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Letters to My Body: Narratives of Post-Traumatic Growth Among Female Breast Cancer Survivors in Laguna

Kenneth Chael A. Ferrer[1], Hazel Ann R. Quilay[1], Kim Joseph S. Aliguay[1]
[1]*University of Perpetual Help System DALTA Calamba Campus, Laguna, Philippines*

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Email of Author: kennethnatsu543@gmail.com

Abstract

This study examines post-traumatic growth (PTG) as a lived and narrated experience among Filipina breast cancer survivors in Laguna, Philippines, emphasizing its cultural, gendered, and body-centered dimensions. Anchored in post-traumatic growth theory and narrative identity perspectives, the study adopts a qualitative narrative research design to explore how survivors construct meaning from their illness experiences. Data were collected through semi-structured interviews with three purposively selected participants who had completed treatment and were in remission, and were analyzed using thematic narrative analysis. The findings reveal that PTG is shaped by interconnected resilience rooted in community support, spirituality, and cultural values. Survivors experienced a foundational shift in life perspective characterized by prioritizing relationships, accepting enduring physical changes, and engaging in advocacy. Their relationship with the body evolved from feelings of loss and betrayal to protective care and acceptance, while remaining accompanied by ongoing anxiety and vigilance. The five domains of PTG personal strength, new possibilities, relating to others, appreciation of life, and spiritual growth were consistently expressed across narratives. The study highlights the importance of culturally sensitive, narrative-based, and body-centered interventions, alongside community and family involvement, to support survivorship. It also emphasizes the need for long-term psychosocial care that acknowledges the coexistence of growth and vulnerability. This study aligns with SDG 3 (Good Health and Well-Being), SDG 5 (Gender Equality), and SDG 10 (Reduced Inequalities) by addressing mental health, gendered experiences, and representation in research. The findings contribute to sustainability by supporting culturally responsive healthcare practices, strengthening community-based support systems, and informing policies that promote inclusive and holistic survivorship care.

Keywords: Body Image, Breast Cancer Survivors, Cultural Resilience, Narrative Inquiry, Post-Traumatic Growth, Spirituality

1. Introduction

This study examines post-traumatic growth (PTG) as a lived and narrated experience among female breast cancer survivors in Laguna, Philippines. It reframes PTG not merely as an outcome measured through standardized tools but as a culturally situated, gendered, and body-centered process of meaning-making. By focusing on survivors' narratives, the study explores how trauma becomes a catalyst for reconstructing identity, relationships, and life philosophy within the Filipino sociocultural context.

1.1 Background of Post-Traumatic Growth Narratives among Filipina Breast Cancer Survivors in Laguna

Breast cancer survivors often experience profound psychological transformation, where trauma becomes both a source of suffering and a foundation for growth. PTG reflects positive psychological changes such as enhanced resilience, appreciation of life, and strengthened relationships following adversity (Tedeschi & Calhoun, as cited in Jayawickreme et al., 2021). Factors such as resilience, adaptive coping, and social support facilitate these changes (Nisiraiou et al., 2025). However, existing PTG research largely reflects Western perspectives, often relying on standardized measures that overlook culturally embedded and gendered experiences (Menger et al., 2021). In non-Western contexts like the Philippines, PTG narratives are shaped by communal values, femininity ideals, and culturally grounded resilience practices. Despite this, studies on Filipino breast cancer survivors remain limited, highlighting the need to explore PTG as a narrative process rooted in local culture (Zhai et al., 2021). This study focuses on Filipina survivors in Laguna, examining how they narrate PTG through personal stories that integrate bodily transformation, identity reconstruction, and sociocultural influences.

1.2 Themes and Insights from Related Literature on PTG, Cultural Meaning-Making, and Survivorship

PTG is widely recognized as a psychological transformation involving increased personal strength, improved relationships, and renewed life perspectives (Tedeschi & Calhoun, as cited in Jayawickreme et al., 2021). Research shows that resilience, meaning-making, and social support are key facilitators of PTG (Bovero et al., 2024; Slade et al., 2021; Zhang et al., 2024). Among breast cancer survivors, PTG commonly manifests in domains such as personal strength, appreciation of life, and

interpersonal relationships (Michalczyk et al., 2022; Thakur et al., 2022). These outcomes are influenced by coping strategies, psychological resilience, and time since treatment, while distress may inhibit growth (Liu et al., 2020). Narrative and cultural processes play a critical role in PTG. Survivors engage in storytelling, reflective meaning-making, and identity reconstruction to process trauma (Fiona et al., 2024; Martino et al., 2022; Elam et al., 2024). Expressive coping strategies, including writing and guided disclosure, further enhance emotional regulation and psychological recovery (Cafaro et al., 2024; Karademas et al., 2022; Wang and Li, 2022). In the Filipino context, cultural values such as spirituality, strong family ties, and pakikipagkapwa (shared identity) significantly shape coping and resilience. Survivors often interpret illness through faith and communal support, reframing cancer as a transformative experience (Ahmadi et al., 2024; Almocera, 2020; Lim et al., 2023). Local studies also highlight the role of psychological and spiritual well-being in improving quality of life (Quiquiles & Medez, 2022; Soriano & Calong, 2021). These insights underscore the importance of culturally grounded approaches in understanding PTG.

