1. **Identifying Whole-Person Traditional Medical System Therapeutic Relationship Themes in Long-Term Breast Cancer Survivorship: Implications for Integrative Patient-Centered Care**

**Global Approaches of Integrative Oncology**

**Background:** Increasing global breast cancer survivorship suggests an urgent gap in addressing

the needs of breast cancer survivors (Dobos et al., 2012). The use of complementary and

alternative medicine (CAM) is high in survivors, particularly women (Fouladbakhsh & Stommel,

2010). While traditional medical systems are accessible locally in under-resourced global

regions, patient CAM use is complicated by lack of physician awareness of and insufficient

integration of CAM in cancer management with negative implications for patient-centered care

(Hsiao et al., 2008).

**Aim**: To identify CAM therapeutic relationship themes specific to breast cancer survivors to

inform patient-centered care in integrative breast cancer settings.

**Methodology**: Participants: CAM providers (e.g., Ayurvedic physicians, yoga therapists, TCM)

across N. America, who were active practitioners for the past 1-year and currently have, or

within past year had, breast cancer survivor patients were recruited using purposive-and

snowball-sampling (N=15).

**Project Goals and Desired Outcomes**: Employing prior research (Agarwal, 2011; 2017, 2018), a

semi-structured interview protocol was constructed to assess patient-provider relationship,

provider characteristics, and survivorship challenges. Semi-structured interviews were audio-recorded, professionally transcribed verbatim (253 single-spaced pages) and analyzed using grounded theory. Ensuring visibility and including participant voice and awareness of limitations helped address reliability and validity.

**Results**: Emergent themes included whole-person support through provider employment of selfreflexivity in facilitating: (a) embodiment, (b) mind-body-process connection, and (c)

metacognitive dialogue supporting movement through fear, body acceptance, and shared

decision-making.

**Analysis**: Primary outcomes: Breast cancer survivorship therapeutic relationship dimensions of

embodiment, self-reflexivity, intuitive listening, and meta-cognitive dialogue were identified.

Ongoing challenges: Scale construction and validation for embodiment, self-reflexivity, intuitive

listening, and meta-cognitive dialogue. Potential opportunities: The integrative therapeutic relationship can bridge patient-survivor transitionship in breast cancer chronic care globally using whole-person traditional medicine systems.

**Conclusions:** Whole-person traditional medical system approaches can bridge integrative care in breast-cancer survivorship in primary care settings globally.

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Research at Kripalu. [Agarwal, V. (2019). Accepted abstracts. Integrating yoga therapy principles in breast cancer survivorship follow-up care: Tailoring Patanjali’s sutras to empower, restore, and heal. International Journal of Yoga Therapy, 29, Supplement 2, 22—46. doi: https://doi.org/10.17761/1531-2054.29.s2.1]