cost the approach that had the most concern was special diets and herbal remedies since these treatments involve a drastic shift in the patient’s lifestyle and require purchases that exceed many patients’ budget. Thus, patients who already believe that complementary approaches are too expensive will be least likely to try a special diet or natural herbal supplement for their health management regime. However, when complementary approaches are offered free of cost for participants they may be more likely to utilize them. Pathways is an organization that does just that, their services are utilized by many individuals everyday at no cost.

Another deterrent from utilizing complementary approaches involved lack of evidence that therapies work; participants believe that the evidence for alternative/complementary

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therapies simply show that one could potentially lower their risks of mortality or remission but there is no guarantee of remission (Beatty et al., 2012). Although, complementary approaches may not be for everyone and may not have a guarantee of effectiveness, they may help some patients who are concerned about the emotional, spiritual, and psychological aspect of illness.

As complementary approaches gain more evidence to illustrate their effectiveness they will more likely gain acceptance in the medical community. As health care professionals show approval of for complementary approaches patients will be more likely to feel more comfortable participating in their healing journey.

Complementary Therapies with Conventional Medical Treatment

According to Balneaves, Kritjanson, & Tataryn (1999) the utilization of complementary approaches allow patients to gain a sense of control over their truly uncontrollable events, thus leading patients to assert one's personal responsibility for their health. Balneaves et al. (1999) argued that this is beneficial to patients who feel they need to do something dynamic or different to manage their cancer. On the other hand, Balneaves et al. (1999) state that complementary approaches can offer patients a release of control; where control is deferred to their practitioners, this is beneficial for patients who feel overwhelmed by their diagnosis and treatment and want someone to lead them through their journey, such as a therapist or group support.

Further literature suggests that there is a conceptual link between control and a search for treatment alternatives as well as treatment ideology grounded in the tenets of holism, personal responsibility, and prevention (Balneaves et al., 1999). Therefore, patients who choose to utilize complementary approaches may do so because they are unhappy with conventional care alone, or may have treatment ideology rooted in holism (Balneaves et al., 1999). Some healthcare

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providers and patients believe that treatment of the whole person (body, mind, and spirit) can have an impact on one's physical health (Balneaves et al., 1999). Balneaves et al. (1999) found a 9-81% (variation due to variations in sampling methods, demographics, and definitions of complementary therapies) in a meta-analysis of research conducted with persons with cancer using complementary approaches. Balneaves et al., (1999) indicated that the participants in the study appear cognizant of the limited scientific evidence supporting the ability of complementary therapies to "cure" cancer and use therapies as adjuvant, rather than as replacements to conventional care. In another study, Rogers (2006), found that women with breast cancer feel empowered and want responsibility for their treatment decisions, including the use of complementary approaches (Rogers, 2006).

When medical treatment is combined with complementary approaches the whole person is treated, their physical health, mental health, and spiritual health are all incorporated. Therefore the individual receives a more holistic experience for their health care. Holistic health care calls for the treatment of the biological functioning of a human being, the psychological functions, and the social functioning. An individual's biological functioning is incredibly important and is the center of treatment in a biomedical approach, the multi-dimensional framework or the bio-psycho-social approach understands medical treatment from not only the biological functions but also the psychological and social functions. Therefore it is a progressive and more dynamic way to heal people.

According to Sperry (2006) a bio-psycho-social approach versus a biomed approach will account for all aspects in a persons' life including cultural norms and family dynamics, this provides for a more thorough treatment of the chronic illness. Sperry (2006) asserted that when approaching health care from a bio-psycho-social lens cognitive behavior therapy (CBT) is the

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dominant approach. CBT is used as the foundation of Renewing Life; it is shown as a proven method for changing negative thoughts, emotions, and behaviors.

One aspect of health care is self care. Patients must be able to care for themselves when away from a health care setting. Often doctors recommend eating three square meals a day, getting adequate sleeping, taking prescriptions, and staying active according to one's ability. Complementary approaches also call for patients to participate in self care strategies. Renewing Life utilizes strategies that involve self care; these strategies are cognitive behavior therapy techniques.

Research Question

Renewing Life is a complementary approach that patients can participate in to help them cope and gain resiliency after a breast cancer diagnosis. This research project aims to answer the question: How do Renewing Life participants perceive how the impact of this program on their quality of life? This question poses the assumption that there is a positive relationship between mental health and physical health. In a review of the literature it was found that complementary approaches when used alongside conventional medical treatment can be beneficial to the patient (Rees, Fiegel, Vickers, Zollman, McGurk, & Smith (2000) and Sered & Agigian (2008)). Additionally, the literature revealed that when complementary therapies are used without conventional treatment the health risks increase (Rees, Fiegel, Vickers, Zollman, McGurk, and Smith (2000) & Sered and Agigian (2008)). However, it was discovered in the literature that some patients choose not to utilize complementary therapies for various reasons according to Beatty, Koczwar, Knott, and Wade (2012). A review of the literature shows that there is a gap

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in the research between the safety and efficacy of complementary approaches and the perceived outcomes of those who use them (Johnson, 2014). There is a need to find out specifically how, from the patients perspective, complementary therapies such as support groups and healing techniques increase their outcomes compared to conventional medical treatment alone.

Conceptual Framework

In order to answer the question about how Renewing Life, a complementary program is effective for its participants from their perspective, we must first understand the theoretical framework that influences the development of programs such as this, and why there must be evidence to support their effectiveness. The concept of a bio-psycho-social approach to understanding human behavior is one aspect that provides a conceptual framework to how complementary therapies are effective, specifically the Renewing Life program. The multidimensional framework or the bio-psycho-social approach identifies individual functioning as being affected by multiple aspects of the person: physical, psychological, spiritual, cultural, and social. In addition to the multidimensional framework as a concept that elucidates the positive outcomes for Renewing Life is the ecological systems theory, also known as person in the environment. Combining the multi-dimensional framework and the ecological systems theory provides a conceptual framework that is foundational in understanding how individuals may benefit from the Renewing Life program.

Rogers (2006) asserted that the bio-psycho-social approach describes human behavior in terms of several components the biological, psychological, and social needs. Human beings have biological and physiological needs that encompass their overall health; individuals' minds are not separate from their body, the body is a system that cooperates together. Human behavior can be explained through the notion that the biological, psychological, and social needs must be met

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in order for complete functioning. Kaut (2006) suggested that social workers must consider the biological, psychological, social, and spiritual needs of their clients in order to provide competent services. Kaut (2006) stated that when working with clients that have a chronic or life threatening illness the physical and biomedical issues are consuming and could overshadow their identity.

It is crucial to consider the psychological, social, and spiritual needs of an individual experiencing a life threatening illness and complementary approaches address the needs that go beyond conventional biomedical issues. Support groups, counseling, yoga, acupuncture, qigong, and meditation are forms of complementary therapies that address a portion of those needs. The Renewing Life program is a curriculum based support group that attempts to meet the psychological, social, and spiritual needs of participants. The multi-dimensional framework provides the foundation for the cohesion of conventional medical treatment and complementary therapies. Supporting the notion that human beings should be served with not only their biological functioning as a priority but also their psychological, social, and spiritual needs as a priority. By supporting the mind, body, and spirit, human beings develop a strong ability to cope with the illnesses that challenge them, specifically for purposes of this study, breast cancer.