1.3 Local, National, and Global Context of PTG Research among Breast Cancer Survivors

Globally, PTG research has expanded across diverse populations, including survivors of illness, disasters, and crises (Zhang et al., 2024). International studies demonstrate consistent evidence of PTG among breast cancer survivors, linking it to improved quality of life and psychosocial adjustment (Liu et al., 2020). Regionally, studies in Asian contexts reveal culturally specific expressions of PTG, such as shifts in self-perception and philosophical outlook (Zhai et al., 2021). However, Southeast Asian and Philippine contexts remain underrepresented. Locally, while research on Filipino coping and resilience exists, there is limited empirical work specifically examining PTG among Filipina breast cancer survivors. Cultural practices such as spirituality, communal support, and family-centered care influence how individuals interpret illness and recovery (Almocera, 2020; Serrano and Reyes, 2022). This highlights the need for localized research that captures the unique sociocultural dimensions of survivorship.

1.4 Theoretical Basis of Post-Traumatic Growth and Narrative Identity in Breast Cancer Survivorship

PTG theory, introduced by Tedeschi and Calhoun, explains how individuals experience positive transformation following trauma, distinct from resilience, which focuses on recovery rather than transformation (Tedeschi & Calhoun, as cited in Huang et al., 2025). PTG is conceptualized across five domains: appreciation of life, relating to others, new possibilities, personal strength, and spiritual change (Tedeschi & Calhoun, as cited in Huang et al., 2025). These domains have been validated across contexts, reinforcing their relevance in understanding psychological growth (Jozefiaková et al., 2022). PTG coexists with distress, reflecting the complexity of trauma experiences (Tedeschi & Calhoun, as cited in Jayawickreme et al., 2021). Complementing PTG theory, narrative identity perspectives emphasize storytelling as a mechanism for reconstructing meaning and identity after trauma (Elam et al., 2024). This study integrates these frameworks to examine how Filipina survivors narratively construct growth through culturally embedded and embodied experiences.

1.5 Research Gaps and Rationale for Narrative Study of PTG among Filipina Survivors

Despite extensive global research, significant gaps remain in understanding PTG within the Philippine context. Existing studies often rely on quantitative measures that overlook narrative, cultural, and gendered dimensions of survivorship (Menger et al., 2021). There is limited research focusing on Filipina breast cancer survivors, particularly in exploring how cultural values, body image, and identity influence PTG. Additionally, few studies examine PTG as a narrative process rather than a measurable outcome. This study addresses these gaps by employing a narrative approach to explore how survivors in Laguna articulate their experiences of growth. It emphasizes culturally specific storytelling, embodied experiences, and the intersection of trauma and identity, providing a deeper and more contextualized understanding of PTG.

1.6 Alignment with Relevant Sustainable Development Goals (SDGs)

This study aligns with SDG 3 – Good Health and Well-Being by promoting mental health and psychosocial support for cancer survivors through understanding PTG. It contributes to SDG 5 – Gender Equality by examining gendered experiences of illness, body image, and identity among women. Additionally, it supports SDG 10 – Reduced Inequalities by addressing the underrepresentation of non-Western and Filipino perspectives in psychological research. By generating culturally sensitive insights into survivorship, the study contributes to improving inclusive healthcare practices and psychosocial interventions.

1.7 Importance of the Study to Multidisciplinary Sustainability

This research contributes to public health sustainability by informing holistic cancer care that integrates psychological and cultural dimensions. It advances socio-economic and community sustainability by strengthening support systems for survivors and their families. The study also supports cultural and educational sustainability by documenting localized narratives and promoting culturally responsive research frameworks. Furthermore, it contributes to policy and institutional sustainability by providing evidence for developing inclusive healthcare policies and survivor support programs. Through its narrative and culturally grounded approach, the study enhances multidisciplinary understanding of resilience, identity, and recovery, supporting sustainable and empathetic healthcare systems

2. Material and methods

2.1 Research Design

The study utilized a qualitative narrative research design to examine how Filipino female breast cancer survivors construct meaning from their lived experiences. Narrative inquiry was selected as it enables an in-depth understanding of how individuals interpret and give meaning to their stories, particularly in relation to the complexities of PTG (Riessman, as cited in Ghanbar et al., 2024). The design emphasized the role of body image, gender, and culture in shaping survivors' narratives. Through a qualitative framework, the study analyzed how participants described their embodied experiences of illness, recovery, and transformation. This approach aligns with contemporary qualitative research that highlights narrative reconstruction as central to identity formation and psychosocial adjustment among cancer survivors (Huang et al., 2025). The design allowed for an exploration of how sociocultural contexts influence meaning-making and resilience following traumatic health experiences.

