

Playing for Keeps:
A Phenomenological Exploration of the Meaning of Play in the Healing Process
of Female Breast Cancer Survivors

By

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ABSTRACT

Breast cancer is epidemic in our society. For women living with this disease, the challenge to survive with an intact quality of life encompasses factors far beyond traditional allopathic treatment protocols. A phenomenological inquiry was utilized to explore how play and playful activities impacted the healing process of four female breast cancer survivors. The goal was to understand what meanings these women attributed to play while being with the cancer experience. Four common themes emerged from the exploration of the women's experience: (1) integrating play into one's life, (2) reconnecting to childhood, (3) expressing spirituality and (4) transformation. The author expresses personal reflections and future implications in the final chapter.

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Dedication

For Sandra

Prologue

This is the story of four women who walk hand-in-hand with breast cancer. Their journey, the being with, the living with this disease is a shared consciousness, however each has walked the path in her own unique way. These women have walked a great distance; the path has been well trodden and bears the footprints of those who have walked before. It is uneven; meandering. The women have traveled, and climbed and they have arrived upon a mossy knoll; each in her own time, all four, now together. The view is panoramic. In places, the path can scarcely be discerned for the density of the foliage, however, the point at which the path diverges can be clearly seen. These four women have chosen to travel along the same berm in order to gather together at this place, to share their stories.

“To truly question something is to interrogate something from the heart of our existence, from the centre of our being” (van Manen, 1980, p. 45).

I am one of these four women. I, like the others, have questioned the meaning of this diagnosis in my life, and I have questioned the meaning of life within this diagnosis. What I have discovered, and what I will share with the reader, is that there is life, one richer and fuller than before, for the woman willing to risk, to choose a direction which opens her up to the possibility of being in the world in a slightly different way, a more playful way which embraces the fullness of life in all its mirthful pursuits. For the three women I interviewed, and for me, the diagnosis of breast cancer was the catalyst for change; play has been a pathway to healing.

CHAPTER ONE

Introduction

“It is as if the process of illness, limitation, suffering, the shocking isolation of a brutal disease, awakens in us the seeker, which is so much more than the scientist. We begin to sort values, what matters and what doesn't. We become open to looking at the meaning of life ...” (Remen, 1988, p. 9).

Breast cancer is the most common type of cancer in Canadian women. It accounts for the largest “person years of life lost” from all cancers: an average of 23 years lost. At age 25, a woman has a risk of one in 1000 of developing the disease; by age 50, one in 63; by age 75, one in 15. The major known risk factors include female gender, advancing age and genetic predisposition (Olivotto, Gelmon & Kuusk, 1995). Primary treatment modalities include surgery, radiation and chemotherapy, or as they are often derisively referred to in the literature: slash, burn and poison (Dollinger, Rosenbaum & Cable, 1995; Love, 1995; Olivotto, Gelmon & Kuusk, 1995; Weed, 1996). Breast cancer has the highest mortality rates of women aged 35 to 54, in North America; in the year 2000, 51% of Canadian women will be aged 35 to 54 (Olivotto, Gelmon & Kuusk, 1995). These are the statistics; these are the “words” of science.

“I have breast cancer. No words” (Personal Journal, February 1, 1996). My impetus for this study evolved from my own experience of breast cancer. As I was propelled into the medical morass of diagnosis, surgery and follow-up treatment protocols, it became apparent to me that there was something missing in my recovery and healing process. I began to explore adjunctive treatments

such as herbal preparations and massage. Although these were helpful, I sensed that there had to be more that I could do to facilitate my own healing process.

Although I had kept a journal from the time I was a child, it had been a sporadic pursuit as my life became filled with adult responsibilities; it was primarily filled with specific events and significant others. I had not picked up a pencil crayon or paintbrush since early childhood. I began to journal in earnest, and to produce artwork which chronicled my journey, and, in the process, I began to reconnect with the joy of creating something. This paralleled my earliest recollections of play. As I became aware of this insight, I noted that I began to experience an enhanced sense of well-being. Although the treatment and resulting fatigue were immutable, I sought escape and pleasure in writing, drawing and connecting with nature through walks by the ocean, and gardening. From these simple acts, I experienced a freedom which released the words and the drawings and provided me with a sense of having played, away from the pain and trauma of dealing with a life threatening illness. I expanded my repertoire of playful activities. I began to take photographs and I joined a dragon boating team. I registered in art and pottery courses; I returned to dance classes. My ability to create something new and imaginative, out of the pain which I was experiencing, was both challenging and enjoyable. I often lost myself for hours in dance or in the creation of art or pottery which allowed me to give expression to feelings for which I could find no vocabulary. Play in childhood has been described as "the child's natural form of communication" and toys have been referred to as "the words children use to express emotions" (Campbell, 1993). My experience of adult play mirrored this; the "toys" which I employed allowed me to put words to the feelings.

My diagnosis arrived as I was completing my undergraduate degree. As I recovered, and continued my education, I began to reflect on my master's thesis. I was determined to write about some aspect of play therapy with children. As I was struggling to narrow my topic, I found my mind wandering; my thoughts continually returning to the same place - the meaning of play and healing in my own life. As I initiated my exploration of the interaction between play and healing I began to examine the role of play in my life. Like many children from impoverished backgrounds, I lacked the significant component of spontaneity within my play. It was solely when I was engaged in creating words and pictures that I could truly escape from the painful reality of my family life and give voice to the playful child who was struggling so hard to be acknowledged. As I matured, married and gave birth to two children, I recognized that unlike many of my cohorts, I did not always find it easy to play with my children. The childlike voice which beckoned me to come out and play struggled to be heard throughout my life and did, on occasion, break through the competent, task-focused wall which I had built around myself. For the most part however, the voice went unheeded. I dedicated my life to working tirelessly at a marriage and motherhood; at a job, in social relationships and in school. Play was a therapeutic tool, reserved for my future career, to be employed in healing the children with whom I would be working. I had little or no time or place for it in my personal life. In January, 1996, I was diagnosed with breast cancer. For the first time I truly heard the voice.

When I finally gave myself permission to surrender to what I needed to write about I began to ask questions of myself, and of other women who had survived breast cancer. What did play really mean to me? What did it mean to others, like me? How did other women play? What kinds of feelings did play

evoke? Did it create a sense of well-being for them as well? Did they feel more joy in their lives as a result of playful activities? Did they experience, as I had, a sense of healing through creativity and expression? How did they play in the face of debilitating treatments? As a result of this questioning I hoped to come to an understanding of how other women who had been diagnosed with breast cancer perceived play in their lives and to determine what meaning it had in the healing process of their illness.

One of my greatest personal challenges was to define my terms in a manner which reflected clarity of thought and a deep exploration of the literature. The terms, "play", "healing" and "survivor" are very subjective; open to deepest scrutiny. In Chapter Two, I discuss my struggle in defining these terms, and I outline what I perceive to be appropriate definitions for each based on a comprehensive review of the literature. This created a context within which I could "move from the modern search for the one true and real meaning to a relational unfolding of meanings" (Kvale, 1996, p. 226).

My research methodology is outlined in Chapter Three. A phenomenological research methodology has been utilized to capture the essence of the "life world" of the three women I interviewed. Although a phenomenological study seeks to obtain "presuppositionless descriptions" and to "describe rather than explain or analyze" (Kvale, 1996, pp. 53 & 58; Moustakas, 1994, p. 58), it was essential for me to examine the literature in depth in order to sensitize me to what the participants were saying. As the interviewer, my intent was not to expose preexisting meanings but to support the participants in generating their personal meanings throughout the interview process.

Chapter Four presents the meanings my subjects ascribe to their experiences of play as a vehicle for healing, and includes the themes which emerged from their stories.

In Chapter Five I reflect on what I have learned from the study and what I consider to be meaningful implications for future exploration that may inform treatment protocols for women recovering from breast cancer.