Along with the multidimensional framework as a theoretical basis for the usefulness of complementary therapies with conventional treatment, the ecological systems theory provides concepts into the benefits of complementary therapies. According to Rogers (2006) ecological systems theory understands human behavior as it relates to their environment, where they are actively involved in their development. Rogers (2006) argues that people evolve in their development and environment through time, such that development is elucidated by the actions of the individual, occurrences within the individual's environment as well as how they both

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impact each other. Rogers (2006) states that “ecological theory involves the way people perceive their environment and experiences significantly affect their well-being”. In the Renewing Life program, the curriculum is facilitated by a certified leader, and participants are taught how to create an environment in their lives that allows for healing and growth so they are better prepared to cope and find peace with their chronic and life threatening illness. The ecological systems theory and person in environment is a conceptual framework that influenced the development of this research.

Methods

Research Design

This mixed methods study incorporated both quantitative and qualitative strategies. Individuals in the study were group members of Renewing Life Retreats. Renewing Life was offered through Pathways in two formats; a nine week course taken once weekly and a retreat attended over the course of one weekend. The retreat format incorporates all the material taught in the nine week sessions, only covered more quickly and intensely over a weekend. Pathways received a grant from Susan G. Komen with the goal of hosting Renewing Life retreats for women of low income. Pathways utilized this opportunity to hold three retreats at different locations around the Twin Cities, during June, August, and January. This research seeks to investigate the perceived outcomes of the women with breast cancer who participated in the three retreats supported by the Komen grant.

Upon completion of the Renewing Life weekend retreat, Pathways mailed participants surveys asking for anonymous input about their experience. In estimated 45 surveys were disseminated and 13 were returned to Pathways at the time of this research. This researcher

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conducted a quantitative analysis of the data provided on the surveys using SPSS 19. It was hypothesized that participants would identify an improvement in their well-being since being part of Renewing Life.

In addition to analyzing the survey data, a focus group was also conducted. This composed of the qualitative component of this study. It took place March 8th, 2014 at 12:30 P.M. Participants for the focus group were recruited from people who attended the August and January retreat. Nine participants attended the focus group session, participants wanted as little identifying information as possible. For the privacy and protection of the subjects they were all identified as participant with no specific number. The raw data that was comprised from the transcription is italicized in the findings section. However, the participants are not identified.

Population /Sample

Twenty participants who attended the three retreats of Renewing Life were recruited to participate in this study. The three retreats served those specifically impacted by breast cancer and women with low income. Women with breast cancer ages 41-75 made up the group of survey respondents and focus group attendees. A total of eleven participants completed the survey and nine participants attended the focus group-. The survey data is gathered from women with breast cancer ranging in age from 40 to 65 who have participated in the Renewing life program during a weekend retreat. Members from the retreat weekends were recruited for the focus group. This sample was recruited through the mail by sending an invitation requesting their participation, they were asked to join a focus group about the impact Renewing Life has had on them. A copy of the recruitment letter can be found in appendix D.

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Informed consent was already gained for the quantitative component of this study. For the focus group consent will be gained prior to the start of the focus group. An invite letter was sent by Pathways to individuals who went to the Renewing Life retreat in August and January. Five days before the focus group was held, a Pathways volunteer contacted the individuals who were sent the invite letter. The volunteer reminded the retreat participant about the focus group and asked them if they planned to attend. Nine out of the twenty participants were able to attend the focus group. A copy of the informed consent and invite letter can be found in Appendix B and C, respectively. The consent form explains that this focus group interview will be transcribed; participants' identities will remain confidential. In transcription every participant will be identified with the letter P. and will remain anonymous.

Protection of Human Subjects

When the survey (see appendix C) was disseminated in late July 2013 to the first group of Renewing Life participants, a letter of informed consent was sent along with it. The letter discussed how the survey helped measure the Renewing Life program. The letter stated that the surveys will remain anonymous and confidentiality is ensured. There was not return addresses on the survey envelopes when participants mailed them back and no identifying information was on the survey or envelopes the completed survey was returned in.

Retreat participants were mailed focus group recruitment letters (see appendix D). The informed consent was read and discussed with participants before the focus group began. The risk of participating in a focus group were stated clearly and the voluntary status was be highlighted. Participants were ensured further anonymity by remaining unidentified in the transcription write up and in the findings section. Participants were promised that they would only be identified with the letter P, each participant will be identified solely by the letter and there is not any

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differentiation between participants. Additionally, participants are not numbered. The informed consent will also be discussed by the moderator prior to the start of the focus group.

Additionally, for further protection of focus group participants, information about specific characteristics about focus group members will not be written out in the findings section. The demographics of the focus group are similar for each participant. The focus group members involved nine women between the ages of 41 and 70 years old with two African American women and seven Caucasian women.

Operationalized Variables

Renewing Life is held in a group setting and uses curriculum designed to teach group members techniques that they can utilize on their healing journey (Pathways, 2013). The curriculum material in Renewing life is unique. It is organized to intentionally allow the participant to journey from the inside of their being outward with the goal of a new perspective about themselves. The topics covered include staying positive through your healing journey, how to connect with your mind, body, and spirit, and the importance of nourishing relationships (Pathways, 2013). As well as how to put a boundary between yourself and depleting relationships in order to boost your ability to focus on your healing; “Renewing Life teaches participants to listen to their bodies so that the mind/body/spirit can work together to heal rather than fight illness in the body” (Pathways, 2013). The program discusses how to flush out negative emotions and the importance of not getting stuck in emotions that are difficult. According to Pathways (2013) Renewing Life coaches participants about expressing the feelings of grief around their illness and enables them to feel a renewal of spirit and strength.

For purposes of this paper chronic or life changing illness is operationalized as a physical illness that has a significant and severe impact on the long term health of a person. Examples

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include breast cancer, lupus, mesothelioma, COPD, prostate cancer, liver cancer, stomach cancer, Alzheimer's, diabetes, heart disease, and arthritis. Participants in Renewing Life could also be caregivers to an individual with a life changing or chronic illness.

Measures

Instrument

This survey was sent to Renewing Life participants prior to the onset of this research. The survey contained Self-Assessment of Change measure. It asked individuals to provide word pairs set on a visual analog scale. The word pairs contained a negative word on one end and a positive word or phrase on the other end. Participants were asked to use the letter "B" to represent where they fell on the scale before participating in Renewing Life and an "N" to represent where they fall on the continuum now in their lives. The Self Assessment of Change tool specifically measures the following: not sleeping well and sleeping well, exhausted and energized, dull senses and vibrant senses, scattered and focused, stuck and letting go, overwhelmed and empowered, hopeless and hopeful, blaming and forgiving, closed-hearted and open-hearted, isolated and connected, depressed and joyful, anxious and calm, my body does not recover quickly and my body does recover quickly, defined by my illness and not defined by my illness, broken and whole, and lastly unbalanced and balanced. Each of these word pairs are placed on a line, one end of the line is composed of the negative word and on the other end of the line contains that word's positive counterpart. Figure 1 displays an example of what a question would look like.

Stuck_____B_____N_____Letting Go

Figure 1.

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Along with the demographic information and the Self Assessment of Change instrument, the survey asked participants about each section of Renewing Life. On a five-point Likert type scale, survey takers were asked to rate the various topics in Renewing Life, the retreat facilities, and the meals provided based on their perception of how important each one was. This information was valuable for Pathways to gather in order to know if the facilities were good and if the topics covered were helpful. However, for this research this information was not necessary and therefore not analyzed.