2.2 Locale of the Study

The study was conducted in Laguna, Philippines, focusing on Filipina breast cancer survivors residing in the area. The locale provided a culturally specific context in which survivors' experiences are shaped by Filipino values, community practices, and gender norms. Conducting the study within this setting enabled the researchers to capture narratives grounded in local sociocultural realities, particularly those related to communal support systems and culturally embedded coping mechanisms.

2.3 Participants of the Study

The participants were Filipina breast cancer survivors residing in Laguna who had been in remission for at least six months. Selecting individuals who had completed active treatment ensured that participants had sufficient time and emotional distance to reflect on their experiences and articulate their narratives of growth. This approach is consistent with the theoretical perspective that PTG emerges through cognitive processing and meaning-making following trauma (Tedeschi et al., 1996, as cited in Menger et al., 2021). Existing literature also emphasizes the importance of post-recovery reflection in understanding psychosocial adjustment among survivors (Nilsen et al., 2021). The respondents were thus well-positioned to provide in-depth insights into their transformative experiences.

2.4 Sample and Sampling Procedure

The study employed purposive sampling to select participants who met specific inclusion criteria relevant to the research objectives. This method was appropriate as it allowed the deliberate selection of individuals who possess characteristics essential to the study, such as experiencing PTG and residing in Laguna (Ahmad and Wilkins, 2024). The sample consisted of three participants, consistent with narrative research principles that prioritize depth and richness of data over sample size. Narrative inquiry focuses on detailed, contextually grounded accounts rather than generalizability, making smaller samples appropriate for capturing complex meaning-making processes (Riessman, 2008 as cited in Ghanbar et al., 2024; Clandinin & Connelly, 2000, as cited in Finlay & dela Cruz, 2023). Purposive sampling also ensured that participants were information-rich cases, enabling a focused exploration of PTG experiences aligned with the study's objectives (Ahmad & Wilkins, 2024; Nyimbili & Nyimbili, 2024).

2.5 Research Instrument

Data were collected through semi-structured, open-ended interviews designed to elicit detailed personal narratives. The interview guide was developed based on the five domains of the Post-Traumatic Growth model: personal strength, new possibilities, relating to others, appreciation of life, and spiritual change (Tedeschi et al., as cited in Menger et al., 2021). The instrument included rapport-building questions, core interview questions aligned with PTG domains, and debriefing questions. The semi-structured format allowed flexibility, enabling participants to freely express their experiences while allowing researchers to probe deeper into relevant themes. This approach is supported by Adeoye-Olatunde and Olenik (2021), who highlight the effectiveness of semi-structured interviews in capturing rich and nuanced qualitative data. The instrument also incorporated a body-centered perspective, examining how PTG intersects with changes in body image, femininity, and social expectations. This allowed the study to capture both psychological and embodied dimensions of growth. Prior to data collection, the interview guide underwent content validation by the research adviser, who assessed its clarity, relevance, and alignment with the study's objectives. Feedback from this process guided revisions to ensure the instrument effectively captured the intended constructs.

2.6 Data Gathering Procedure

Data collection began with obtaining informed consent from participants, ensuring they were fully aware of the study's purpose, procedures, and their rights. A brief informal screening was conducted to confirm participants' experiences of PTG. Following participant selection through purposive sampling, in-depth semi-structured interviews were conducted in settings and schedules preferred by the participants to ensure comfort and openness. This approach facilitated the collection of rich, authentic narratives about their breast cancer journeys. After the interviews, the data were transcribed verbatim to

prepare for analysis. The researchers then conducted thematic narrative analysis to identify patterns in how participants expressed PTG across its five domains, with particular attention to cultural and gendered bodily experiences.

2.7 Data Analysis Techniques

The study employed thematic narrative analysis to examine the data systematically. Initially, interview transcripts were reviewed multiple times to achieve familiarity with the data. This was followed by line-by-line coding to identify explicit expressions of PTG aligned with the five domains and implicit themes related to embodied experiences and body image. Codes were then organized into broader themes through constant comparative analysis, examining how cultural narratives and bodily experiences influenced PTG expressions. These themes were refined through collaborative discussions among researchers and validation processes. Finally, a coherent narrative framework was developed to represent both shared patterns and unique individual experiences of PTG among the participants. This approach allowed for a comprehensive understanding of how survivors construct meaning and articulate transformation within their sociocultural context.