CHAPTER TWO

Play and Healing

The intent of my literature review was to explore the construct of play as it related to the facilitation of the healing process. In addition, however, it was essential to explore the evolution of play in order to gain an historical perspective. This provided an important link between what has been written about play and the play process and what meanings the participants ascribe to play in the present. The greatest component of the historical literature provided information about play primarily within the context of childhood and child therapy; there were little data on play specific to healing, however I have included an overview and I have introduced theoretical models and perspectives. A review of the literature resulted in minimal resources on adult play however I have included current perspectives on play in adulthood. I chose not to differentiate between the constructs of “play” and “playfulness” in the writing of this thesis, as these terms have been used interchangeably by the participants, and to seek deeper meaning between these terms seemed counterproductive to understanding and articulating the essence of the experiences of these women.

Play, as defined by the Oxford Dictionary of Current English (1990), offers numerous references. These include: “move about in lively or unrestrained manner”; “occupy or amuse oneself pleasantly”; “perform”; “brisk, light or fitful movement” (p. 563). “Playful” is defined as “fond of or inclined to play; done for fun” (p. 563). Frey (1994) described five characteristics common to all types of play: (a) play is fun; it is something one feels more so than something one does; (b) play is inner directed with intrinsic motivation; (c) play activities are processed more as a medium of expression than as a literal

interpretation; (d) play provides a challenge; if an activity is too difficult or too easy it is not thought of as play; (e) play exists in relaxed settings which provide a type of diplomatic immunity from the usual expectations of living (p. 190). Play is a process and a product; it has as much to do with the way something is done as with what is done. It has been defined as “an active form of learning that unites the mind, body and spirit” (Levy, 1978, p.4); “an assimilatively dominated activity that consolidates and elaborates established schemas of cognition” (Piaget, 1962, p. 20), and a “linguistic wastebasket for behaviour which looks voluntary, but seems to have no biological or social use” (Millar, 1968, p. 11). Play has been linked with constructs of drama, symbolism, freedom, catharsis, education, development, healing, learning and metacommunication (Bateson, 1955; Lewis, 1993; Millar, 1968). It has been defined as the vehicle through which individuals develop self-awareness, verbal skills, creativity and flexibility (Singer & Singer, 1977). Einstein believed that play was the essential feature in productive thought, before there were any connections with logical construction in work or other kinds of signs which could be communicated to others (O'Connor & Schaefer, 1994). It is clear, as Schlosberg (1947) stated, that “this subjective adverb-like phenomenon cannot easily if at all be packaged into a neat operational definition” (p. 229).

Despite the lack of consensus in defining play concisely, the first reference in the literature is ascribed to Plato who recognized the practical value of play when he prescribed the distribution of apples and miniature tools among young boys in order to facilitate the learning of arithmetic and building (Millar, 1968). These earliest records paralleled play with the evolution of culture (Millar, 1968; Salter, 1978; Sawyers & Rogers, 1990). Although references to children and play have been described in the literature, dating to the 13th and 14th centuries, the

context has been one of describing children as miniature adults whose play was given minimal acknowledgment (Lewis, 1993; Millar, 1968; Salter, 1978). Few theories were conceptualized until the 17th century when childhood was finally recognized as a unique stage of development (Lewis, 1993).

During the past century, the study of play has been scientifically examined from 4 different perspectives, with scholars from different disciplines perceiving it in different ways. These perspectives include:

(a) Anthropological; (b) Educational; (c) Psychoanalytic and (d) Sociological (Barnett, 1990; Huizinga, 1950; Salter, 1978).

Anthropologists examined play from its contributing role in the study of the individual as a physical and cultural being. Several theories were proposed within this framework. In the mid 19th century, German theorists, Schaller and Lazarus, and an English philosopher, Spencer, theorized that by decreasing large amounts of surplus energy, play, in contrast to work and idleness, could be restorative (Millar, 1968; Pepler & Rubin, 1982). Conversely, during the latter part of the 19th century, a "Recapitulation Theory", which stated that children are a link in the evolutionary chain from animal to man, was proposed by Hall, a student of William James. He theorized that ontogeny repeats phylogeny and the child re-enacted, in play, interests and activities in the same sequence in which they occurred in primitive man (Millar, 1968; Salter, 1978). In 1899, Karl Groos, a professor of philosophy who was renowned for his study of play in animals and man, stated that play was "the generalized impulse to practice instincts" and as such prepared the child for adult activities (Millar, 1968, p. 21). This viewpoint supported a second perspective, that of the Educationalists, who viewed play as simulated skill practice.

During the 20th century, perhaps the most influential theorists subscribing to the Educationalist view were Piaget, Vygotsky and Erikson. Piaget and Vygotsky developed elaborate theories of human development which gave considerable attention to the importance of play, however their work was unrecognized within North America until the 1960's, when there was an acknowledgment of the role of an individual's cognitive activity within the framework of total human behaviour. Perhaps the most salient feature of Piaget's work was the acknowledgment that the form which play takes reflects the child's current level of cognitive development. Vygotsky purported that play in a child signaled the beginning of the development of imagination; Erikson conceptualized play as a function of the ego and a form of mental health (Fein & Rivkin, 1986; Millar, 1968; Salter, 1978; Yawkey & Pellegrini, 1984).

The greatest contribution to the study of play as a therapeutic tool was introduced within the context of the Psychoanalytic perspective. Sigmund and Anna Freud, Hermine Hug-Hellmuth and Melanie Klein were pioneers in the field of child analysis in the early part of the 20th century and recognized that through play, the child was able to gain mastery over conflict.

Sigmund Freud first used play as a therapeutic tool in 1909; at that time he defined several components of play. In addition to mastery and catharsis, Freud described play as a "window" into the psychodynamics of a child's personality (Fein & Rivkin, 1986; Millar, 1968). Perhaps his greatest contribution to the field of play therapy was his acknowledgment of play as symbolic and paramount in the resolution of trauma. Hermine Hug-Hellmuth, a student of Freud, used a more directive approach and chose specific treatments and activities which acted directly on the child in order to influence him/her and bring about change. Melanie Klein was the first to use miniature toys for projective play. In addition,

she employed spontaneous play as a direct substitute for the free association techniques used earlier by Freud. Freud's daughter, Anna, employed similar techniques to those of Klein, however in addition, she also saw the value in educating the child. Unlike her father, she did not believe that play was necessarily symbolic of anything; that in many cases a child enjoyed play with a particular object simply because it appealed aesthetically. Her greatest contribution to the field of play in therapy was her emphasis on the therapeutic relationship which directly influenced the work of contemporary therapists such as Axline (1969); Garvey (1990); Gil (1991) and Oaklander (1988).

Adult play has been primarily conceptualized in the literature as it relates to the support and/or teaching of children. However, play and playfulness in adults provides a vehicle for the healing process which closely mirrors that in children. Frey (1994) stated that "play's current and ongoing contribution to adults is mainly in the cognitive and affective domains ... it is through play that individuals become integrated into society" (p. 189). She further stated that play opens thoughts and feelings and "through this process is developed a flexibility that enables society to change" (p. 189).

Landreth (1982) presented a slightly different view of adult play:

It may be said that adult living is largely play, but we no longer recognize it as such since the adult has largely ceased to reorganize his past and is 'committed' to the more or less specific and often rigidly patterned 'make-believe' fantasies and symbolic goals of this social-cultural group, unable to play other games freely, or take on new roles as the child does. Adult leisure time and recreational pursuits often provide more or less conventionalized roles in which adults can 'escape' from their usual patterns and customary expectations of the inevitable (p. 24).