Additionally, the survey asks about the nine sections of Renewing Life and how participants rate each session. The sessions of Renewing Life include psychoneuroimmunology, reframing negative to positive, affirmations, mind/body/spirit connection, guided imagery, healing energy, nurturing/nourishing relationships, recognizing change and loss, expression of grief, expression of fear, attitudinal healing, forgiveness, reframing beliefs, assessing inner wisdom, cheers and challenges, making life wishes, gift giving, and ceremony (Pathways, 2013.) These questions pertain to Renewing Life as a program and what the participants felt were important topics. This information does not fit in with the research question being pursued and was not used in this research.

Data Analysis Plan

The Survey

In order to analyze the data from the survey the data was analyzed through SPSS 19 software. Due to the small sample size the only significant and reportable data were that of descriptive statistics. In the inferential statistical analysis two variables and their relationship were analyzed. Descriptive statistics illustrated the demographic information about the sample.

The Focus Group

The intention of the focus group was to explore participants' perceptions of how Renewing Life has impacted their lives. Subjects were informed of the risks of participating in an invite letter as well as at the beginning of the focus group and in the informed consent. A copy of the focus group outline can be found in appendix E. The outline used to facilitate the focus group was developed from emerging themes found in the review of the literature and from the research questions. The focus group session was audio taped and transcribed. Upon completion of the transcription the audio tape will be destroyed for protection of the participants. Quotes from focus group participants are identified in italics. The transcription will use the letter "P" to represent the participants and was non-identifying; the participants were not represented numerically.

The raw data was analyzed for recurrent themes. According to Berg (2012) the raw data illustrates themes that are found both in the literature review and in the focus group discussion. Additionally, trends and patterns not heavily in the literature but important nonetheless, were noted. This analysis took into account the individual responses, group responses, and reactions. Themes will center on how the participants perceived Renewing Life and how it has impacted their quality of life. Three themes were established through the content analysis of the focus group discussion. Each theme became a category. Content in the literature and from the focus group were fit into appropriate themes. The themes were developed by phrases, agreements, and ideas that the focus group members discussed. Below they are illustrated through various profound or meaningful quotations as the themes are presented.

Focus Group Findings

Content analysis from the focus group transcription revealed meaningful themes that illustrate the perceived impact of the Renewing Life Program. There were nine participants that attended the focus group. It was held at Pathways Health Crisis Resource Center in Minneapolis, Minnesota. The group lasted from 12:00 P.M. to 1:30 P.M. Prominent themes voiced by focus group participants were improved self-confidence, stronger sense of community and connectedness, and less fear with more peace. These three themes were discussed and commented on throughout the focus group. The group came to a consensus that these themes shaped their life experience after Renewing Life and allowed for change to occur in each person's life. All group members concurred that beside any uncontrollable outside circumstance, Renewing Life had a positive impact on their quality of life. Below the themes are discussed, quotes from focus group members are in italics.

Improved Self-Confidence

When managing a breast cancer diagnosis the reverberations into every facet of one's life are vast. The cancer has impacts not only on one's physical health but their emotional, mental, and spiritual health as well. Peters, Daniel, Clover, Bredin (1996) stated

“Illness and disfigurement can stigmatize and lead to feelings of being different and unacceptable. When facing them, it may be therapeutically important to be reminded that we can still be loved, valued and respected. The problem is compounded because we live in a society that promotes and favors images of women with perfect appearances. Talking about one's feeling of unacceptable difference commonly arising as a consequence of breast removal is not encouraged in our culture.”pg. 28

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This quote comes from a clinical forum of practitioners who serve patients with breast cancer; though the quote was published in 1996, it still resonates today with our culture, society, and focus group members' experience. Breast cancer is accompanied with immense loss on all levels, whether one may have had a mastectomy or not, there are physical and emotional losses. Adjusting to and managing these losses is painful and can result in a lack of self confidence. During the focus group session this was expressed. *"When you hear that you have cancer it feels like everything is falling apart."* stated one focus group member. *"The rest of the world treats you like you are broken, like something is wrong with you"*. Statements such as these illustrate how self-confidence could easily dwindle with a diagnosis and treatment. Decreased self-confidence can cause a person's self esteem to lower; this can lead to negative thinking, depression, relational problems, and lack of motivation to enjoy life. Decrease confidence for any reason can be slightly debilitating and especially when trying to manage breast cancer. It appears that by participating in Renewing Life participants were able to either regain or gain new confidence within them; thus empowering them to live their life more authentically and with increased self-determination. One focus group participant stated *"After this program I realized that I had tried way too hard to be perfect and I should just be myself for who I am and do the things that I wanted to do."* This is an example of how the Renewing Life program influenced this participant's self confidence. By allowing herself to be who she is she is able to increase the quality of her life.

Another example of increased confidence was stated by a focus group member *"Everyday (after Renewing Life) we build a little bit stronger, I know in my past I have sometimes told people my opinion but now I have no problem telling them what I feel. I say hey this is my life and I have to put my foot down, so every day is learning."* According to Pathways

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(2013) the first section in *Renewing Life* outlines life lessons; one of them is live in the here and now. Living in the here and now can mean different things to different people, for these *Renewing Life* participants it is translated into the behavior of voicing her opinion and her feelings to those in her life. This allows for the participant to have a stronger voice in the medical care she receives, the relationships she has, and activities she partakes in.

Increased confidence was a consistent topic throughout the focus group. Henriksson, Arestedt, Benzeing, Ternstedt, and Andershed, (2013) found that when involving patients in the management of their care they will be more likely to comply with orders. By helping patients feel more empowered and self confident they will be more prepared to discuss the management of their care with their medical team. This is evident for focus group participants in regards to developing more self confidence. The focus group members came to a consensus that the increase in their self-confidence was helpful in their daily lives. *“You know every day is a bonus and if I don’t want to take that stupid ass pill that makes me sick to my stomach I do not have too.”* This example illustrates a participant’s confidence and self determination regarding her care and quality of life. *“After Renewing Life, I came to a decision that this was the second life-threatening thing that had happened in 10 years so hey I’m going for it, I am going to get a horse. My husband noticed that when I came home from taking care of the horse, riding the horse, that I am happy.”* This was a unique example of a tangible life changing event that a participant initiated after *Renewing Life*, it is also an example of living one’s life in the here and now. *“I have more confidence and what have I got to lose you know. I am valuable. In the past I have had history with my mother, Renewing Life has helped me change so I could meet her and be able to have a more nourishing relationship.”* According to Pathways (2013) session three of *Renewing Life* encompasses nourishing relationships; it calls on participants to create a circle of

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support in their life where they are best able to thrive. By increasing the self-worth and self-confidence, participants are better able to cope with relationships that were more challenging in the past. *“Then I was like what’s wrong with you girl, you love yourself, they asked and offered, you better go get it, so I called them right back and they drove right to me and I loved it. I had to think of the program right away, Renewing Life, yeah I am renewing my life.”* This is another example of how participants gained the confidence to allow for nourishing relationships into their life.

Participants continued to share and agree about how Renewing Life helped increase their confidence. *“I learned affirmations in Renewing Life. They help build the confidence, it started me on the path of, you know, being more confident, my affirmation was I can do this.”* This quote illustrates the significance of affirmations for this participant and how it impacted her self-confidence.