2.8 Ethical Considerations

The study adhered to the ethical standards set by the Philippine Psychological Association and the Data Privacy Act of 2012 (Republic Act No. 10173). Participants' confidentiality and privacy were strictly maintained, and personal data were securely handled. Informed consent was obtained from all participants, ensuring they understood their rights, including the option to withdraw at any time. Participation was voluntary, and measures were taken to ensure participants' well-being throughout the research process. Interviews were conducted with sensitivity, beginning with rapport-building questions and ending with debriefing. Participants were also given the option to pause or terminate the interview at any point, ensuring ethical and respectful engagement throughout the study.

3. Results and Discussion

3.1 Interconnected Resilience in Cultural and Social Contexts

3.1.1 Community as a Source of Strength and Purpose

The findings show that survivors consistently relied on family, friends, workplace, and community networks for emotional, spiritual, and practical support. Participants described strong support systems that sustained their coping, provided a sense of belonging, and even created opportunities for renewed purpose, including shared prayers, encouragement, and collective care. These results indicate that resilience is socially constructed and deeply embedded in communal relationships. This aligns with Huang et al. (2025), which emphasizes that PTG among breast cancer survivors is strengthened through social relationships and community-based healing. Emotional support and collective caregiving serve as foundational elements in psychological recovery, reinforcing the importance of relational resilience.

3.1.2 Deepened Faith and Spiritual Surrender

Participants reported a strengthened reliance on faith, describing a transition from questioning to acceptance and spiritual surrender. Their narratives reflected viewing illness as part of a divine plan, with prayer and spirituality serving as central coping mechanisms and sources of strength. This suggests that spiritual growth is a critical dimension of PTG. The findings are consistent with Dědová and Baník (2021), which identified strong associations between spirituality and post-traumatic growth. Survivors not only use faith for coping but also experience transformation through spiritual meaning-making, aligning with the PTG domain of spiritual change.

3.1.3 Redefining Strength through Cultural Norms

The data reveal that participants redefined strength not as silent endurance but as openness, positivity, and the ability to inspire others. Survivors expressed strength through sharing their experiences, helping others, and embracing vulnerability within their social contexts. This reflects a culturally grounded understanding of resilience that differs from individualistic perspectives. Franco & Magno (2023) support this interpretation, noting that women often conceptualize strength as relational and nurturing. The findings highlight that resilience among Filipina survivors is shaped by cultural values emphasizing caregiving, connection, and communal empowerment.

3.1.4 Redefining Cancer Beyond Fatalism

Participants described a shift from viewing cancer as a "death sentence" to understanding it as a survivable and manageable condition. Their narratives emphasized hope, second chances, and the possibility of continued life through support, faith, and personal strength. This transformation reflects cognitive reframing as a key mechanism of PTG. Kim et al. (2018) found that interpreting adversity in a hopeful and constructive way is essential in overcoming fatalistic beliefs and fostering growth. The findings demonstrate how survivors actively reconstruct meanings of illness to enable empowerment and future orientation.

3.2 Foundational Shift in Life Perspective as Long-Term Transformation

3.2.1 Reshaped Value System: Prioritizing Time and Relationships

Participants expressed a profound shift in priorities, placing greater importance on time, family, and meaningful relationships. They described cherishing everyday interactions and valuing emotional connections more deeply than before their diagnosis. This indicates a lasting transformation in life perspective rather than temporary adjustment. Perry (2023) emphasizes that strong family relationships contribute to well-being and life satisfaction. The findings confirm that PTG involves a reorientation toward relational and existential values.

3.2.2 Enduring Changes in Self-Perception and Capability

The results show that survivors experienced lasting physical and emotional changes, including reduced physical strength and limitations in daily activities. Participants acknowledged these changes while gradually adapting and accepting their altered capabilities. This reflects the embodied impact of cancer and its treatments. Wang and Nakshatri (2020) explain that breast cancer affects the entire body, leading to fatigue, pain, and functional limitations. The findings highlight how PTG coexists with physical constraints, requiring continuous adjustment and acceptance.

3.2.3 Shared Purpose and Advocacy

Participants demonstrated a strong desire to give back by helping others, raising awareness, and sharing their experiences. They found renewed purpose through advocacy, mentorship, and community engagement. This suggests that PTG extends beyond personal transformation to social contribution. Nasso et al. (2024) note that advocacy empowers survivors and provides meaningful engagement. The findings illustrate how survivors transition from recipients of care to active contributors within their communities.

3.3 The Reconciled Body and Embodied Transformation

3.3.1 The Body as a Site of Loss and Betrayal

Participants initially described feelings of loss, shock, and betrayal as their bodies became sources of illness. They recounted physical changes, surgeries, and the loss of bodily integrity, leading to emotional distress and identity disruption. This reflects the disruption of bodily trust following illness. Carel and Kidd (2020) explain that illness transforms the body into an object of awareness and alienation. The findings show how survivors confront and process this sense of bodily betrayal.