Frey (1994) stated that play is even more relevant at the end of the 20th century as adults become more and more oriented to work, and, in the process, inhibit their own playful nature. She has asserted that play in adulthood is a necessity and enhances creativity; vitality and social, intellectual and emotional growth. She agreed with Landreth that adults experience a type of exemption in play. "Customary rules of conduct are suspended ... play transcends ordinary behavior, becoming a diversion from routine and societal demands" (Frey, 1994, p. 190).

Huizinga (1950), formulated a classic anthropological definition of the play process which shaped the foundation for many current theorists engaged in the study of play:

Summing up the formal characteristics of play we might call it a free activity standing quite consciously outside 'ordinary' life as being 'not serious', but at the same time absorbing the player intensely and utterly. It is an activity connected with no material interest, and no profit can be gained by it. It proceeds within its own proper boundaries of time and space ... (p. 13).

This definition is supported by Csikszentmihalyi (1975), who, in his research on play and playfulness, acknowledged that play has been used as a means of studying other behaviours but as an experience unto itself has rarely been studied as a behavioural phenomenon with unique characteristics of its own. He posited a definition of play as an enjoyable process, rather than a means to an end (Csikszentmihalyi, 1975; Stevens, 1980). He described how "philosophers from Plato to Sartre have remarked that people are most human, whole, free, and creative when they play" (p. 42). In reflecting upon the many theoretical perspectives on play reported over the years, he stated that, "these

perspectives leave out one of the main aspects of play, which is the simple fact that it is enjoyable in itself. Regardless of whether it decreases anxiety or increases competence, play is fun" (p. 42). "Flow" is the term Csikszentmihalyi used to describe "the common experiential state" which is present in various forms of play and also, under certain conditions in other activities not normally thought of as play. "Flow denotes the wholistic [sic] sensation present when we act with total involvement. It is the kind of feeling after which one nostalgically says: 'that was fun,' or 'that was enjoyable' " (p. 42). In flow there is an internal logic "which seems to need no conscious intervention on our part" (Csikszentmihalyi, 1975, p. 42).

Jennings (1993), responding to the criticism that play is not important because it is not "real", stated that because it is not "real" it is crucial to human survival:

It is necessary for all of us to have the capacity to imagine how life is or could be, to be able to call into mind what is not there and what does not exist. How many great ideas and experiments have started from the dramatic ingredients of sheer human survival? (p. x).

Singer and Singer (1977) defined play as a vehicle through which individuals develop self-awareness, verbal skills, creativity and flexibility. They described adult play within the context of parenthood and education, however the components they explored provide a rich protocol for developing one's capacity for playfulness. "While childhood is neither naive innocence nor a blissful golden age, free of conflict, it does have a quality of playful invention that too many adults have lost - or mislaid " (p. 16). They articulated several different ways of developing one's playfulness as an adult. These include reminiscence, dream logs and employing one's daydreams in fantasy play:

Daydreaming can add liveliness, color and even intrigue to our lives. It can help us become more creative, in our work and in our social relationships. Our daydreams can even help us in planning for the future ... we can also use our fantasies to calm us (p. 23).

Blatner and Blatner (1988) described a specific model based on an adaptation of sociodrama, for teaching adults how to play. They offered thoughtful insight in describing play as "a state which offers a shift from over utilized roles and introduces the opportunity for satisfying the desire to expand into a limitless variety of roles; this process results in a kind of healing" (p. 38). It is this balancing of roles through actively expressing them in play which generates "an experience of wholeness in [one's] psychological existence that nourishes and heals [one's] psyche" (p. 38).

"Healing" is derived from the word "hale", which means whole (Blatner & Blatner, 1988; Rew, 1996). The Oxford Dictionary of Current English (1990) defines healing or "heal" as: "become sound or healthy again"; "put right"; "alleviate"; "cure" (p. 339). I have resisted this "dictionary" definition. I have struggled with the concepts of healing and "curing". I do not believe that these are absolutes; to define them as such is to disrespect the uniqueness of each individual's healing process. How does one become healed? At what point does one know that s/he is cured?

Johnson (1987) stated that the "medically defined cure" based on 5 years beyond diagnosis or the end of treatment with no recurrence, "tends to obscure the unpleasant facts that cancer is systemic, meaning it affects the whole body and it is chronic, meaning it is likely to recur". She expressed the belief that there is never a time when the "cancer experience" is over; it becomes a "fact of (one's) life" (p. 50).

Gadamer (1996) stated that, "the healthy individual is not simply one who has been made healthy" (p. 33). Rather, he suggested that healing involves a successful struggle against illness, convalescence and "ultimately, care for health in the broadest sense" (p. 108). Is it not within the process of moving toward a personally more enriching existence, physically, emotionally and spiritually, that the process of becoming healed occurs? I believe that healing is on a continuum; as one addresses the potential for "being cured", s/he must also address the shadow side of dying of the disease. This will be discussed in greater depth in Chapter 5.

Fabrega (1997) stated that healing consists of "the range of medicines, procedures and rituals by means of which a people try to prevent, undo, or minimize morbidity" (p. 3). He further commented on how, in our current practice of medicine,

healing is now broken apart into diagnosis and treatment, carried out by different persons/specialists, and both of these 'biomedical' concerns [are] seen as entirely separate from the social psychological and spiritual support that is needed in the event of continued suffering and possible termination in death (p. 279).

In her research on feminine intelligence, Northrup (1998) differentiated between the processes of healing and curing. She believed that healing is a deep, internal, organic process which happens within the body and the intellect; curing consists primarily of an external treatment encompassing drugs and surgery "used to mask or eliminate symptoms" (p. 41). She further elaborated that although curing can accompany healing, healing and death are not mutually exclusive. "One can be healed completely and go on to die of her illness" (p. 41).

Sheppard (1994) supported Northrup's distinction between healing and curing, and explored the multifaceted phenomenon of healing. She conducted a phenomenological study in which 35 nurses explored the question, "Are art and beauty healing forces?" She noted that "all respondents defined healing as 'being whole' or 'harmony of the body, mind and spirit' and differentiated healing from merely curing. Curing was felt to be 'just physical', dealing with symptoms or fixing disease" (p. 103). Sheppard also spoke of her own journey and the lessons she learned from conceptual artists. There was no end product when they completed their art. "The process of making art is their art ... the process of healing is the healing. If I'm wedded to the outcome, I may miss out on the healing, and my opportunity for caring and connection" (p. 108).

Chopra (1997) defined healing as "a return to the state of unity" and "connected to both whole and holy" (p. 43); Thomson (1989) described healing as "the restoration of a state of equilibrium or well being in an individual through energy transfer" (p. 35); Epstein (1994) stated that "healing is both an objective and subjective phenomenon ... an active participatory process for those who are ill" (p. 90).

Simonton, Matthews-Simonton and Creighton (1978) described four psychological steps which occur when one moves from illness to health. These include: (a) gaining a new perspective on one's problem with the diagnosis of a life-threatening disease; (b) making a decision to alter behaviour; (c) responding physically to feelings of hope and the renewed desire to live thus creating a reinforcing cycle with the new mental state and (d) becoming recovered, "weller than well" (p. 71). They further stated that with this "positively altered stance toward life, (one) expect(s) that things will go well, and they are victims no

longer" (p. 73). If one is no longer a "victim" then does it follow that s/he then becomes a "survivor"?

The term survivor is derived from the word "survive", which is defined in the Oxford Dictionary of Current English (1990) as: "continue to live or exist; live or exist longer than; come alive through or continue to exist in spite of " (p. 758). I have struggled with this term, "survivor"; struggled with operationalizing a word so intensely personal and significant in my own life:

I survived the biopsy (Personal Journal, January 26, 1996).