Participants explained the benefits of increased confidence, *“It has forced me to speak out, you know we do need to speak out. That man (oncologist) needs to think and I appreciate he may be a great oncologist but he needs to work on his humanitarian side.”* Participants were better prepared to speak with doctors about their needs when it came to their care. They also had a chance to validate each other’s experiences with health care providers during Renewing Life; this increased their confidence, allowed them to express their feelings about health care providers, and prepared them for future conversations with health care providers. *“When I started radiation therapy, people gave me cues on what to do and what would help. When I was going on the tamoxifen it was like, okay my main thing is my depression. If the tamoxifen is going to screw up my life, make me more depressed. That is not what I am going to do. I felt like I could say that the doctors.”*

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A special part of Renewing Life occurs at the end, the facilitators ask the participants to write a letter to themselves. A letter about what they wanted to remember and take with them from Renewing Life. The facilitator's then sent the letter to the participants some time after the program ends. The facilitators inform the participants that the letter will come at a time they need it most. The focus group members all agreed that the letter exercise was incredibly powerful. For this participant their experience is illustrated here: *“My letter told me how much I was a loveable person and I needed it to take care of myself and quit doing everything for everybody else. I was like yeah! All of a sudden I turned on music and started dancing.*

The literature suggests that identifying and working with all areas of an individual's life can lead to healing. According to Sered and Agigan (2008) the idea that the mind and body are connected and mental states can contribute to healing, complementary approaches such as Renewing Life addresses healing from all stand points in one's life, health are not just managing symptoms but a long term goal to be reached through the effort. Addressing how one feels about themselves and increasing the self-esteem, self worth, and confidence is a component of treating the whole person. Focus group participants indicated that increasing their self-worth and self-confidence was crucial in how Renewing Life changed their perspective on their life.

Connectedness and Community

A holistic perspective calls for all needs of the human being to be met; one important need is for social and emotional support (Sered & Agigan, 2008). Women's roles are ever evolving but connection, community, and support are key aspects that women continue to need (Sered and Agigan, 2008). *“I believe we are all connected and meant to be part of the sorority. Even a month after this incredible three day experience I felt so rich and intense.”*

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An important theme that would continually come up was the group or connection the focus group participants felt. One exceptional experience for them was that they all carried the same diagnosis, were around the same age, shared the same gender, and came from the same income bracket. These similarities allowed for a strong sense of community for the focus group members. It was expressed by focus group members that this feeling of connectedness took away feelings of isolation, loneliness, and being broken. Being part of the group allowed for participants to feel more freedom to express their true self. *“Anytime she would talk about her feelings, I felt them. If she would cry, I would cry, we felt connected and there were two other people in my group that I had a spiritual connection with, it was powerful. I can’t even find that at church.”*

After Renewing Life was over the focus group participants expressed that this connection they felt was an incredibly important part of how Renewing Life impacted their day to day thinking and activities. *“I was thinking about her last week and then the other girl I came to the group with was asking about her. This connectedness it causes me to think about the other women, like how are they doing, what they are doing, I am not in this alone.”* The focus group participants indicated that this was a powerful component to the program’s effectiveness. Isolation was a destructive feeling and when those were exchanged for connectedness the participants felt stronger mentally and emotionally. *“I feel connected to the women, even though I haven’t kept in contact with everyone, I still know they are out there and I don’t feel like it is just me doing this strange unique thing.”*

Rokach (2003) thought when people go through a major life threatening illness their behaviors change, as a result, the expectation their friends and family have of them also change. Renewing Life allows for individuals to connect with people experiencing a similar health

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management issue to feel supported. This can relieve some of the stress that their other relationships are under. By adding the additional support of Renewing Life the participants felt more self love and fulfillment. *“Renewing Life has this whole connection and spirit to it, there is something unique about how it occurs and I think a lot has to do with the loving yourself. You begin Renewing Life by loving yourself.”* Renewing life coaches participants to be aware of the self messages they are having in their mind. It is taught that thoughts turn into action, we live from what we tell ourselves, and therefore if one is experiencing negative thoughts about themselves they must try to stop (Pathways, 2013). In the beginning of Renewing Life participants are challenged to think about the self messages they are experiencing, if their self messages negative such as “there is no choice. I’m stuck.” I’m afraid”, “Life is hard and change is impossible.” Participants are asked to stop that train of thought with a mental stop sign (Pathways, 2013). Negative self messages such as these are termed life-draining (Pathways, 2013). Facilitators encourage participants to be aware of their self messages and practice positive self messages that are termed life-affirming. Positive self-messages may be “I’m glad I’m alive” or “I have much to be thankful for in my life”. Pathways (2013) believe that by listening to life-draining messages one may stay rooted in the past. One’s moods, thoughts, feelings, actions, and even health change when self-messages are changed to be more positive (Pathways, 2013). The focus group participants felt that coming from a positive frame of mind about was helpful in maintaining their happiness on a day to day basis. Focus group members found it easier to experience positive self talk through the connectedness they felt with each other. *“Renewing Life helped me think about what I really wanted. It helped me look at myself and say wait a minute this is not the person you really are. You are a person that loves yourself and that was me*

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throughout this whole group. It would hit me just love yourself first then go out there and swear you don't have to prove nothing to nobody."

Participating in Renewing Life allowed the focus group members to not feel singled out. Participants' agreed that their joint experience with a breast cancer diagnosis and being a part of Renewing Life made them feel part of a group, where they had been singled out before, as "the sick person". *"You feel defective, but being with all these other women you realize that we are all just dealing with it. You may have to work to be well. You may not necessarily be cured but you can be well and still live and enjoy life."*

The theme of community and connectedness left the focus group participants feeling empowered. *"I still feel the power that working with a group of women. Where it was said don't be afraid of a recurrence so much that you give up your present. Everyday is...I am too tired and I can't, and you know the quality of life of each day is very important to against this. Thinking about the other group members enabled the focus participants to feel connected. "The week after the retreat I still had all kinds of energy from the group and I looked back at my Renewing Life manual and think, yeah this is really energizing. I remembered I am not by myself."*

During the end portion of Renewing Life participants are asked to share their life wishes with each other. A 3-month, 6 month, 12 month, 5 year, and 10 year wish are all said aloud to the group. This can be powerful and challenging for members, thinking about life ten years from now is difficult when experiencing a life-threatening illness. However, Renewing life calls for participants to visualize completing their wishes and how they would feel when doing them (Pathways, 2013). Pathways believe that by making life wishes one's doubt is replaced with hope (Pathways, 2013). Hope is essential to the life experience that Renewing Life participants are seeking, inspiring hope in the participants allows them to practice the Renewing Life program

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with conviction. It also allows participants to feel positive about the future and connected to their peers. In addition to the life wishes Renewing Life facilitators ask participants to write a letter to themselves that will be mailed to them. *“Everyone is connected and that is how I feel about this group. Evidence is in the letter, the letter you write and receive at the end of Renewing Life. You are told you will receive it at a time that you most need it. I’m going to tell you it did come at a time when I needed it very clearly; I needed it on that date. It was actually the day I had to put my dog to sleep. I got the letter in the mail and I am like oh my gosh, this is part of the universe, or my higher power, or whatever you want to call it. It was unexplainable.”* Inspiring hope enables participants to feel positive about their situation, and therefore may be more satisfied with their life. Feeling connected to the group allows for hope to endure when participants encounter times when life is particularly challenging.