3.3.2 The Body as a Source of Lingering Hypervigilance and Anxiety

The findings reveal persistent anxiety related to recurrence, often described as “scanxiety.” Survivors remained highly vigilant about bodily sensations and regularly monitored their health through medical check-ups. This indicates that fear and uncertainty persist even after recovery. Patel et al. (2024) highlights that hypervigilance is linked to fear of recurrence, reflecting ongoing psychological tension. The results demonstrate that PTG does not eliminate distress but coexists with it.

3.3.3 The Body as a Site of Care and Protection

Participants described adopting proactive health behaviors, including lifestyle changes, self-monitoring, and protective practices. They became more attentive to their bodies and prioritized self-care to maintain well-being. This reflects a transition toward embodied responsibility. Nasution et al. (2024) found that survivors engage in preventive and health-conscious behaviors as part of recovery. The findings suggest that reconciliation with the body involves active care rather than passive acceptance.

3.4 Expression of Post-Traumatic Growth Across Key Domains

3.4.1 Personal Strength

Participants demonstrated personal strength through resilience, adaptability, and the ability to inspire others. Their narratives showed growth from vulnerability to empowerment, often using their experiences to support fellow survivors. This aligns with Schellekens et al. (2024), which identifies resilience as a central component of psychological adjustment in cancer patients. The findings confirm that personal strength emerges through meaning-making and social engagement.

3.4.2 New Possibilities

The results indicate that survivors discovered new opportunities, including advocacy, entrepreneurship, and strengthened family relationships. They reframed their experiences as opportunities for growth and contribution. This reflects the PTG domain of new possibilities. Fioretti et al. (2022) found that survivors explore new life paths over time. The findings show that adversity can lead to the creation of meaningful and purposeful directions.

3.4.3 Relating to Others

Participants reported improved relationships characterized by empathy, openness, and stronger connections with others. They became less judgmental and more understanding of others’ struggles. This supports findings by Fioretti et al. (2022), which highlight the strengthening of social bonds after cancer. The results demonstrate that PTG enhances relational awareness and emotional sensitivity.

3.4.4 Appreciation of Life

Survivors expressed a heightened appreciation for life, valuing time, presence, and everyday experiences. They viewed life as a gift and emphasized gratitude for being alive. This aligns with Mostarac and Brajković (2022), which found a positive relationship between PTG and life satisfaction. The findings show that appreciation of life is a central outcome of post-traumatic growth.

3.4.5 Spiritual Growth

Participants experienced deepened spirituality, characterized by stronger faith, increased religious practices, and trust in a higher power. Their narratives reflected a shift from control to surrender. This supports Bovero et al. (2023), which found that confronting serious illness enhances spirituality. The findings highlight that spiritual growth is a significant and interconnected domain of PTG.

3.5 Insights and Implications for Culturally and Gender-Sensitive Support

The findings reveal that healing extends beyond physical recovery to include narrative reconstruction, where survivors transform their experiences into sources of meaning and empowerment. Survivors rely heavily on faith, family, and community, indicating that support systems are culturally embedded and collective. These results suggest that interventions should incorporate narrative-based approaches, community involvement, and culturally sensitive practices. The importance of body image reconstruction highlights the need for body-centered care, while the persistence of fear underscores the necessity of long-term psychosocial support. Finally, the emergence of advocacy demonstrates that survivors can become agents of change, using their experiences to support others and promote awareness. This emphasizes the value of empowering survivors within healthcare and community systems to enhance recovery and resilience.

4. Conclusion and Recommendations

The study concludes that post-traumatic growth among Filipina breast cancer survivors in Laguna is a culturally embedded and relational process shaped by community support, spiritual surrender, and evolving self-perceptions. Survivors experienced a fundamental transformation in life perspective, prioritizing meaningful relationships, embracing enduring physical changes, and finding renewed purpose through advocacy. Their relationship with their bodies evolved from feelings of loss and betrayal to acceptance and protective care, while remaining marked by ongoing vigilance and anxiety. The five domains of post-traumatic growth were clearly expressed through strengthened personal resilience, new life directions, deeper social connections, heightened appreciation of life, and intensified spirituality, demonstrating that growth is a complex, multidimensional process rooted in both individual and collective experiences.

The study recommends strengthening resilience and coping among survivors through adaptive strategies, increasing public awareness and advocacy to reduce stigma, and promoting empowerment through accessible and culturally appropriate health management resources. It emphasizes the importance of creating safe spaces for narrative expression, fostering family involvement in support systems, and developing community-based programs that address the holistic needs of survivors. Additionally, it highlights the value of gradual recovery practices for patients and encourages future research to further explore narrative and embodied aspects of post-traumatic growth to improve long-term care and health equity.