I had my mammogram today ... there was a lady in the booth next to me and I heard her ask the technician tentatively about the radiologist checking her films - 'my doctor thought he found something but he wasn't sure what'. I heard the quiet terror in her voice and later the sigh, followed by nose blowing, no doubt after the tears fell. I wanted to reach through the panel and tell her she would be okay, but how arrogant of me - maybe she wouldn't, I don't know. But even if the 'something' proves malignant - is she not still a 'survivor'? I believe so (Personal Journal, October 13, 1998).

Initially, I was guided in my selection of participants by the indicators of successful "survivorship" dictated by the empirical literature, which defines a breast cancer survivor as one who is alive without recurrence 5 or more years after diagnosis (Carter, 1993; Irvine & Lum, 1997). However this did not sit well with me nor with my philosophy of healing. Cancer statistics tend to group "survival rates" in 5 year increments. Wadler (1992) stated, "there are no figures for the worth of a life" (p. 165). As a breast cancer survivor, I have an aversion to tables and charts and statistical information which leaves those of us who have been diagnosed to ponder whether we will land in "Column A" or "Column B". Gadamer (1996) stated,

If we attempt to discover the real difference between illness and health, then we must recognize that illness cannot be defined by the contrast

with a notion of health which is in turn derived from the establishment of standard values. There are so many marginal factors which cannot be measured that the results deriving entirely from what can be measured lose their significance by comparison. The picture of the individual which is constructed on the basis of standard values is an extremely precarious and unreliable one (p. 160).

One of the most poignant definitions of a survivor is demonstrated in an untitled poem by Nepo (1994):

It seems clear that being a survivor
is embracing the will to live.
And whether that embrace lasts for years
or months or days or even hours,
whoever embraces life is a survivor (p. 121).

Bobbi de Cordova-Hanks, a breast cancer survivor and international speaker, described survivorship as, "the time between the moment of diagnosis to the end of your life, whether it be days, weeks, months or years" (keynote address, Canadian Breast Cancer Foundation Awareness Day, Victoria, B.C., October 14, 1998). Johnson (1987) stated that survival is "measured in quality, not quantity" (p. 177). I concur.

My review of the literature on play in the healing process of breast cancer survivors resulted in minimal resources on adult play and the relationship to healing from breast cancer. It did, however, provide me with a solid foundation of traditional research on play and this has been helpful in order to "set the stage" for a phenomenological study. Kvale (1996) stated that "the descriptive focus on the lived interactions of the human world may counteract a

technological colonization of the life world that reduces qualitative diversity to isolated facts and variables ..." (p. 55). Personal meanings, when viewed within a context of anthropological, educational and historical data; sociological perspectives and theoretical models provide a depth and breadth of description, a more complete picture of the essential experience of playing while living with a life-threatening diagnosis. Richardson (1994) stated that "nurturing our own voices releases the censorious hold of 'science writing' on our consciousness ..." (p. 518). This is the foundation of a phenomenological research study.

There was considerable literature on healing, which has universal application. Although there was great value in having read "widely and deeply ... providing [me] vicariously with expressive examples of fundamental truth experiences" (van Manen, 1980, p. 51), I chose to access only those sources which I believe captured the essence of healing in the context of play and survival. What I wish to achieve, with the material presented in this research, is an understanding of what it feels like to play while struggling to survive. I do not believe that this is specific to breast cancer survivors. It is interesting to note that Roget's Thesaurus (1977) associates the word "material" or "essential content" with "heart" and "soul". It is my hope that the reader will resonate with the material presented.

CHAPTER THREE

Methodology

The experience of having cancer is unique to the individual. Personal healing, through any type of modality, is also unique. It seemed appropriate, therefore, to utilize a research methodology which captured the authenticity of each woman's experience of play as a healing vehicle. My own experience with breast cancer, and my inability to find words on occasion to express my feelings of being with this disease, cautioned me that I would have to provide ample opportunity for the participants to fully explore the question; hence my methodology needed to allow me to engage with the material and the participants "both intellectually and emotionally" (Gall, Borg & Gall, 1996, p. 601). In addition, it was vital for me to be sensitive to the emotional content and potential backlash of this type of interviewing; it was essential to me that it be "a caring act" (van Manen, 1992, p. 5). For these reasons I chose qualitative analysis, specifically a phenomenological methodology for my research, with the phenomenologist's knowledge that my own experiences "are also the possible experiences of others" (van Manen, 1980, p. 51). Van Manen (1980) further stated, "to be aware of the structure of my own experience of this phenomenon may provide me with clues for orienting myself to the phenomenon and thus to all the other stages of phenomenological research" (p. 52). This type of research methodology, this exploration of the life world of these women, encourages a deeper understanding of the meaning of the everyday experience of play.

Phenomenological research likes to "make use" of the works of poets and artists (van Manen, 1992, p. 19). Richardson (1994) expressed, "by writing in

different ways, we discover new aspects of our topic and our relationship to it" (p. 516). This is supported by Hirshfield (1997) who stated,

Next comes the concentration of narrative, in which event itself is the sinew that moves a poem forward. Storytelling, like rhetoric, pulls us in through the cognitive mind as much as through the emotions. It answers both our curiosity and our longing for shapely forms; our profound desire to know what happens, and our persistent hope that what happens will somehow make sense. ... and story, like all forms of concentration, connects. It brings us to a deepened coherence with the world of others and also within the many levels of the self (p. 26).

Richardson (1994) also described how "arranging words in new configurations lets us hear, see, and feel the world in new dimensions. Poetry is thus a 'practical' and 'powerful' method for analyzing social worlds" (p. 522).

The use of metaphor is also a powerful way of thinking and speaking. Richardson (1994) described metaphor as "the backbone of social science writing ... the essence of metaphor is the experiencing and understanding of one thing in terms of another" (p. 519). Van Manen (1980) expressed that language, by way of metaphor "can take us beyond the content of the metaphor towards the original region where language speaks through silence. This is the speaking of thinking, of poetizing" (p. 48). For these reasons, I chose to include metaphor and my own narrative and poetry from personal journals. I have also included excerpts from a manuscript written by my daughter after a lifetime of researching me, which I believed would add to the richness of the text.

Although phenomenological methodology " ... tries to ward off any tendency toward constructing a predetermined set of fixed procedures ..." (van Manen, 1992, p. 29), aspects of the process of my data analysis will be articulated

in the context of van Manen's (1992) "methodological structure of human science research" which includes: turning to a phenomenon which seriously interests us and commits us to the world; investigating experience as we live it rather than as we conceptualize it; reflecting on the essential themes which characterize the phenomenon; describing the phenomenon through the art of writing and rewriting; maintaining a strong and oriented pedagogical relation to the phenomenon and balancing the research context by considering parts and whole (p. 31).

Turning to a Phenomenon

My choice of a research topic did not come to me in a blinding revelation. Quite the opposite, it tapped quietly at the door of my consciousness and continued to knock, until I could no longer ignore its presence. That in itself proved to me that this was something I needed to write about; I was compelled to understand what it was like for other women to play while they faced a chronic, life threatening illness. The three women whom I chose for my sample were between the ages of 45 and 60; within my own age range. I have come to know these women within the past 3 years, in different contexts; my relationship with each is unique. Each woman is committed to healing and each accesses different resources for this process.

Investigating Experience

The shared experience of having had breast cancer allowed me to "be" with these women, in their phenomenon, while respecting that our experiences were unique to each of us. My own reflective process, in the form of diary entries, was included in the text, predicated on the rationale that "reflection means to bend back upon or to take up again what we have experienced, lived through or acted upon prereflectively" (Giorgi, 1983, p. 143). Since I needed to

“come to terms with my assumptions” it was essential that I express any contradictions or beliefs in an explicit manner, so that I did not allow these to “persistently creep back into (my) reflection” (van Manen, 1992, p. 47). This process of “bracketing” can be seen as not necessarily placing “the common sense and scientific foreknowledge about the phenomenon within parentheses” (Kvale, 1996, p. 54), but rather, critically analyzing and clarifying my own “presuppositions” (Kvale, 1996, p. 33; van Manen, 1990, p. 47). What I bring to the research is the viewpoint that we each have the capacity to access resources for healing within ourselves. I can’t explicate what form this takes, not even for myself, but I do believe it is inherent in each of us. That is my belief; my bias.