“I have participated in both the nine week course and the weekend retreat versions of Renewing life. The group that launched me more forward was the breast cancer survivors because we all were in the same boat and it’s like when you get breast cancer your launched into this sorority that you never wanted to be in and we never asked to be in. We have the same experience as each other and I think there is something to be said to be in a group with others like that.”

Hope, forgiveness, and self-love are aspects of being connected that Renewing Life participants experienced from going through the retreat. These feelings continued into their life after the program was completed. The feeling of connectedness helped participants feel energized and not isolated, it was indicated by focus group member that this was an aspect that was new in the their life after the program was over.

Finding Peace and Letting Go of Fear

The third theme that stood out during the focus group session was finding peace and letting go of fear. This was an important concept to many focus group members; it was felt among the group that Renewing Life allowed for a more peaceful existence. In order to have peace one must let go of the fear they face, this occurred for focus group members in some form. It seemed that finding a sense of peace was a goal to attain too, this was expressed by several focus group members. *“I feel this calmness and that comes from accepting myself growing through Renewing Life”* Stated by a focus group participant. *“I think for me the word would be a more peaceful life a more accepting life.”* said another participant. There is a lot to fear when managing a breast cancer diagnosis. Focus group members indicated that Renewing Life helped validate and minimize their fear first and then taught participants how to let go of their fear. Participants found this helpful. *“The loss of fear of recurrence because I was absolutely terrified every time I went for the checkups but being there and being with women who were stage IV or who had had their second or third recurrence after ten years and realizing that is not the end. It’s obviously a shitty thing but it’s not the end. It continues in spite of all that. That totally changed my life; just not being afraid all the time. At every little pain I was thinking I was thinking this is a recurrence. I am going to die. But getting rid of that fear has just been the biggest thing. That happened at the retreat.”*

According to Pathways (2013) session five of Renewing Life discusses expressing feelings. This session starts by addressing fear, Renewing Life asks participants to not allow fear to stop one from truly living (Pathways, 2013). Renewing Life reassures participants that living with a serious or life threatening illness is terrifying and fear can take on many forms in one’s life (Pathways, 2013). Renewing Life coaches participants to distinguish between fears that are

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real versus fears that are imagined (insecurities, heights, change, abandonment) (Pathways, 2013). Renewing Life calls for participants to use their energy, their thoughts, and time toward healing rather than ruminating on their fears of the unknown, it is believed that perseverating on fears ruins the present (Pathways, 2013). Focus group participants indicated that this was impactful in their lives after completing Renewing Life. *“I have a cancer diagnosis and I also have depression. The Renewing Life helped me a lot in the depression part of it. That I wasn’t alone that it wasn’t unique other people had been there. There may be a recurrence but you don’t necessarily have to be fearful of it. It really reduced a lot of the fear for me.”*

A powerful component of Renewing Life is teaching participants to free themselves of their fears. There are specific techniques that are practiced in the sessions that enable the participants to use in their daily life. Along with these techniques the action of acceptance is also practiced (Pathways, 2013). Renewing Life coach’s participants to examine their life experiences that they are rejecting, participants are coached to feel uncomfortable emotions and lean into them. One may ask oneself the origins of their feelings. What does this feeling mean? Once one learns understands where their feelings one can accept it, then reframe it to something useful and thus experience acceptance (Pathways, 2013). Acceptance enables a less judgment toward oneself and a more peaceful existence; therefore one may have more energy to dedicate to healing (Pathways, 2013). *“I find myself more and more going, it is going to be okay everything falls into place. I do not need to worry if it has to be this way or that”* Stated one focus group participant. *“Allowing and letting go of fear, because fear is a lot like worry. Worrying it is a lot like a rocking chair it will give you something to do but you do not go anywhere. I stop and think what am I afraid of what is the worst that is going to happen.”* Stated another participant

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Letting go of fear and feeling more peaceful was a strong theme throughout the focus group. Members agreed that being able to not be fearful of their life going forward was an impactful reason why the program improved their life. *“I love the connection and the peacefulness that Renewing Life brought to me. Having peace and knowing what will be will be is how this program impacted my life.”*

Increased confidence, connectedness, letting go of fear and finding peace were the three major themes established during the focus group. A consensus among group members indicated that these three aspects were most impactful and life changing for them after the program.

Survey Findings

The survey data shed light on important aspects about how participants felt before and after Renewing Life. Demographic information was also collected and analyzed. Sixteen participants completed the survey from the June and August Renewing Life Retreat. The data collected from the self-assessment of change tool on the survey was analyzed for patterns in order to explain the impact Renewing Life had on participants. Since participants marked a continuum for their answers the continuum was split exactly in half. The right side of the continuum represented a score of two while the left side of the continuum was coded as a score of one. A chi-square analysis allowed for a cross categorical analysis. The results revealed that participants improved toward the positive end (right side) of the continuum after completed Renewing Life.

Eleven women completed the survey. There was one participant between 20-40 years old, eight participants between the ages of 41-60 years old, and seven participants between 61-75

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years old. Marital status information was collected and it was found that 12% of the participants were single, 56% of the participants were married, 18% were widowed, 6% of the participants were divorced, and 6% were separated.

In order to receive surveys at Pathways, people must participate in an orientation. Pathways then register their information and provide them with class schedules, event calendars, and reminds. The survey asked takers if they were a register Pathways member, 50% of respondents stated they were a registered Pathways member while 50% stated they were not.

Education demographics of the participants were collected, 56% of the women reported having some college, 18% reported having graduated college, and 6% reported having an advanced degree. Twenty-five percent of respondents stated they were self-employed, Twenty-five percent stated they were employed part-time, 12% reported being unemployed, 12% reported being on disability, 12% reported being retired, and 6% of respondents were on a health related leave. There were no respondent who were employed full time or were a student. In addition to education and employment, ethnicity demographics were collected. Eighty-seven percent of respondents were Caucasian while 6% were Latino, and 6% were African-American.

Table 1: Survey Demographics

In the sample women who attained some college, technical certificate, or college degree moved from the blaming end of the continuum toward the forgiving end of the continuum after completing Renewing Life. This accounted for 72% of participants. On the blaming and forgiving continuum 18% of participants did not answer and 6% stayed on the blaming end of the continuum after Renewing Life. This shows that participants with slightly more education than a high school diploma felt more forgiving after Renewing Life. Additionally, it reveals that almost three fourths (72%) of the survey participants felt more forgiving after taking Renewing

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Life. Forgiveness is an important component of Renewing Life; session six discusses how forgiveness allows for a release of emotional wounds. By forgiving the hurt others or situations have caused individuals can feel more positive emotions.

This sample of survey participants also provided insight on how their feelings of connectedness and isolation were rated after completion of Renewing Life. Of the samples married participants 57% moved toward the connected end of the spectrum after Renewing Life and away from the isolated end of the continuum. Out of the participants who were widowed 66% felt more connected after Renewing Life than they had prior to the Renewing Life program. The survey data revealed that 81% of participants felt more connected and less isolated after completing Renewing Life. Therefore participants who were widowed gained a stronger sense of connectedness after Renewing Life than they had before participating in the program.

