



Emotional strategies to enhance resilience in patients with cancer: SEATTLE 2025

A scoping review

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Identification of studies via other methods

Reports not retrieved

Study Population Non-Adult

osychological resilience (n = 1

Cancer Patients (n = 30)

No emotional strategies

Chinese or English (n = 1)

Effective Emotional Regulation" theme is derived

Brown arrow indicates that part of the text within the "Emotional support from others" theme is derived from articles that employed this theory.

Purple arrow indicates that part of the text within the

at employed this theory.

Adaptation

Stress-Coping

heory (SCT) And

the Health Belief

Model (HBM)

notion identification" theme is derived from articles

mentioned (n = 45) Language of publication is not

Records identified from:

theses (n = 10)

ProQuest Dissertations &

Google Scholar (n = 30)

Reports sought for retrieval

Reports assessed for eligibility

Citation searching (n = 55)

PRISMA 2020 flow diagram for new systematic reviews which included searches of databases, registers and other sources

Duplicate records removed by Endnote 21

Study Population Non-Adult Cancer Patients

No emotional strategies mentioned (n = 456)

Language is not Chinese or English (n = 22) Completely irrelevant to the topic (n = 156)

Study Population Non-Adult Cancer Patients

No emotional strategies mentioned (n = 84)

Build Theory of

Positive Emotion

Express emotions

Figure 1. PRISMA flow diagram

Resilience in

cancer patients

Emotional support from others

Figure 2 Thematic concept map of emotional strategies to enhance resilience in cancer patients

patients

(n = 8)

Healthcare

providers

(n = 4)

Family

Positively

manage

emotions

emotions

(n = 6)

reappraisal

and dynamic Cognitive

adjustment

Not related to individual psychological

Reports not retrieved

Duplicate records removed manually

Identification of studies via databases and register

cords identified from

PubMed (n = 359)

Embase (n = 951)

PsycInfo (n = 242)

Scopus (n = 426)

VIPC (n = 36)

ecords screened

Reports sought for retrieva

Reports assessed for eligibility

Studies included in review

Reports of included studies

Represent the codes under the corresponding theme. The relative size

The Theory o

Body And Mind

Resilience

Model for

Language

of each circle corresponds to the frequency of the respective code

SioMed (n = 67)

Web of Science (n = 721)

Cochrane Library (n = 67 CINAHL (n = 298)

Wanfang Database (n = 139)

Introduction



Cancer remains a major global health burden. 1 Beyond physical symptoms, cancer patients often experience psychological distress (e.g., anxiety, depression, fear of recurrence), severely impacting quality of life and care engagement.²



Resilience, defined as the capacity to adapt positively in adversity, plays a crucial role in supporting psychological adjustment and improving outcomes.

- Resilience-enhancing interventions derive from two main approaches: 5
- > Stress and coping: may be cognitively demanding for patients with high emotional distress.6
- > Emotion regulation:
- ✓ Regulate emotional responses through processing and expression, enhancing emotional awareness, emotional acceptance and recovery from distress.⁷ ⁸
- ✓ Faster-acting, more adaptable, and particularly effective under dynamic emotional conditions.9
- Existing reviews have not systematically synthesized emotional strategies due to intervention heterogeneity, exclusion of non-RCTs and failure to identify emotional components in mixed interventions. 10 11

Aim: To map and summarize existing evidence on emotional strategies recommended for enhancing resilience in cancer patients, identify research gaps and inform future research.

Review Question: What emotional strategies are available to enhance resilience in adult cancer patients?

Methods



Following JBI methodology for scoping reviews;¹² registered with OSF (DOI: 10.17605/OSF.IO/JBMZ9).



Eligibility (PCC framework):

- Participants: Adults (≥18) with cancer, excluding severe psychiatric disorders.
- Concept: Emotional strategies to enhance psychological resilience
- Context: Any healthcare setting; all study types; English/Chinese literature.

Search Strategy:

- Searched 11 databases (e.g., PubMed, CNKI, PsycInfo, Wanfang).
- Included grey literature from ProQuest Dissertations, Google Scholar, and manuals/books. Reviewed references of relevant reviews.