Reflecting on the Essential Themes

The meanings, or themes, which emerged from the data did so through a reflective process which was predicated on an intensive, spiraling exploration of the data. The semi-structured interview questions served only as prompts to “exact fullness and completeness of detail” (van Manen, 1992, p. 17).

Describing the Phenomenon

Considerable time and effort was involved in the writing and rewriting process. My intent was to capture the true essence of each woman's experience. Prior to transcribing the data, I listened to each audio tape all the way through. I then listened to the tape a second time and transcribed each tape word for word. I listened to the tape a third time and corrected any errors in the text. A fourth review of the tape paralleled the reading of the text, at which point I underlined words or phrases that were emphasized by voice intonation. I made notes of any thoughts or perceptions that came to me while listening. At this point I listed what I perceived to be statements of meaning for each individual. I next broke each text into meaning units which were recorded page by page; I made

more notes and observations while doing this. I then identified themes within the segments, compared these among individual interviews, and synthesized the material. This process of moving between the themes, the segments and the interview data was repeated over and over until the richness of each individual's "essentially human experience" became apparent (van Manen, 1984, p. 57).

Maintaining a Strong Pedagogical Relation

I found it difficult, at times, to remain true to my question. It seemed far too easy to "get side tracked" into other aspects of the process of living with cancer. I continually had to reassess my own analysis of the phenomenon, to be mindful of what I was trying to discover.

Balancing the Research Context

My immersion in the data was, on occasion, so overwhelming that I found I had to print out and study specific parts or segments of the data, in order to find how they fit in the "total textual structure" (van Manen, 1992, p. 33). I frequently lost my way, becoming so absorbed in specific descriptions, that I had difficulty incorporating them into the text in a meaningful way. Van Manen (1980) stated that "writing and rewriting is the thing" (p. 68). It was through the writing and the rewriting that shape began to emerge and I began to make meaning of the data. I was continually delighted at the links and connections which emerged throughout this process.

The Interview Process

The interview process was far more linear. Each woman was contacted by telephone in order to arrange an initial in-depth interview of approximately 2 hours in duration. Prior to proceeding with the interview, the participants were requested to read and sign the "Letter of Consent" (Appendix A) which detailed the central purpose of the study; procedures used in data collection; opportunity

for withdrawal from the study; known risks and benefits and follow-up support (Creswell, 1998). In addition, I answered any questions that the participants had about the study at that time. A debriefing session followed each interview, in order to process the experience and to ensure that any emotional needs were addressed; I also provided my home telephone number. Each participant indicated access to counseling services within the community if needed. I have clinical experience working with children, youth and adults in a variety of community settings, including family medical practice, mental health, hospital and hospice and am therefore sensitive to the emotional welfare of the participants. A second interview of approximately 1 hour was arranged with 1 of the participants; telephone contact was initiated with the other 2 participants and notes were taken at that time and included in the analysis.

Each participant was assigned a code number and each chose a pseudonym for the presentation of the data. The interviews, which were audio taped, followed from five questions (Appendix B), which acted as cues for reflection. Within the process of data analysis, I moved back and forth between the individual transcripts and the literature. As the personal meanings of the women emerged from the text, and as the analysis spiraled deeper and deeper, I found myself become increasingly judicious of which sources most clearly supported the essence and the depth of the women's experiences. This interplay facilitated a greater exploration of the data. When the analysis was completed, I arranged an interview with each woman in order to present my findings, answer any questions and assess any need for support.

Evaluating the Research

What criteria should be used to judge the quality of a phenomenological study? The phenomenological “principle of intentionality” (van Manen, 1992, p. 5), the inseparable connection to the world, emerges as a result of the intentional act of researching and questioning. Phenomenology has often been described as a research method of “procedures” rather than “techniques” (van Manen, 1980, p. 67). Inherent in these procedures is a disciplined systematic analysis of the data, characterized by writing and rewriting and culminating in a text which captures the true essence of each individual’s experience. Validity in a phenomenological research study implies that what has been written captures the true meanings for the participants. Kvale (1996) described it as “craftmanship in research” (p. 236); it is a process that continues from beginning to end; it involves checking, and questioning. Returning to the participants and discussing the findings encouraged verification of the interpretation.

My intent has been to provide a rich and evocative text that exemplifies “precision and exactness” (van Manen, 1992, p. 17) in the manner in which the reader can resonate at some level, with what s/he has read. Richardson (1994) stated that “there is no such thing as ‘getting it right’, only ‘getting it’ differently contoured and nuanced” (p. 521). The inclusion of metaphor, poetry and narrative reflects my endeavor to add diversity while still maintaining a fidelity to the phenomena. Although there are no testimonials included in my work, I have attempted to be credible and respectful in my role as the researcher. Kvale (1996) stated that “validity is not only a matter of the methods used; the person of the researcher, including his or her moral integrity is critical ... ” (p. 241).

CHAPTER FOUR

Walking the Path

The View From the Knoll

“A survivor is one who has faced mortality and emerged transformed, keenly aware of how fragile life is” (Smith & Nessim, 1995, p. 208).

Maggie

“Play is when my heart is singing”. She is the mirthful water nymph; the garden sprite. Play for Maggie is an engagement in which she describes having no restrictions and no sense of time. “It’s just the fullness of the moment. I am enjoying myself; feeling a sense of lightness of spirit; I’m laughing; I’m feeling playful. It’s a time that’s not associated with ‘have to’s. It’s a time associated with wanting to and having choices and not being encompassed by boundaries. I’m not thinking of the parameters of time; I’m in the moment. Often it’s the playfulness that I define now in my life as play.”

Maggie has always “made room” for play in her life; made room for what she finds to be enjoyable. She has always enjoyed walking; “stretching her mind” with reading; theatre; music and canoeing. She has just learned to kayak. She also enjoys being in the water. “When I need to just totally relax and feel like I need to let some things go, water is a place where that’s facilitated; just being in the water, to me, it’s nurturing. And it’s fun. I mean water is such fun. It’s just so playful; it’s so inviting for doing silly things, you know”.

In a previous life, Jan may have been an otter, or a dolphin, or any other sea-dwelling creature, from a jellyfish to a whale! Time after time, during periods of both joy and crisis, Jan has been drawn back to the ocean. The power of the ocean has at times lured her, endangered her, thrilled her and provided rejuvenation. One cannot separate Jan from the ocean; she is bound to it by a strong undeniable bond (DeLong, 1998, p. 8).

Laughter is “a real key” in Maggie's life. “I would never be without it in my life; laughter is very playful; it’s wonderful you know; lots of things make me laugh. Singing in the car, I have a really terrible singing voice, it makes me laugh when I can sing along and no one can hear my really terrible singing voice ... yeah, so laughing is playful and uh, brings out the child too, you know.”

Maggie has a “strong, strong work ethic”. She believes that every human being has to balance work and life responsibilities with play. “I can be a serious person in some respects because of my strong sense of responsibility and my firm work ethic, and, you know the amount of caring I do about other people; the compassion. The work I delve into is very difficult and so again it’s the balance, it’s the emotional balance that play provides for me even in my work now I have times of real playfulness, real playful moments with clients, when we’ll really laugh and it will be just a different kind of exchange and it will be playful and it lightens the heaviness of the work and makes work more fun. I can be in a work situation and stuff piles up ... and someone pops in and has a joke to tell me and I laugh uproariously; we have this playful moment and I go back to my work in a different space and I value that”.