There was a significant association between participating in Renewing Life and feeling more empowered than overwhelmed upon completion of the program. Therefore Renewing Life allowed participants to cope with their overwhelming feeling of dealing with a breast cancer and helped them adapt toward being more empowered. This speaks to the confidence that participants gain from Renewing Life.

Discussion

Facilitating this focus group was a profound and special experience. The participants were dedicated to the topic and clearly demonstrated a passion for Pathways and Renewing Life. The discussion flowed throughout the session. Some participants shared detailed information about their experience while others kept their input brief. Everyone participated during the 90 minute session. There was a break after forty-five minutes. The participants appeared comfortable and friendly with each other. The group sat in a circle facing each other. A common

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topic that consistently came up, was the agreement that the commonality of a diagnosis of breast cancer was a powerful component to why the Renewing Life experience was effective.

Additionally, participants expressed interest in an annual reunion. This would encourage a stronger community atmosphere among participants. Love and belonging are a basic human needs (Maslow, 1943) this need was illustrated in the participant's satisfaction in the relationships they developed with other participants.

A concurrent theme among focus group participants was a feeling of belonging. The combination of the curriculum material of Renewing Life, and the connection between members was an important experience of the focus group members. It was expressed that this connection invigorated the members with energy. With connection and increased belonging, participants become more comfortable with each and were more willing to fully involve themselves in the program. With a group think environment, the curriculum of Renewing Life truly soars. When every group member believes in participating with the material, insecurities fade away and vulnerabilities are revealed. Participants feel safe in completing the exercises, meditations, and topics in the curriculum. The first part of the curriculum works with the participant's feeling of self-love. This inspires self-esteem and confidence. Confidence was a consistent theme discussed among focus group participants. It was indicated by participants, that confidence was an important characteristic gained from Renewing Life. The increase in confidence was felt by all focus group participants after Renewing Life commenced, this was impactful and a valid outcome from being part of the program. It was indicated that increased self-confidence enabled participants to make health care choices based on what was best for their needs, this was influential in that, participants felt empowered to speak up for what they needed and thought was right. It also rang true for the relationships participants had. With increased self-confidence

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participants were able to ask loved ones for help, and receive help they would not have requested before. Self-worthiness also increased, and participants found themselves believing their needs and wants were important. Participants were better able to achieve life dreams. One participant set out to visit every state, while another participant purchased a horse.

Along with self-confidence and connectedness Renewing Life participants experienced letting go of fears they had about their lives. There is immense fear that accompanies and breast cancer diagnosis. Participants were able to validate each other's fear thus making their fear more manageable and increasing the peace in their lives.

Implications for social work practice

Social workers can gain insight from the information gathered from this study. There are several implications that could enhance social work practice when working with individuals with life threatening and chronic illness. Hospital social workers must initially attempt to provide, patients with life threatening and chronic illnesses, information about their diagnosis. Often during doctor visits there are questions about the diagnosis that go unanswered, a patient may not think of all the questions they want to ask or a doctor may not take the time to thoroughly answer patient questions. Patients want as much information about their diagnosis as possible; social workers can provide patients with resources about their diagnosis. Social workers should also provide their clients with information about complementary approaches to use while managing a life threatening illness. Social workers should provide their clients with life threatening or chronic illness with information about Pathways and the Renewing Life Program.

An additional implication for practice involves using the Renewing Life program throughout the Twin Cities at different entities that serve those with life threatening or chronic

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illness. Additionally, a Renewing life refresher course could be held for current participants annually. This could be a reunion for the participants, by meeting together and going through a shortened curriculum could be impactful for participants.

Pathway's Renewing Life program could also be utilized by other health care entities. Increasing the uses of the Renewing Life program could increase opportunities for facilitators to lead the groups in different settings. Facilitators could be interchangeable and possibly employed. This could create more of an opportunity to hold diagnosis specific Renewing Life groups around the Twin Cities. This type of resource offered readily around the Twin Cities would increase awareness for holistic treatment in health care. The medical community is advancing in its understanding of holistic treatment for patients. Social workers can work to increase the culture of holistic healing in all health care facets. Our bodies and minds are connected and when we experience traumatic health care issues such as a life threatening illness it is important to treat one's mental and emotional health as well as their physical health.

In addition another implication for practice could entail Renewing Life being offered to different groups of people. Many people could benefit from the outcomes that Renewing Life brings, it would be especially beneficial for diabetics, people with eating disorders, women with post-partum depression, individuals with major depression disorder, individuals experiencing the loss of a close loved one, and people experiencing divorce. For these populations of people the curriculum of Renewing Life could be slightly tweaked to meet their specific needs. Social workers who serve these populations could refer their clients to Renewing Life. Also social workers could offer and facilitate Renewing Life to these populations of people. Renewing Life is a great resource for people experiencing physical health crisis or a manageable mental health crisis. Renewing Life helps heal people emotionally so they are better able to heal their bodies

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physically. Social workers can use this resource for their clients that are willing to participate; the curriculum is motivating forces that lifts clients up and enables them start the process of a healthier life.

Implications for policy

While social workers can utilize information from this study to inform their practice it can also be used to develop policy. When individuals cope with a life threatening or chronic illness the cost of medical care can be astronomical. Some individuals may be privileged enough to have health insurance but often complementary approaches are not covered. Luckily, Renewing Life is offered free through Pathways Health Crisis Resource Center and therefore patients can take full advantage of it. Along with Renewing Life there are many other helpful complementary approaches that individuals can use and some are costly. On a policy level social workers could advocate for health insurance providers to provide coverage for some portion of complementary therapies.

An even more crucial policy change that social workers can work toward is for county, state, or federal funding for institutions like Pathways Health Crisis Resource Center. Social workers can also advocate for organizations like Pathways by recruiting donors and building its reputation. By utilizing services at facilities such as Pathways individuals minimize hospital stays and expensive emergency medical services. People that utilize Pathways health crisis resource center are receiving free services they would have to either forego or pay for somewhere else. In some capacity these services are helpful to individuals and may decrease the cost of medical care. Complementary approaches need more evidence to prove their worth but social workers can continue to support crucial services such as Pathways Health Crisis Resource center to ensure that there is some entity treating people on a holistic level. By maintaining

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conventional medical culture where a disease, pathology, or diagnosis is treated rather than the person we continue to uphold a disservice to people who need care. Understanding medical care from a holistic lens is a step in the direction of changes our medical system. Conventional medicine is incredibly important and has led to incredible development in health care, but it needs to evolve. We need to embrace the idea that people are individuals and have a mind, body, and spirit, if we are working toward a goal of treating or healing from a diagnosis we must care for the entire person to ensure the best results.

Implications for research

In order to have a strong evidence base for complementary approaches and their effectiveness on the health of individuals with life-threatening and chronic illness more research needs to be conducted on the outcomes. Research for complementary approaches to healing must find a consistent and valid measurement to prove that complementary programs like Renewing Life work for the participants. Research must focus on the amount of hospital visits and the medical cost for individuals who do not participate in complementary approaches and compare that data to those who did participate in complementary approaches. If data showed that utilizing complementary approaches alongside conventional medical treatment reduced the cost of care for the patient and provider, much support would be gained for holistic medical care and complementary approaches. If strong evidence supporting programs like Renewing Life and other complementary approaches reduce medical costs; an immense shift toward adding holistic healing to standard conventional medical care may be the upcoming trend. This could make many people's health care experience more positive on all levels and even reduce the cost of health care.

