

The effect of counseling on co-occurring depression and anxiety in Hong Kong patients with critical diseases

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Abstract

For the most part, this type of "female breast cancer incidence globally." Anxiety is a major issue for breast cancer patients, and it has a negative impact on both their mental and physical health. According to a recent study (McGregor & Antoni, 2009), anxiety and depression levels among breast cancer patients change as the disease progresses. Anxiety is characterized by physical symptoms such as fatigue, insomnia, rapid heart rate, high blood pressure, stomach problems, restlessness, and a sense of helplessness (Sharpley et al., 2009). Multiple studies have found that people suffering from chronic anxiety have a weakened immune system and other physiological regulatory processes (Segerstrom & Miller, 2004). The growing proportion of women who experience anxiety makes it all the more important to study effective treatments. A cancer diagnosis was made.

The reason is that Chinese calligraphy "has the potential to be used as an intervention for anxiety reduction, and has been used for millennia as a spiritual activity to increase self-awareness and confidence." Almost all Western-style psychotherapy methods revolve around therapeutic conversations between the therapist and the patient. Regardless of the theoretical framework, psychotherapy is primarily a client-centered and therapist-led form of care that focuses on developing a trusting, respectful relationship between the two parties involved. The procedure typically begins with a discussion between the doctor and the patient. The therapist creates a safe and encouraging environment for the client to freely express their concerns (American Psychological Association, 2017). In individualistic societies, people are encouraged to verbalize their feelings in times of Expressive therapies are widely used and have been shown to be effective in treating distress.

However, in some Asian societies, "It is considered rude and even childish to express negative feelings aloud or on one's face, particularly wrath or sadness. There will be evidence that Japanese culture's calming effects stem from the country's collectivist social norms, which encourage members to suppress their emotions in public (Ehring, Caffier, Schnulle, Fischer, & Gross, 2010). Increasing emphasis on verbal expression may not be as beneficial for people from these cultures because it may contradict their values. It is critical to consider the patient's cultural background and willingness to try alternative therapies when developing a psychotherapy treatment plan. Despite the fact that psychotherapy will remain vocally mediated Nonverbal strategies could be

useful in inducing positive changes in populations that are resistant to verbal expressive treatment (Malchiodi, 2006). The primary focus of this study is on people of Chinese ancestry who have been diagnosed with breast cancer.

Keyword: Social Norms, Calligraphy, Immune,

INTRODUCTION

Breast cancer is the most common cancer among women in developed and developing countries alike (World Health Organization, 2014). In addition, it is the leading cause of cancer death in women, accounting for an estimated 508,000 deaths in 2011. (WHO, 2014). Breast cancer is the most common cancer in women in the United States and Canada, accounting for 29% of newly diagnosed tumors in the US and 26% in Canada (American Cancer Society, 2014). (The Canadian Cancer Society, 2014).

Breast cancer is the most common malignancy among women in today's East Asian civilizations, including Hong Kong, Malaysia, and Singapore. Breast cancer accounted for 2.41% of all new cancer diagnoses in Hong Kong last year, with 3,014 cases reported in 2010. (CentreSystem for Health Protection (2014). Breast cancer affects approximately 1,100 Singaporean women per year, accounting for 20 to 25 percent of all cancer cases in the country. As a result, the number of breast cancer patients and survivors worldwide is increasing (Lim, Devi, & Ang, 2011).

Breast cancer, according to the "traditional cancer nomenclature," is defined as abnormal development and proliferation of breast tissue cells (Baqutayan, 2012). Breast cancer is now treated primarily with surgery and adjuvant therapies (chemotherapy, radiation, and hormone therapy).

LITERATURE REVIEW

These therapies have a number of negative "side effects." Side effects can affect many patients' physical and psychological changes to their diseases in a variety of ways (Lim et al., , 2011). Despite advances in "medical technology and rigorous therapies," breast cancer patients face greater challenges in adapting to their treatment regimen, despite increased life expectancy (So et al., 2009). When a woman is diagnosed with breast cancer, the disease and its treatment-related symptoms are her primary sources of stress (Li, Zhou, Yan, Wang, & Zhang, 2011).