Maggie experiences a deep connection with nature. Her garden is a personal expression of her creativity and joy in connecting with the earth. “I can walk by certain flowers; I can walk by the sweet peas and just smell them and I just feel like, aah; right now I’ve got those lilies that are out with the amazing scent and I just love putting my face in them and I laugh when that orange stuff gets all over my nose and I can’t get it off”.

Maggie describes involvement in play as “using one’s body and reveling in one’s body; reaching and stretching and challenging oneself”. She enjoys the physical challenge of working in her garden. “I really enjoy using my body and

I really feel enjoyment in stretching myself. I enjoy the physical; it gives me a lot of pleasure being physical”.

Maggie has “a wide, wide circle of friends” and a large extended family. She describes “lots of dinner parties; lots of going away together; renting cabins and just going and having laughter and singing and just having good times”. Family gatherings are “a time when there’s lots of laughter and good food and fun and that feels very playful to me. Christmases, birthdays, Easter, Thanksgiving are always times to gather together and have wonderful big family get-togethers”.

The holiday that Jan makes particularly special is Christmas. The special feeling she creates is in the tangible things - the baking of painted cut-outs, creating Christmas dinner, and planning Christmas surprises. But this special feeling she weaves, like magic, has more of an intangible than a tangible quality. It has to do with the spirit, and love and joy that Jan brings to Christmas, and every other occasion. And this makes her one of life’s true celebrators (DeLong, 1998, p. 30).

Osha

“Play is just something that’s done for the sheer pleasure of it”. She is the mystical fairy spirit; the Green Witch. Osha describes play as “something enjoyable; not task-oriented. It’s more frivolous, perhaps and doesn’t necessarily have to have an outcome, you just do it for the joy of doing it. You do it because you want to, not because you have to, and for pleasure or joy rather than some sort of material gain ... it’s me doing it and focused for me ... play involves having fun with other people”.

Osha has always enjoyed walking and hiking and doing those kinds of activities with her son. She attends a weekly yoga class which she describes as, “a really lovely pursuit”. Another of the physical endeavors that Osha enjoys currently is participating on a women’s dragon boat team. “That has been a

very joyful experience; those practices are very, very playful. I laugh just thinking about it". She describes one of the more "hilarious" races. "I started to laugh, because we were going so slow ... when we were doing the finishes, you know, those power tens, I was laughing, you know, I don't believe this, it feels like slow motion".

Osha believes that "creativity is part of playfulness and play" and describes, "using it in a way that can heal me". She incorporates visualization and meditation into her life on a regular basis. "I consider all that to be that playfulness and that ability to be in that place and allow yourself to experience the other dimensions that are around us and just being able to tap into them. I'm not sure you could do that unless you had a sense of frivolity".

As Jan has gone through her process of self-learning, one of the wonderful things that has happened is that a great deal of creative energy has appeared. Jan has always had creative energy, which in the past manifested itself in such forms as ceramics, sewing and cooking. However, the difference with this new surge of creative energy is that it has made itself part of Jan's everyday life. Today, Jan writes in her journal, draws, paints, makes collages, and takes photographs. One of her roles is, quite clearly, that of an artist. Jan is an artist, and an artist is Jan (DeLong, 1998, p. 53).

Osha is involved in a Wiccan group; she describes her experience of being "part of a women's circle doing those kinds of activities" as "fun ... there's a great deal of play involved in that; it's not a very serious pursuit ... we do sing and we do some creative things. We made wands in the spring and that was just a delightful experience ...". She believes that it is the ritual that keeps her connected to the group. "Rituals are in a sense, sort of a way of playing and we've lost a lot of rituals in our world; so I guess for me it would actually be a form of play, those meetings and what we do there".

Osha enjoys many social relationships and these are extremely important in her life. She has a close group of women friends with whom she "goes away,

maybe two or three times a year". She appreciates "finding those things that have brought new and different people into my life ... they enrich my life and that's a big part of my life".

Jan is a wonderful, caring, giving friend. She makes friends of both family members and strangers. For years, she has stretched herself at times just a little too far to help her friends. Today, she is learning to develop friendships that are healthy and truly reciprocal, with people who are willing to give as much as she is willing to give (DeLong, 1998, p. 12).

Anna

"Play is anything that makes me feel good". Anna is the nurturer; the wise woman healer.

Family relationships are paramount in Anna's life. She describes the relationship with her grandchildren as one of the key joys in her life. "We've always been really playful, my grandchildren and I with imagination and building tents and going camping ... when I'm playing with the grandchildren I'm in the present. With Jamie right now, he's 6, we play Bubsy and Babs. Of course he tells me every word I have to say and halfway through I forget it. 'What else am I supposed to say, Jamie?' We go on a train ride or if we're camping we get blankets out and sit under the blankets in the tent. Brenda's 12, and so the playfulness with her now is talking about her school dances and her friends and what's going on in her life and going shopping together which is really fun".

"Having fun" with her two children and her sister also brings Anna great pleasure. "My daughter's a real character at times and we always laugh and joke; we've always been sort of playful ... going out shopping together my sister and I, we'd get in the car and we'd be yapping so much we'd drive way past the

roads we were supposed to turn on because we're so into having a good time and laughing".

Jan is a younger sister. As children and teenagers, Pat and Jan did not always get along. However today, Jan and Pat are extremely close. Most of their disagreements now end with 'oh, just stop!' and 'Pat!' or 'Jan!' and laughter (DeLong, 1998, p. 6).

Anna enjoys the water. She takes pleasure in boating and fishing with her husband. "You're away from noises, from people, lots of people; there's just you and your husband, whoever, in the boat and you know it's quiet and you don't have to talk to each other, you can each be in your own mind and yet there's still the connection there and it's a nice feeling, it's a spiritual feeling".

Jan has, over the last several years, been investigating her spirituality and the place of religion in her life. However, her investigation into spirituality has not been restricted to organized religion. Through writing and reading, thinking and being, and spending time in nature, Jan continues to get in touch with her spirit and her spiritual needs (DeLong, 1998, p. 23).

Anna delights in walking. "It makes your physical being feel good, the adrenaline gets going; I think it makes you feel like you're doing something good for your body ... the being outdoors is awesome. I love that part of it". She has recently learned to golf. "I don't care if I become a good golfer. If I make one good stroke in the whole game I'm happy, because it's just being out there with the trees; the golf courses are beautiful; with people you like to be with, it's fun and it makes you feel good which is certainly a good thing".

Taking time for herself is also important to Anna. "I'll go upstairs and lock the bathroom door and get in the bathtub and take my book and I'll just lay there with my book and enjoy it, you know, that time alone".

Jan has spent so much of her time nurturing others, that she has sometimes forgotten that it is also important to nurture herself! However, she is now learning to nurture herself too, although she will probably never stop bustling around, insisting on nurturing others (DeLong, 1998, p. 26).

Enjoying the company of other women is a vital part of Anna's life. She leads a support group for women who have been diagnosed with breast cancer. "I think every woman should belong to a support group; I think they're wonderful ... lots of times it's very playful and very enjoyable when someone tells a funny story about a prosthesis or a funny story about what a child has said about her bald head. It can be very playful; just being part of that group of women is really special to me".

The Path Diverges

"For healing to occur we must come to see that we are not so much responsible for our illnesses as responsible to them" (Northrup, 1998, p. 45).

Maggie

"Of course we all know our days are numbered, but I don't think we necessarily pay attention to it until you hear the word cancer and you think that you're going to die, and die soon, die before your time". Maggie was diagnosed with breast cancer in September of 1990. She is 56 years old.

Osha

“I never really fell apart, during all that time, you know, in the way that you think; some people just can't believe that you can cope but you do, there's some sort of inner strength or resources that surface it's like, holy shit, Osha, you better get a handle on this fast”. Osha was diagnosed with breast cancer in November of 1996. She is 45 years old.