Strengths and Limitations

One limitation of this study involved the directions for the Self-Assessment of Change on the survey. On the top of the page for the Self-Assessment of Change it directed participants to “reflect on the meaningful life changes that you may have experienced since you began participating in Pathways’ services. Use what you know about yourself at this point in time to respond to the word pairs” Pathways (2013), these surveys were sent to participants who attend the Renewing Life retreats. The survey should have read “reflect on the meaningful life changes that you may have experienced since you participated in Renewing Life” This limitation was crucial because potentially all survey takers answered the self-assessment of change from the viewpoint of their experience at Pathways. However, this research sought to examine their specific experience of Renewing Life. Potentially, survey takers could have answered the Self-Assessment of Change considering Pathways rather than Renewing Life; this aspect could mean that the data gathered is not representative of Renewing Life.

Also some Renewing Life retreat participants were not members at Pathways nor had ever been to Pathways so the self assessment of change was not answered by them or the directions were not clear to them and they answered the self assessment of change based on their experience in Renewing Life. Additionally, the survey asked participants to rate the point they were at on a scale. This scale did not have marks to rates specifically where they fell, therefore in order to quantify the data the scale had to be split in half and the answers to the right of the middle received a score of two while the answers to the left of the middle received a score of one. This limits a true representation of the meaning of the word pair in the participants’ life. The survey also provided a likeart style scale for participants to rate the importance of each section of

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Renewing Life. This data was not used in this research and could have distracted participants from truly understanding the self-assessment of change which is a limitation.

Though the survey portion of this study had its limitations it also had strengths. The lack of numbers on the continuum of the self-assessment may have allowed participants to feel more open with their answers. The survey also gathered important and interesting demographic data about the participants that was applicable to the focus group participants. This helped in keeping the focus group participants anonymous.

The focus group section of this study also had strengths and weaknesses. There were nine individuals that attended the focus group; there may have been more insight and more raw data to collect had there been more participants. Also one of the nine participants came to the focus group forty-five minutes late and was only able to provide input for the last forty-five minutes. There was only one session of the focus group held; supplementary focus group sessions may have been helpful. Another limitation of the focus group was that only Renewing Life retreat participants were invited to attend. This limited the insight about the Renewing Life program. It may have been valuable to hear from other Renewing Life participants who part took in the nine week course. The focus group was also facilitated by one researcher; an extra research assistant to take copious notes would have strengthened the collection of raw data.

Lastly, a limitation of the study was the lack of literature on the subject of complementary approaches. The language for complementary services has evolved from alternative medicine to complementary treatments, services, and approaches. This cultural shift has created some confusion in the literature; various researchers are not consistent with how they identify the complementary approach. Also there is minimal evidence of the effectiveness of specific complementary approaches like Renewing Life. There are many different and dynamic

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approaches in complementary care that it was difficult to find literature to support the hypothesis.

Conclusion

Holistic health care is an effective and encompassing approach to caring for a person who is needs medical treatment. Treating an individual's biological functioning is the first priority when seeking medical care; this is an important aspect to note. However, managing a life threatening or chronic illness calls for a more inclusive approach to healing. A human being is not only a body but also a being with a mind and emotions. Considering the biological, psychological, social aspects of a human being will allow for a health care approach that factors in every part of a person. With increased mindfulness individuals are better able to manage their diagnosis and mental health. As evidence grows to support the valuable use of a holistic approach to health care more people will seek utilize this health care methods.

Complementary approaches are aligned with holistic health care and embody what it would mean to treat a person holistically. Renewing Life is an example of a multi-dimensional approach to wellness. It is a valuable program that could benefit many people. This research found that the program had proven outcomes that benefitted the quality of life of its participants. Social workers can facilitate the Renewing Life program and refer clients to use it. It could be utilized with many different populations. Pathways could benefit by enabling other health care service providers to use the Renewing Life program. Lastly, our health care industry could benefit from embracing a holistic view of health care and utilize complementary approaches.

Appendix A



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To Whom It May Concern:-

I am aware that Linnea Gene Borer is conducting a research study. This research has affiliation with Pathways Health Crisis Resource Center. This study focuses on the impact of the Renewing life program on participants' perceptions of the benefits of the program. Ms. Borer and I have discussed the details of this research project.

I give her permission to conduct her study with our agency. The data will be de-identified by Ms. Borer to ensure the participants protection and confidentiality. Pathways requests identifiers of the clients are kept completely confidential in all aspects of this research.

Sincerely,

A handwritten signature in black ink, appearing to read "Tim Thorpe".

Tim Thorpe, Executive Director

Appendix B. Letter of Informed Consent
INFORMATION AND CONSENT FORM

Dear Renewing Life Participant,

You are invited to contribute to a research study which examines the outcomes of Renewing Life from the perspective of those who have participated in it. This study is being conducted by Linnea Borer, a graduate student at Saint Catherine University and the University of Saint Thomas, under the supervision of Pa Der Vang, Ph.D., a faculty member in the School of Social Work. You were selected as a possible participant in this research because you have attended the Renewing Life retreat through Pathways Health Crisis Resource Center. Please read this letter and ask any questions before you agree to be in the study.

The purpose of this study is to investigate the outcomes and impacts the Renewing Life program has on participants from their point of view. This investigation will take place in the form of a focus group. Approximately 9-12 people are expected to participate in this focus group.

Procedure:

If you decide to participate, you will be asked to join us at Pathways Health Crisis Resource Center for a focus group meeting. The investigation will consist of reviewing and signing this informed consent form, followed by a focus group discussion facilitated by this researcher. The Renewing Life Program and your experience with it will be the topic of the discussion. The focus group is expected to last approximately 60 minutes. The total time of this study will take approximately 60 minutes, in one focus group session.

The focus group session will take place March 8th at 12:30 P.M. to 2:00 P.M. at Pathways. If you choose to participate please contact me, at 612-759-4995.

Risks and Benefits:

The study has minimal risks. However, due to the nature of the subject matter, you may be at risk for psychological stress following the discussion.

There are no direct benefits to you for participating in this research. Snacks will be provided during the discussion. This research will be utilized by Pathways Health Crisis Resource Center. This investigation will offer Pathways Health Crisis Resource Center unique insight in the Renewing Life Program.

In the event that this research activity results in an injury such as psychological stress, I will assist you with linkage to a therapist in the community to help you process the stress associated with this study. Any medical care for research-related injuries should be paid by you or your insurance company. If you think you have suffered a research-related injury, please let me know right away.

Confidentiality:

Upon completion of this discussion the information will be transcribed and identify information about you will be changed. However, other focus group members will also hear the information and there is a risk they may repeat it. Please keep this in mind. Any information obtained in connection with this research study that can be identified with you will be disclosed only with your permission; your results will be kept confidential by this researcher. In any written reports or publications, no one will be identified or identifiable and only group data will be presented.

I will keep the research results secured in a password protected computer in (state where) and only I and my advisor will have access to the records while I work on this project. I will finish analyzing the data by May 20, 2014. I will then destroy all original reports and identifiable information that can be linked back to you. The audio recording of our focus group discussion will be stored on my password protected phone and computer, and deleted on or before May 20, 2014.