The study is limited by its small sample size and qualitative narrative approach, which prioritizes depth of understanding over generalizability. The findings are based on the subjective experiences of a specific group of Filipina breast cancer survivors in Laguna, which may not represent the broader population. Additionally, the reliance on self-reported narratives may introduce interpretive bias, and the absence of quantitative data limits the ability to measure outcomes statistically. These limitations suggest that the results should be understood within the context of the participants' lived experiences rather than as universally applicable conclusions.

Compliance with ethical standards

The authors declare no conflict of interest and confirm that this study received no external funding. The researchers adhered to ethical standards, ensuring that participation was voluntary and that informed consent was obtained from all participants prior to data collection, which was conducted using non-invasive interview methods. Confidentiality and privacy were strictly maintained, with no identifying information disclosed, in compliance with ethical guidelines and data protection regulations. The authors gratefully acknowledge the participants and the institution involved for their cooperation and contribution to the study.

REFERENCES

Adeoye-Olatunde, O. A., & Olenik, N. L. (2021). Research methods: Semi-structured interviews. University of Sheffield. https://sites.google.com/sheffield.ac.uk/2024-team-17/approach-and-methods

Ahmad, M., & Wilkins, S. (2024). Purposive sampling in qualitative research: A framework for the entire journey. *Quality & Quantity*. Advance online publication. https://doi.org/10.1007/s11135-024-02022-5

Ahmadi, F., Zandi, S., & Cetrez, Ö. (2024). Religion, culture, and cancer: Insights from a qualitative study on coping experiences of Filipino patients. *Frontiers in Psychology, 15*, 1457027. https://doi.org/10.3389/fpsyg.2024.1457027

Almocera, D. P. (2020). *The lived experiences of Filipino women with breast cancer*. Adventist International Institute of Advanced Studies. https://dspace.aiias.edu/handle/20.500.12977/405

Arvidsdotter, T., Marklund, B., Kylén, S., Taft, C., & Ekman, I. (2021). Understanding persons with psychological distress in primary health care. *Scandinavian Journal of Caring Sciences, 35*(2), 444–452. https://doi.org/10.1111/scs.12860

Bovero, A., Balzani, S., Tormen, G., Malandrone, F., & Carletto, S. (2024). Factors associated with post-traumatic growth during the COVID-19 pandemic: A systematic review. *Journal of Clinical Medicine, 13*(1), 95. https://doi.org/10.3390/jcm13010095

Bovero, A., Pesce, S., Botto, R., Tesio, V., & Ghiggia, A. (2023). Self-transcendence: Association with spirituality in an Italian sample of terminal cancer patients. *Behavioral Sciences, 13*(7), 559. https://doi.org/10.3390/bs13070559

Cafaro, V., Rabitti, E., Artioli, G., Costantini, M., De Vincenzo, F., Franzoni, F., Cavuto, S., Bertelli, T., Deledda, G., Piattelli, A., Cardinali, L., De Padova, S., Poli, S., Iuvaro, M. D., Fantoni, G., & Di Leo, S. (2024). Promoting post-traumatic growth in cancer patients: A randomized controlled trial of guided written disclosure. *Frontiers in Psychology, 15*. https://doi.org/10.3389/fpsyg.2024.1285998

Carel, H., & Kidd, I. J. (2020). Expanding transformative experience. *European Journal of Philosophy, 28*(1), 199–213. https://doi.org/10.1111/ejop.12480

Chalasani, P. (2025). Breast cancer: Practice essentials, background, anatomy. Medscape. https://emedicine.medscape.com/article/1947145-overview

Clandinin, D. J. (2022). *Engaging in narrative inquiry* (2nd ed.). Routledge. https://doi.org/10.4324/9781003240143

Dědová, M., & Baník, G. (2021). Posttraumatic growth in the context of spirituality and religion in cancer survivors. *Spirituality Studies, 7*(1), 4–17. https://www.spirituality-studies.org/dp-volume7-issue1-spring2021/files/assets/common/downloads/files/7-1-maria-dedova.pdf

Elam, T., Madison, J., & Taku, K. (2024). Changes in narrative identity. In K. Taku (Ed.), *Posttraumatic growth: Theory, research, and applications* (pp. 105–118). Routledge. https://doi.org/10.4324/97810033166602-9

Finlay, J., & dela Cruz, A. (2023). Reflexivity and relational spaces: Experiences of conducting a narrative inquiry study with emerging adult women living with chronic pain. *Qualitative Health Research, 33*(9). https://doi.org/10.1177/23333936231190619

Fiona, K., Joanne, L., & Alastair, P. (2024). Meaning making in the aftermath of trauma: A narrative review. *World Journal of Advanced Research and Reviews*. https://doi.org/10.30574/wjarr.2024.21.1.0114