Anna

“Mornings were bad because you'd wake up and you know, it would hit you again. Oh yeah, I've got breast cancer ... when I would wake up in the morning the fear was, I'm gonna' die and life is gonna' be over, that was the fear”. Anna was diagnosed with breast cancer in September of 1991. She is 55 years old.

Life Stops

I'm sitting in the office and he appears at the door and I know, I know the news is bad. I know I have cancer. I get up and I go with him; we find an empty office and he doesn't even look at me. He sits beside me and he opens up a folder and in the folder is a pathology report and he says, 'I guess you know that this isn't good news' and I say, 'alright, just give it to me' and he starts to read and he reads the words and I'm staring at the pathology report and I'm hearing his words but it's like he's a long way away from me. I'm seeing the words on the paper but I can't take them in, not really and I find myself saying, 'I need to photocopy this report' ... I come back and I sit down and I look at him and he has tears streaming down his face and he tells me how sorry he is ... and I find myself reassuring him and telling him, 'it's okay, it's okay'. It's Tuesday, January 30, 1996, and my life has stopped, but it's okay, it's okay (Personal journal, January 30, 1996).

Looking Back Down the Path

“Illness is the voice of conflict, showing us that some part of our life is out of whack, that disharmony exists, that something is not right. Listen to the voice of your illness” (Pennington, 1988, p. 248).

Maggie

Historically, the link between cancer and emotional states has been observed for nearly 2000 years; it is the separation of cancer from emotional states that is unique (Pennington, 1988; Rossman, 1984; Simonton, Matthews-Simonton & Creighton, 1978). Maggie describes the 2 years prior to her diagnosis as “a very difficult time in my life. There wasn’t lightness; I was into a black, fairly heavy time and that’s not normal for me, I normally have more balance in my life, so prior to my diagnosis play was taking a back place. My life felt difficult and sad and hurtful and there wasn’t the same openness to those moments of play that are provided, that are certainly there if we choose to be open to them”. She became frustrated with her garden. “For a number of years it was just kind of like a work mode and there were times that I’d enjoy it but my son would say to me, ‘Mom, you’re stressing out in your garden, I mean, get a grip, what are gardens for?’ “ She recalled a “close, playful friend” saying to her, ‘Maggie, just lighten up, just let some of it go’ and “I thought, oh piss, she doesn’t understand what this is all about”.

Osha

“Dr. Lewis Thomas once said that he had come to believe that cancer was the physical metaphor for the extreme need to grow” (Northrup, 1998, p. 97).

Osha describes how, two or three years prior to her diagnosis she would have “these little inkling feelings that would say, geez, Osha, you really should change something in your life; you should go out and learn something or you should join something; you know you don’t have any creative outlets”.

Anna

“The purpose of emotions, regardless of what they are, is to help us feel and participate fully in our own lives. To become aware of our inner guidance system, we must learn to trust our emotions” (Northrup, 1998, p. 54). Anna recalls feeling “really exhausted” prior to her diagnosis. “I would say to my friends, ‘gee, do you feel really exhausted, like you’re so tired you just want to sit down?’, and they’d say, ‘no’, and I’d think there’s something wrong with me because I’ve always had tons of energy and people would say to me, ‘how do you do so much?’, so that was a big change”. “I knew there was something wrong in June, I just felt things weren’t right, the body wasn’t. I didn’t have the energy to play with the kids like I had before”.

Foreshadowing

I wish I had written last week; I wanted to but have had no time. I am very, very tired. Why? I returned to therapy last week. It was difficult The pain and sadness have not left me. I feel such a sense of hopelessness now; the only thing that keeps me going is the kids, coming home for Christmas. What a black, black place to be in (Personal Journal, November 22, 1995).

Retracing the Steps

“Symptoms, illness and disease are not, by and large, capricious and random occurrences, but they represent meaningful attempts on the part of the

organism to reestablish a homeostatic balance which has been lost” (Rossman, 1984, p. 240).

Maggie

Maggie recalls participating in a lot of organized play in her early years. “I was a pretty playful child”. Her childhood, adolescence and early twenties was described as, “very physical” and she enjoyed that. Water was always “a part of [her] life”. “I grew up by lakes in summer and had swimming lessons and enjoyed swimming; swimming was one of the play things that I would do”. During a reunion with childhood friends, Maggie recalls a friend approaching her. “She said to me that her mom, one of the things she remembered most about me was, as a child and then growing up, was the laughter; that she felt that I would probably go to my grave laughing”.

Gadamer (1996) described how illness manifests as a state of “unbalance” in the body (p. 55). Maggie recalls that after she married, and her two children were born, “it kind of insure[d] that there was play and lots of playful times and vacations and that sort of thing”. However, she noticed that as her children grew, the balance of play and work “got a little lopsided; being a mother began to feel like work ... there was the fatigue and I know in my mid-thirties to early forties is when I went from being full time parent back to balancing work with parenting and then as my children were needing less and less time, I gave more of my time to work so I think up until my early forties it felt pretty in balance, but there was a fatigue level that was growing and it was maybe because I was trying to be supermom and superworker and superfriend and supereverything”.

Osha

Osha recalls that during her childhood and adolescence she engaged in “a lot of activities that would be considered play”. Games, team sports and dance lessons were some of the playful activities she enjoyed.

She describes her twenties and thirties as a time of “not a lot of play”. “I think because of work, making a living, and too, when I had Adam the role of parenting became very paramount in my life, and I think that in a lot of ways, although it was very pleasurable, it was work”. She recalls “not building in enough time” to pursue playful activities. “I was a single parent that worked full time and between dealing with my work demands and a small child's demands, there wasn't a lot of time left over for me to pursue things ... I don't think I played much at all”. She recalls that during those years, there were some playful times with her son, but they did not have a “regular routine for that sort of stuff; it was more out of the ordinary that we would have those times, doing things that were more playful”.

Osha relates that her inability to engage in playful activities resulted in a sense of “apathy”. Northrup (1998) believed that the purpose of our emotions is to help us actively participate in our own lives. She described how ignoring our feelings “requires our bodies to speak louder and louder to get our attention” (p. 54).

“You know I'd had these 'sort of, kind of' interests. I'd be sort of interested in meditation but never do anything about it; be interested in Wicca and stuff but never pursued it, never even got a book about it, even from the library, just never did”. She describes feeling, “tired, tired with the work of being a single mum and working full time and always just making ends meet.”

Osha recalls a sense of loneliness during those years. Northrup (1998) emphasized that the purpose of the existence of negative emotions is “to let us know we are not facing the clearest path to what we want” (p. 63). Osha recounts that she felt very “isolated” and found it hard to reach out to others. “I was very cynical about people, and I don’t think I believed that people were really kind, that you know there was a lot of meanness and I would really dwell on the bad side of the way the world was ... I think I shut down a big part of myself by becoming a very responsible, proper young adult”.

Anna

Fond memories of Anna's childhood include listening to the radio with her father, “eating cheese and crackers and imagining the characters. It was a really good time for us; it was a lot of fun”. She recalls playing outside and climbing trees as a little girl, and later, during her adolescence, swimming and going shopping with her girlfriends.

Anna recalls her play activities during her early adulthood. “When my kids were little we would sit around the kitchen table for 2 hours after dinner just talking and my son would always play the role of not agreeing with what my daughter and I would say just to get something going and we used to have fun and we would laugh and you know have a lot of fun doing that”. As her children matured and left home she experienced the loss of those playful times. “Then they have their families so you don’t interact quite the same so you try to find other measures of having that feeling of joy in your life”.

Like Osha and Maggie, Anna recalls feeling during those years that it was difficult to take time for herself, and difficult to say ‘no’ to the demands of others. Northrup (1998), described how our relationship with time can cause illness:

In a materialistic, addictive culture, we learn that time is money and that we should spend each minute of our lives accomplishing or producing more and more. Instead of enjoying each moment we have and living our lives fully, we are instead taught at an early age that there is never enough time (p. 364).