According to a study (McGregor & Antoni, 2009), the emotional morbidity of many women fluctuates as their disease progresses. Among the many symptoms of breast cancer, anxiety is the most common psychological issue reported by patients (Li et al., 2011; Payne & Endall 1998; So et al., 2010). Anxiety and depression frequently co-occur in therapeutic settings (Hales, Yudofshy, & Roberts, 2014; Ingram, 2009). Frequently, The two mental disorders coexist. According to Ingram (2009), "overlapping diagnostic criteria, such as sleep difficulties, difficulty focusing,

exhaustion, lack of energy, and so on, may account for some of the occurrences of this condition." Even after accounting for diagnostic overlap, there is still a significant comorbidity between depressed and anxious states (Ingram, 2009). Depression is frequently accompanied by anxiety symptoms (Doctor, Kahn, & Adamec, 2008). Unpleasant stimuli can elicit "anxiety," which is a healthy response that helps the development of adaptive responses to new demands. However, if things worsen, it could be dangerous. Excessive and continuous stress may reduce one's ability to cope (Lim et al., 2011). The sympathetic nervous system (e.g., increased heart rate, blood pressure, and increased respiration) According to Kazdin (2000), anxiety is characterized by changes in pressure, respiration, and muscular tone, as well as a subjective sense of tension and thoughts of anxiety and concern.

STATEMENT OF THE PROBLEM

Throughout history, philosophers and scholars have attempted to define and explain the nature of fear. In *The Concept of Fear*, Danish philosopher Soren Kierkegaard used the term "dizziness of freedom" to describe uneasiness or dread, and he proposed that self-conscious exercise could alleviate anxiety (Gron, 1952).

Theologian Paul Tillich refers to anxiety over the possibility of "nonexistence" as existential anxiety. As a result, he classified non-being consciousness into three types: ontological (fate and death), moral (guilt and condemnation), and spiritual (spiritual distress) (emptiness and meaninglessness). Tillich believes that existential unease is a universal experience. Anxiety, as defined by Sigmund Freud, is an emotional condition. He claimed that anxiety is a response to the trauma of birth, during which the first "risk" is encountered. According to Freud, this response "will be routinely duplicated in the future when such a scenario arises" (Gagnon, 1998, p.72).

Thanatophobia, or the fear of death and dying, is one of the most universal fears and "may be the root for many phobias," according to a study published in 2008. Many people are afraid of death because it is ambiguous. It's not surprising that breast cancer patients are grappling with existential questions, given how the disease affects their physical and psychological well-being. Meditation has been shown to be effective as a therapy for physical illnesses like cancer and AIDS. Beneficial (Miller, 1999). Relaxation techniques such as meditation have been extensively studied in the United States over the last several decades to see if they have an effect on stress reactions such as anxiety or "bodily distress." Meditation, as part of the Eastern "tradition of interconnectedness," is considered a way to cultivate attention on any of three levels: physical, psychological, and spiritual (Miller, 1999).

Huxley's best description of meditation practice is tapping into the universal "potential for the human mind to transcend its preoccupation with negative experiences- with fear, anxiety, anger, and obsession- and to become more comfortable with the experiences of compassion, acceptance, and forgiveness" (Miller, 1999, p.68). Meditation has been shown to help treat chronic pain, addiction, and anxiety disorders. to be beneficial (Kabat-Zinn et al. 1992).

Meditation's ability to "help one step away from one's mental and subjective functioning and become an observer of one's own ideas" is one of its relaxing benefits. Meditation is similar to self-monitoring, a behavioral approach in which clients are asked to examine or record their ongoing thoughts or behaviors (Miller, 1999). As Davey (1999) points out, Chinese calligraphy is a form of brush meditation that can promote bodily and psychological calm and harmony.

The study aims

To investigate whether Chinese calligraphy can reduce anxiety and depression levels in breast cancer patients.

Research Questions

This study will assess anxiety and depression levels among Hong Kong breast cancer patients. The study question prompted the development of two hypotheses: Can Chinese calligraphy help breast cancer patients in Hong Kong cope with worry and depression?