Fioretti, C., Mazzocco, K., Pravettoni, G., & Masiero, M. (2022). Investigating post-traumatic growth in cancer patients: The role of time dimension in the experience of personal growth. *International Journal of Environmental Research and Public Health, 19*(15), 9619. https://doi.org/10.3390/ijerph19159619

Franco, A., & Magno, S. (2023). The breaking point and post-traumatic growth in breast cancer survivors. *Cancers, 15*(18), 4441. https://doi.org/10.3390/cancers15184441

Ghanbar, H., Cinaglia, C., Randez, R. A., & De Costa, P. I. (2024). A methodological synthesis of narrative inquiry research in applied linguistics: What's the story? *International Journal of Applied Linguistics, 34*(4), 1629–1655. https://doi.org/10.1111/ijal.12591

Hamon, K. M., & Venta, A. (2021). Adolescent posttraumatic growth: A review. *Child Psychiatry & Human Development, 52*(3), 399–416. https://doi.org/10.1007/s10578-020-01043-5

Grogan, S. (2021). *Body image: Understanding body dissatisfaction in men, women and children* (4th ed.). Routledge.

Ingov, I. (2022). Cultural storytelling. ingoStudio. https://ingostudio.com/storytelling/cultural-storytelling/

Huang, S., Huang, M., Long, F., & Wang, F. (2025). Post-traumatic growth experience of breast cancer patients: A qualitative systematic review and meta-synthesis. *PLOS ONE, 20*(1), e0316108. https://doi.org/10.1371/journal.pone.0316108

Jayawickreme, E., & Blackie, L. E. R. (2021). Post-traumatic growth as positive personality change: Challenges, opportunities and recommendations. *Journal of Personality, 89*(1), 145–165. https://doi.org/10.1111/jopy.12591

Jozefiaková, B., Kaščáková, N., Adamkovič, M., Hašto, J., & Tavel, P. (2022). Posttraumatic growth and its measurement: A closer look at the PTGI's psychometric properties and structure. *Frontiers in Psychology, 13*, 801812. https://doi.org/10.3389/fpsyg.2022.801812

Kalbas, Y., Halvachizadeh, S., Kumabe, Y., Luidl, A. T., Steel, J. L., Zelle, B. A., Cinelli, P., Pape, H.-C., & Pfeifer, R. (2023). Post-traumatic growth in polytraumatized patients after 20+ years: A long-term follow-up study. *European Journal of Trauma and Emergency Surgery, 49*(3), 1279–1286. https://doi.org/10.1007/s00068-022-02022-w

Karademas, E. C., Simos, P., Pat-Horenczyk, R., Marou, A., Brooks, S. K., Ntella, V., Moutsiou, K., & Antoniadou-Kleitsa, E. (2022). The interplay between trait resilience and coping self-efficacy in patients with breast cancer. *Journal of Clinical Psychology in Medical Settings, 30*, 109–117. https://doi.org/10.1007/s10880-022-09872-x

Kim, G. M., Lim, J. Y., Kim, E. J., & Park, S. M. (2018). Post-traumatic growth of patients with breast cancer. *Journal of Hospice and Palliative Care, 21*(4), 203–209. https://doi.org/10.14475/kjhpc.2018.21.4.203

Lim, D. W., Li, W. W., Giannakeas, V., Cil, T. D., & Narod, S. A. (2023). Survival of Filipino women with breast cancer in the United States. *Cancer Medicine, 12*(19), 19921–19934. https://doi.org/10.1002/cam4.6403

Liu, Z., Doege, D., Thong, M. S. Y., & Arndt, V. (2020). The relationship between posttraumatic growth and health-related quality of life in adult cancer survivors. *Journal of Affective Disorders, 276*, 159–168. https://doi.org/10.1016/j.jad.2020.07.044

Martino, M. L., Lemmo, D., Testoni, I., Iacona, E., Pizzolato, L., Freda, M. F., & Neimeyer, R. A. (2022). Anticipatory mourning and narrative meaning-making. *Behavioral Sciences, 12*(4), 93. https://doi.org/10.3390/bs12040093

Menger, F., Mohammed Halim, N. A., Rimmer, B., & Sharp, L. (2021). Posttraumatic growth after cancer: A scoping review. *Supportive Care in Cancer, 29*(12), 7013–7027. https://doi.org/10.1007/s00520-021-06065-9

Michalczyk, J., Dmochowska, J., Aftyka, A., & Milanowska, J. (2022). Post-traumatic growth in women with breast cancer. *International Journal of Environmental Research and Public Health, 19*(11), 6509. https://doi.org/10.3390/ijerph19116509

