

Seeking Participants for a Study: **Couples' Communication about Metastatic Breast Cancer**

What is this study about?

Researchers at the University of Connecticut are seeking individuals with metastatic breast cancer to participate in a study about couples' intimacy.

Why are we doing this research?

We hope the findings from the study will be useful for individuals facing metastatic breast cancer by identifying communication practices that help couples manage the challenges of cancer on their relationship.

What do I have to do?

Eligible participants will be asked to complete a 45 minute online survey that includes scales and open-ended questions.

Next steps and questions?

Complete a brief 5-minute screening survey. You will be contacted by a research team member if you qualify to participate! Questions can be sent to CouplesCommAboutCancerStudy@uconn.edu.

Screening Survey

Link or QR Code



<https://tinyurl.com/UConnMBCStudy>



Couples' Communication about Metastatic Breast Cancer Study

Recruitment Information

Recruitment language for social media:

Researchers at the University of Connecticut are seeking individuals with metastatic breast cancer to participate in a study about couples' intimacy. We hope the findings from the study will be useful for individuals facing metastatic cancer by identifying communication practices that help couples manage the challenges of cancer on their relationship. Eligible participants will be asked to complete a 45-minute online survey that includes scales and open-ended questions. Interested participants can complete this brief 5-minute screening survey:

<https://tinyurl.com/UConnMBCStudy>

Recruitment language for listservs:

Subject: Research Opportunity for Individuals with Metastatic Breast Cancer

Researchers at the University of Connecticut are seeking people with metastatic breast cancer to participate in a study about their intimate experiences while facing cancer.

We are asking people with metastatic breast cancer to complete a 45-minute online survey that includes scales asking about health, sexuality, communication, and well-being, as well as open-ended questions asking how you define sexuality, how you express sexuality, and how you communicate with your partner about sexuality. All data will be collected anonymously.

You may qualify to participate if you are someone who is:

- 1) A woman
- 2) Diagnosed with metastatic breast cancer
- 3) 18 years of age or older
- 4) Located in the United States
- 5) In a romantic relationship of at least 3 months that currently or has previously involved sexual activity
- 6) Experiencing relational or sexual changes in the relationship due to cancer diagnosis and/or treatment
- 7) Willing to share experiences regarding your sexuality and sexual relationship with your partner, including how cancer may have influenced these aspects of your relationship

If you believe you meet these qualifications and would like to participate, please complete the screening survey: <https://tinyurl.com/UConnMBCStudy>

Please also feel free to email us if you have any follow-up questions at CouplesCommAboutCancerStudy@uconn.edu

We appreciate you taking the time to consider participating in this study,
Amanda Denes, PhD

Primary Investigator for Couples' Communication About Metastatic Breast Cancer Study

2. SPECIFIC AIMS

A diagnosis of metastatic cancer can challenge romantic relationships. Cancer can have adverse effects on physical and mental health, and often changes patterns of interacting and established roles in romantic relationships [1, 2]. For individuals in committed partnerships, managing cancer is a dyadic endeavor that requires conversations to adapt to the couples' new reality. As such, it is important to identify specific forms of **communication** and their connection to well-being in couples navigating cancer [3, 4]. Central to the communication of couples with cancer are conversations about sex, which is the most frequently discussed topic among couples after treatment decisions [5-8]. The effects of cancer and treatment on sexuality are often cited by patients as important psychosocial outcomes [6-8]. Couples-based interventions aimed at improving sexual communication in relationships where one partner has a treatable reproductive cancer have proved beneficial in enhancing sexual function and satisfaction [9]. This work emphasizes the need for research on how couples facing cancer can successfully adapt to the disease and the effects of treatment to maintain sexual intimacy [9], yet little is known about the experiences of couples facing metastatic cancer.

Although maintaining one's sexual relationship is an important aspect of quality of life for metastatic cancer patients [10], **patients with advanced cancers are largely ignored in research on communication among couples' with cancer.** Despite the recognition that sexuality should be part of end-of-life care [11] and is essential for maintaining connection among couples with cancer [10, 12, 13], sexual needs are rarely assessed among metastatic cancer patients [12, 14]. Patients with metastatic disease have sexual needs and feelings, even when managing serious illness [8, 13, 15] and in the final weeks and days of life [16]. Metastatic cancer patients' needs for intimacy may be even stronger than before cancer [17], given the limited time and highly emotional experience of facing a terminal diagnosis. Couples may redefine sexuality in the context of advancing illness or end-of-life care, focusing on non-intercourse forms of expressing closeness and desire (e.g., holding, caressing) [16]. Patients believe that sexuality should be discussed as part of an advanced illness care plan [16], but many report that it is avoided by health care professionals [12], which may contribute to the lack of sexual communication reported between partners [16]. Sustaining sexuality and intimacy in the face of metastatic cancer requires couples to communicate and (re)negotiate their sexual relationship [18]. As such, **a necessary first step in addressing the sexual needs of couples navigating metastatic cancer is to understand the forms and features of communication associated with successful discussions about sexuality, as well as potential barriers.**

Effective communication between metastatic cancer patients and their partners can maintain and/or improve well-being and quality of life. Maintaining sexual intimacy makes cancer more manageable, reduces distress, and enhances closeness and quality of life [19, 20, 21, 22]. For individuals with reproductive cancers (i.e., cancers that originate in the sex organs, such as breast cancer), sexuality-related changes as a result of treatment may be especially pronounced [17]. Reproductive cancers and their treatments can reduce patients' physical ability to engage in sexual acts and change one's body image, emotions, and relationship roles [17]. Given the widely-noted effects of breast cancer treatment on sexuality [19, 21, 22], the present study focuses specifically on metastatic breast cancer patients (MBCPs). Cross-sectional pilot data will be collected with the support of METAvivor [23] from 82 MBCPs via an online survey consisting of validated scales and open-ended questions, allowing for quantitative and qualitative analyses to gain a richer understanding of MBCPs' communication. Effective communication can help facilitate sexual and relational well-being [14, 24-26] and is especially important in the advanced stages of cancer, when partners must establish new norms and expectations for expressing their sexuality. However, broad measures of communication in cancer research fail to identify specific communication qualities and processes that are most beneficial when discussing relational and sexual changes [27, 28]. Determining specific features of couples' talk that help or hinder couples as they navigate intimacy in the context of metastatic breast cancer is a pivotal first step in understanding if and how sexual communication can benefit MBCPs' individual and relational well-being. In sum, the project has three aims:

Aim 1: To identify content and language themes in MBCPs' communication about sexuality.

Aim 2: To determine whether specific features of communication and relational factors are associated with sexual satisfaction, relational satisfaction, and individual well-being for MBCPs.

Aim 3: To determine the feasibility of collecting data related to sexuality from partners of MBCPs.

In response to the NCI's aim of addressing "the complexity of cancer metastasis" and fostering "sustained investment in metastasis research" [29], and in line with the National Cancer Plan's [30] goal of delivering optimal care, addressing the above aims will offer insights that contribute to MBCPs' well-being and quality of life.