Research Methodology

Patients with breast cancer who will take part in this study had their psycho-physiological arousal parameters (measured by blood pressure, heart rate, and respiratory rate) recorded at the start and end of each session of Chinese calligraphy handwriting. Participants' anxiety levels will be assessed after a 4-week treatment period using the State-Trait Anxiety Inventory and the Depression, Anxiety, and Stress Scales 21 (after 8 weeks of intervention). All study participants practice Chinese calligraphy in a quiet environment. There will be eight consecutive weekly sessions of calligraphy writing, each lasting 90 minutes. During the research, participants will be encouraged to practise calligraphy at home. The data will be analyzed with repeated measures ANOVA and paired sample t-tests.

Research Design

The study will include breast cancer "patients," with only a few completing the entire calligraphy intervention, and a one-group repeated-measures design will be used to assess anxiety level improvements. These patients had participated in an 8-week Chinese calligraphy course before, during, and after their treatment. Physiological and self-reported evaluations will be used. In a serene setting, participants learned and practiced Chinese calligraphy over eight 90-minute sessions. This study proposes that learning Chinese calligraphy handwriting may help reduce anxiety.

Physiological changes such as heart rate, blood pressure, and respiration rate will be recorded prior to and following each calligraphy session. Each patient took the STAI and DASS 21 at baseline (before any intervention), in the middle (at the end of the fourth week session), and after (at the

end of the eighth week) the "calligraphy intervention to assess her psychological anxiety level.

Data analysis

To test the hypothesis that Chinese calligraphy can reduce patient anxiety about breast cancer treatment. It is hoped that the eight-week Chinese calligraphy intervention plan will help breast cancer patients cope better with their illness and alleviate any associated despair or anxiety. To test our hypothesis, we will compare STAI/DASS 21 scores before and after the intervention (fourth and eighth weeks, respectively). Researchers in this study hypothesized that the slow, deliberate motions of writing in Chinese calligraphy would have a calming or delaying effect on Body "stimulation techniques" (measured by heart rate, respiration rate, and blood pressure).

We used the Statistical Package for the Social Sciences (SPSS) to conduct "variance analyses and paired-samples t-tests on HR, BP, and other psychological and physiological indicators of arousal (total scale and subscale scores on the STAI and the DASS 21)." Age, education, marital status, handedness, medical history, and other demographic data will be described using frequency statistics as the "method of treatment".

CONCLUSION

Female breasts are the most common site for cancer to develop "most common cancer in females worldwide," and those who are diagnosed and treated for it may face significant challenges. Worry about therapy side effects, disease progression, or losing control of one's life has a negative impact on the immune system and can make breast cancer patients feel exhausted, unhappy, and less optimistic about their prognosis (McGregor & Antoni, 2009). Furthermore, anxiety and depression frequently coexist in therapeutic settings (Hales et al., 2014; Ingram, 2009). According to a study (Hirschfeld, 2001), anxiety and depression are linked to more severe symptoms, longer "recovery" times, and poorer outcomes in cancer patients. (Hirschfeld 2001).

Effective therapeutic strategies are "essential for breast cancer patients' quality of life." is hampered by anxiety and depression, which frequently coexist with the disease (Pedersen et al, 2010). Previous research has shown that writing Chinese calligraphy has a significant impact on the author's brain activity, perception, physiological slowdown, and emotional stability (Kao 2010). This type of therapy may help breast cancer patients cope with their anxiety and sadness. The goal of this study is to see if practicing Chinese calligraphy helps breast cancer patients in Hong Kong cope with their disease and its associated symptoms, including "sadness."

The limitations of the study

There are no specific guidelines for using Chinese calligraphy as a therapeutic intervention in psychotherapy because it is not a well-established treatment. There are no clear methods to follow, so this study has a number of drawbacks. Because Chinese calligraphy has a strong cultural

foundation in China, it may be difficult to generalize its benefits across borders. The technique may cause stress for inexperienced calligraphers (Yang et al., 2010).

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