Screening:

- Titles, abstracts, and full texts screened by two independent reviewers.
- Duplicates removed in EndNote 21.
- Discrepancies resolved via discussion; PRISMA flowchart used.



Data Extraction & Analysis:

- Two reviewers used NVivo 15 to extract study details and emotional strategies.
- Thematic content analysis: Coding → categorization → theme development.
- Quality appraisal used appropriate tools (e.g., RoB 2.0, JBI checklists, MMAT 2018).

Results

1. Descriptive characteristics of the documents

- Countries: China (n=16), Spain (n=5), Iran (n=3), USA (n=3), India (n=1), Israel (n=1), Singapore (n=1), Slovakia (n=1), Turkey (n=1).
- Study designs: RCTs (n=14), RCT protocol (n=1), quantitative (n=10), qualitative (n=5), mixed-method (n=1), book chapter (n=1).
- Settings: Hospitals (n=21), ancer/care social associations (n=3), cancer centers (n=3), multiple settings (n=2), unspecified (n=3).
- Cancer types: Breast (n=11), mixed types (n=8), colorectal (n=3), liver (n=3), gastric (n=1), esophageal (n=1), gynecological (n=1), lung (n=1), nasopharyngeal (n=1), ovarian (n=1), prostate (n=1), acute leukemia (n=1).

2. Thematic findings of emotional strategies to **enhance resilience** (Figure 2)

- **Emotional strategies:** Emotion identification (n=20); Effective emotional regulation (n=27); and **Emotional support from others (n=19).**
- **Implementer:** Nurses (n=10), psychologists (n=6), internists (n=2).
- **Delivering Mode:** Online (n=6), face-to-face (n=13).

3. Emotional strategies word cloud (Figure 3)

Most frequently mentioned words: 'Positive' and 'emotional'

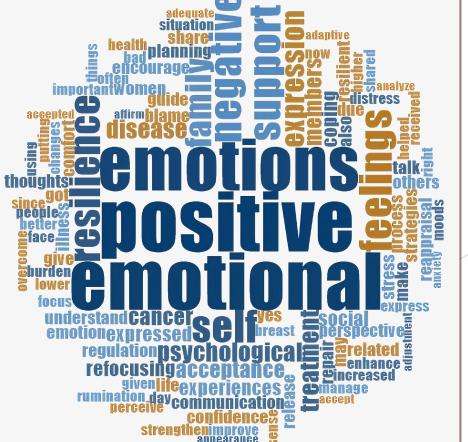


Figure 3 Word cloud of emotional strategies

Discussion

- 1. Emotion Identification: Accurate identification and labeling of emotions. 13
- Emotional Clarity & Repair: Linked to greater resilience; underexplored in trials.
- Expressing vs. Suppressing Emotions (n=9 vs. n=2): Influenced by social context.¹⁴
- Understanding Emotions: Improves coping and reduces cognitive bias. 15

Implications: Need to develop and validate the effects of interventions that consider the social context to help patients categorize and identify emotions

2. Effective Emotional Regulation

- Positive Emotion Management: Most common strategy based on positive psychology. 16
- Cognitive Reappraisal & Avoiding Rumination: Correlated with higher resilience
- Reflection & Dynamic Adjustment: Viewing resilience as a dynamic process.
- Implications: Positive emotion management needs to be integrated into

Emotional Release: Need personalized and professional psychological support. 17

- intervention. The effectiveness of emotional regulation need to improve.
- 3. Emotional Support from others: Fellow Patients (most frequently mentioned), family, and healthcare providers.

4. Intervention Delivery:

- Online: Emotion awareness and strategy teaching.
- Face-to-face: Group sharing and emotional connection.
- **5. Implementers:** Nurses (primary role), psychologists (specialized techniques), physicians (medical integration).
- Implications: Integrate multiple forms of emotional support into program design; combine digital and in-person delivery models.

Conclusion

Emotion identification, effective emotional regulation, and emotional support from others are essential for enhancing resilience in cancer patients. Many promising strategies remain underreported and require further investigation.

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