Mostarac, I., & Brajković, L. (2022). Life after facing cancer. *Journal of Clinical Psychology in Medical Settings, 29*(1), 92–102. https://doi.org/10.1007/s10880-021-09786-0

Nasso, S. F., Porter, L. D., & Landrum, K. K. M. (2021). The benefits and burdens of patient advocacy. *Journal of Clinical Oncology, 39*(28_suppl), 204. https://doi.org/10.1200/jco.2020.39.28_suppl.204

Nasution, L. A., & Afiyanti, Y. (2024). Self-care among breast cancer survivors. *Jurnal Keperawatan Padjadjaran, 12*(2). https://doi.org/10.24198/jkp.v12i2.2504

Nilsen, M., Stalsberg, R., Sand, K., Haugan, G., & Reidunsdatter, R. J. (2021). Meaning making for psychological adjustment. *Frontiers in Psychology, 12*, 734198. https://doi.org/10.3389/fpsyg.2021.734198

Nisiraiou, A., Bozas, A., Kyrou, D., Stavrogianni, K., Vasilopoulou, M., Kalomoiris, G.-M., Tsintsifa, N., Nikitara, K., Koulierakis, G., & Karamanidou, C. (2025). Post-traumatic growth in adult cancer survivors. *International Journal of Psychology, 60*(5), e70097. https://doi.org/10.1002/ijop.70097

Nyimbili, F., & Nyimbili, L. (2024). Types of purposive sampling techniques. *British Journal of Multidisciplinary and Advanced Studies, 5*(1), 90–99. https://doi.org/10.37745/bjmas.2022.0419

O'Donovan, R., & Burke, J. (2022). Factors associated with post-traumatic growth in healthcare professionals. *Healthcare, 10*(12), 2524. https://doi.org/10.3390/healthcare10122524

Park, C. L. (2022). Meaning making following trauma. *Frontiers in Psychology, 13*, 844891. https://doi.org/10.3389/fpsyg.2022.844891

Patel, D. S., Webster, S. N., Dowling, E. J., Knowles, C. R., Lockwood-Taylor, G., Coutts-Bain, D., Simons, L. E., Diver, E. J., Chilcot, J., Schapira, L., & Heathcote, L. C. (2024). Scanxiety and fear of recurrence. *Psycho-Oncology, 33*(12), e70050. https://doi.org/10.1002/pon.70050

Perry, B. (2023). How to spend quality time with family (even when you're busy). BetterUp. https://www.betterup.com/blog/quality-time-with-family

Quiquiles, C. C. C., & Medez, S. R. G. (2022). Psychological well-being and quality of life. *Technium Social Sciences Journal, 36*(1), 396–410. https://doi.org/10.47577/tssj.v36i1.7447

Sabra, K. (2020). *Understanding the experiences of spirituality in post-traumatic growth for older adults: A narrative approach* (Doctoral dissertation, ProQuest). https://search.proquest.com/openview/20bbe8923e934c917b6b95d28264b491/1

Serrano, J. O., & Reyes, M. E. S. (2022). Bending not breaking. *Current Psychology*. https://doi.org/10.1007/s12144-022-03823-3

Schellekens, M. P. J., Zwanenburg, L. C., & van der Lee, M. L. (2024). Resilience in the face of cancer. *Current Oncology, 31*(7), 4003–4014. https://doi.org/10.3390/curroncol31070297

Slade, M., Rennick-Egglestone, S., Blackie, L., Yung, A. R., & Taylor, P. J. (2021). Post-traumatic growth in psychosis. *Psychological Medicine, 51*(9), 1411–1422. https://doi.org/10.1017/S0033291720004713

Soriano, G. P., & Calong, K. A. (2021). Spiritual well-being. *Palliative & Supportive Care, 19*(6), 723–726. https://doi.org/10.1017/S1478951521000079

Thakur, M., Sharma, R., Misra, A., & Singh, K. (2022). Posttraumatic growth and psychological distress. *Indian Journal of Medical and Paediatric Oncology, 43*. https://doi.org/10.1055/s-0042-1742441

Wang, R., & Nakshatri, H. (2020). Systemic actions of breast cancer. *Cancers, 12*(1), 194. https://doi.org/10.3390/cancers12010194

Wang, X., & Li, Y. (2022). Expressive writing interventions. *Journal of Consulting and Clinical Psychology, 90*(4), 297–309. https://doi.org/10.1037/ccp0000707

Zhai, J., Weller-Newton, J. M., Shimoinaba, K., Chen, H., & Copnell, B. (2021). Transforming their lives. *Health Care for Women International, 42*(12), 1343–1360. https://doi.org/10.1080/07399332.2021.1959594

Zhang, Y., Liu, X., & Chen, X. (2024). Psychological resilience and post-traumatic growth. *BMC Psychology, 12*(1), 357. https://doi.org/10.1186/s40359-024-01853-z