Voluntary nature of the study:

Participation in this research study is voluntary. Your decision whether or not to participate will not affect your future relations with Saint Catherine University or the University of Saint Thomas in any way. If you decide to participate, you are free to stop at any time without affecting these relationships.

Contacts and questions:

If you have any questions, please feel free to contact me, Linnea Borer, at 612-759-4995 or ande2387@stthomas.edu. You may ask questions now, or if you have any additional questions later, the faculty advisor, Pa Der Vang, at (651) 690-8647 or pdvang@stkate.edu, will be happy to answer them. If you have other questions or concerns regarding the study and would like to talk to someone other than the researcher(s), you may also contact the chair of the St. Catherine University Institutional Review Board, Dr. John Schmitt, at (651) 690-7739.

You may keep a copy of this form for your records.

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Statement of Consent:

You are making a decision whether or not to participate. Your signature indicates that you have read this information and your questions have been answered. Even after signing this form, please know that you may withdraw from the study at any time.

I consent to participate in the study and have my responses audio recorded.

Signature of Participant

Date

Signature of Researcher

Date

Appendix C.

Dear Renewing Life Participant,

Within the last year you joined us for the Renewing Life weekend retreat. We would like to hear what you thought about it. We invite you to join us for a focus group, where we will talk about the experience of Renewing Life. Your feedback is incredibly valuable and will help support Pathway's and the services we provide. This focus group will contribute to research that is led by Pathway's, and conducted by a graduate student in the University of St.Thomas/St.Catherine's school of Social Work. The input we will gain from the focus group will help us to better understand Renewing Life and allow us to continue to offer this quality service.

This focus group will be a fun and unique experience. Your participation in this focus group is greatly appreciated. It will be held at Pathways Health Crisis Resource Center on Saturday, March 8th from 12:30 P.M. to 2 P.M. The focus group will be led by Linnea Borer, the graduate research student. Ms. Borer will facilitate the focus group by asking for your opinions and experiences after the Renewing Life retreat.

A Pathway's representative will contact you to confirm your participation and answer any questions you may have. Participation in the focus group is optional. An informed consent will be reviewed and signed before the focus group begins.

If you have any questions or concerns regarding this letter, or the focus group and would like to speak with someone other than the researchers please contact Tim Thorpe, Executive Director at 612-822-9061.

Thank you so much for your time and attention. We look forward to talking to you.

Appendix D: Example Survey

Perceptions of Change: A Survey of Pathways Renewing Life™ Participants

Because you have participated in the Renewing Life™ retreat provided by Pathway Health Crisis Reso Center and funded by a Susan G. Komen Grant, we invite you to share your thoughts and feelings about experience. This survey was designed to provide the kind of information that Pathways feels would be helpful to its mission and work as well as provide the Susan G. Komen Foundation an evaluation of outcomes of their generous grant. Your thoughtful and candid responses are greatly appreciated.

General Information

- 1. How did you learn about the Renewing Life program offer? (Circle as many as apply)
 - a. Physician
 - b. RN
 - c. Psychologist/Counselor/Coach
 - d. Another health care provider
 - e. Friend
 - f. Family member
 - g. Media (newspaper article, TV, radio)
 - h. Pathways brochure
 - i. Just stopping in
 - j. Other (please specify): _____
- 2. What was the date and year of your breast cancer diagnosis? _____
- 3. Which retreat did you attend?
 - a. June, 2013
 - b. August, 2013
 - c. January, 2014

- 4. Are you currently a participant at Pathways? Yes No I would like to receive the calendar

Demographics and Background

- 5. Age
 - a. Under 20
 - b. 20-40
 - c. 41-60
 - d. 61-75
 - e. Over 75
- 6. Current Marital Status (Circle one)
 - a. Single
 - b. Married
 - c. Widowed
 - d. Divorced
 - e. Separated
 - f. Partnered, not married
- 7. Education (Circle the highest level)
 - a. High school graduate/GED
 - b. Some college/post high school training
 - c. Technical certification
 - d. College graduate
 - e. Advanced degree
 - f. Other: _____
- 8. Employment (Circle one)
 - a. Full-time
 - b. Self-employed
 - c. Part-time
 - d. Currently unemployed
 - e. Health-related leave
 - f. Student
 - g. On Disability
 - h. Other: _____
- 9. Ethnicity
Which of the following best represents your racial or ethnic heritage? Choose all that apply
 - Non-Hispanic White or Euro-American
 - Latino or Hispanic American
 - South Asian or Indian American
 - Native American or Alaskan Native
 - Black, Afro-Caribbean, or African American
 - East Asian or Asian American
 - Middle Eastern or Arab American
 - Other _____

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Self Assessment of Change

The word pairs that you find below ask you to reflect on meaningful life changes that you may have experienced since you began participating in Pathways' services. Use what you know about yourself at this point in time to respond to the word pairs.

Here's how to fill out the following statements:

1. Mark the line to show where you were before coming to Pathways and label it B.
2. Mark the line to show where you are now and label it N

Here are three examples of how to fill this out:

a. No Energy _____ **B (before)** _____ **N (now)** _____ Full of Energy

*I had almost no energy and I have more energy now

b. No Energy _____ **B**
N _____ Full of energy

*I had very little energy before and there's been no change

c. No Energy _____ **N** _____ **B** _____ Full of energy

*I've got some energy now, but I had more energy before

Please place a B (before Pathways) and an N (now) based on how you perceive your situation at this time.

12. Not sleeping well _____ Sleeping well

13. Exhausted _____ Energized

14. Dull senses _____ Vibrant senses

15. Scattered _____ Focused

16. Stuck _____ Letting go

17. Overwhelmed _____ Empowered

18. Hopeless _____ Hopeful

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Please place a B (before Pathways) and an N (now) based on how you perceive your situation at this time.

19. Blaming _____ Forgiving
20. Closed-hearted _____ Open-hearted
21. Isolated _____ Connected
22. Depressed _____ Joyful
23. Anxious _____ Calm
24. My body does not recover quickly _____ My body recovers quickly
25. Defined by my illness or problems _____ Not defined by my illness or problems
26. Broken _____ Whole
27. Unbalanced _____ Balanced

28 To what extent has your participation in Renewing Life influenced your healing process?

- a. Extremely b. very Much c. Somewhat *(b. A fair amount)* e. Not at all

Comments:

Appendix E: Focus Group Outline

Purpose statement: Hi everyone, please grab a snack and refreshment if you wish and join me in this circle.

Introduction:

Linnea Borer

Clinical social work student

Currently pursuing my MSW at St.Thomas/ St. Catherine's university

Pass out and read informed consent

-if anyone would like to ask me a question (step outside if wanting anonymity) let me know

Now that the informed consent has been discussed, I will be asking you a series of questions. What I am trying to learn is how you feel Renewing Life has impacted your life thus far? I am not investigating the program specifically; I want to know what this program did for you? Was it good, bad, indifferent? We are going to discuss this with the whole group and everyone is welcomed to provide their perspective or remain silent. Do you have any questions?

1. It has been some months since you were in the Renewing Life retreat; what tools or lessons did you take from Renewing Life that have changed how you live your life?
2. Have any of your relationships changed since participating in Renewing Life?
3. Have you experienced any shifts emotionally? If so, in what ways?
4. Did you take the survey that was sent out after Renewing Life?

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