Northrup (1998) also emphasized that “the ability to say no to what doesn't support us is an essential part of our inner guidance system” (p. 61). Like Osha and Maggie, Anna assumed a way of being in the world that was not authentic to her true self. “I think because I sorta’ got stuck in what I thought was my role, what I should be and what I should do, instead of what did I really want to do”.

Time

Some other time

my little ones

When dishes done and first load in
and baskets folded.

Some other time we'll bake those cookies
that I promised yesterday

or was it, now, the day before?

Some other time

Some other time

when I don't have to help them out.

You understand.

Attend the meeting

wax the floor

Some other time we'll take that nice long walk together

Some other time

Some other time

My letter finished to Grandma.

It's her birthday soon you know.

Some other time

I'll find the box

within the trunk

for you to see

my brownie badges.

Some other time

Some other time

I promise. yes,
to teach you how to do
that embroidery you got last birthday.

No, it can't be
two birthdays ago.

Really?

Well, some other time soon.

You know how long it's taken me
to sew this dress

I'm nearly done

Some other time

Okay, I'm ready.

What comes first?

What would you like to do the most?

Oh yes.

Of course I understand.

You've got so many things to do.

With who? Oh yes, have lots of fun.

We can always do it

Some

Other

Time

(Personal Journal, November 4, 1980)

Returning to Where the Path Diverges

"Healing requires the individual to examine the challenge and opportunity in illness; the opportunity in illness is to look at life with a renewed sense of meaning and purpose" (Rew, 1996, p. 70).

Maggie

"I saw my diagnosis very much as a wake up-call; I thought, okay, you're taking a lot for granted here kiddo; now it's time to get back to appreciating every moment because we simply do not know ... we have no guarantees".

Osha

"I think breast cancer was kind of, like such a wake-up call, it was like, you better treat every day like it's a gift now cause you just don't know what's gonna' happen".

Anna

"After breast cancer, I think for a lot of us we feel the rest of our life has to go better than it did before; we want it to be the best it can be and by reaching out and having a good time with life, it's going to make it better, and what brings about that change, I think, is because you face the thought of your own mortality and realize that this will happen to everyone, but it's sort of an eye opener to say, I'm going to make my life the best I can make it".

The Pledge

I recognize that I am living, I am alive today and there is great beauty and joy in my world and I'm going to enjoy that. I'm going to acknowledge that none of us has any guarantees about how long we're going to be on this earth. The song says, we're here for a good time, not a long time (Personal Journal, March 30, 1996).

Reclaiming an Overgrown Path

"There lives a permanent child within us all, full of life, enthusiastic, glowing, 'out there' - radiant" (Kornhaber, 1988, p. 29).

Each woman experienced an 'intermission time' which facilitated either a reconnection with joyful past experiences, or a new experience; a new perspective from which to move forward. Northrup (1998) expressed how women may find peace and comfort in a "special place, a place they may have

gone to as children to feel held close by the nurturing qualities of nature" (p. 614). This was the case for Maggie. Conversely, for Osha and Anna, there was considerable fear in moving from familiar ground into uncharted territory. Northrup (1998) stated that,

healthy growth involves getting as many parts of yourself as possible available in the present moment - the now - the only place that healing can happen ... living in the now is a skill that is developed through introspection, meditation, and taking leaps of faith into freedom and joy - one small leap at a time, one day at a time (p. 97).

Maggie

"After my breast cancer diagnosis a friend offered me her place on the Cayman Islands and so a couple of us went for vacation and I spent the whole, well practically the whole vacation floating on the water, watching the fish, watching the coral, just enthralled with the beauty of the world and the softness of the water and the whole sensation of it ...".

Lighter Steps

I'm relaxing and enjoying a retreat, a solitary retreat, at Point-No-Point. This is such a beautiful place. I'm sitting at the table and I'm looking out the window; the waves are crashing in below me. I can't quite see them from this vantage but I can hear them. I can see the water and the trees and all the green foliage that stretches out before me and I think, this is right; this is what should be; this is how I need to be right now - connecting with all that beauty out there and not dwelling on the doubling time of a cancer cell, while I await further treatment. I feel safe here. I don't want to put any expectations on myself, I just want to let myself be, as I am, and do what feels right in the moment. I will meditate though and eat healthy food and walk in the fresh air. I have an image of myself that I turn to ... I'm wearing a red strapless dress and I'm dancing on the shore at Cavendish, Prince Edward Island. I have my arms stretched way up over my head and I'm whirling around and I'm kicking up sand as I go and there's a sense of freedom in the dance that opens me up to all things good and beautiful and healthy ... (Personal Journal, April 13, 1996).

Osha

"A friend of mine had given me a book by Susun Weed, who was a herbalist, who wrote a book called, *Breast Cancer, Breast Health*, and so when I saw she was going to Hollyhock, I was very intrigued and so I decided I would go. The title of her workshop was, *Green Witch Week*, and some of the things in the synopsis about it were that we would play with the fairies and so that really spoke to my heart quite strongly when I read that ... and that we could, and it was written as could, initiate ourselves as Green Witches at the end of the workshop; that was optional. I had no idea what that meant, but it didn't matter, I was going the actual going to that was maybe more, very anxiety producing, because I had never gone off by myself somewhere where I didn't know anybody, and, uh, and then the five days was just pure play, it was just play, constant play. We sat in circles and sang and it was lovely just to learn these songs that she taught us ... so that to me was like a huge, huge part of my recovery, was those five days of just allowing myself to be immersed in something completely foreign to me. I'd never had an experience like that before or been open to it".

Anna

"One particular time when I had a really bad chemo and it was the second week past, and my husband was going away on a business trip and he said, 'why don't you come with me?' and I said, 'no, you know I wouldn't feel secure, I feel secure here; you know I might get really sick' and he said, 'why don't we take Brenda?', our eldest granddaughter, who at that time would have been 4 years old, and I said, 'yeah, that would work'; so away we went and she got a whole pile of dinosaurs because she was into dinosaurs, and she and I, we just got into

the pool at the hotel and we just played dinosaurs and it was just wonderful and took my mind totally off myself and my breast cancer the 2 days we were away so that really helped as another focus, but it was a joyful focus too”.

Embarking on the Newly Cleared Path

“When you move toward that which is most fulfilling and life-enhancing, healing follows regardless of what your health is like in the moment”

(Northrup, 1998, p. 52).

Maggie

Maggie's vacation in the Cayman Islands was a turning point for her. “All the bad stuff was in the past”. Her joy in her garden was rekindled. “As a gardener one can get very serious about the work that has to be done ... at one point I would just get overwhelmed by it all and it would just seem like, really hard ‘cause there was so much and so I would go out and I would work in my garden; now I go out and play in my garden”. Northrup (1998) described how clearly articulating one's needs can be healing and fulfilling:

.... it feels good in our bodies to think about and dwell on what we want and why. We get excited and are inspired automatically by these thoughts and feelings, which in turn keep us in touch with our inner knowing and spiritual energy. The result is enthusiasm and joy (p. 60).

Maggie expressed how she has silenced the critic within herself. “When that feeling comes up of, oh, there’s so much to do, I bring it right up to my consciousness and I say, this garden is for enjoying, this garden is for your pleasure and so then I just let that part go so whatever I do today I am simply going to enjoy here and I am not going to worry whether the big picture gets

completed or not ... I can be out front and always people walking by and saying what a gorgeous garden it is, what a lot of work, and I say, no, it's a lot of pleasure and I really mean it because the work that I do in it is now pleasure".

Maggie has experienced an enhanced reconnection with her body. In describing her experience with cancer, Johnson (1987) articulated how one could expect her body to help her to live well after cancer. "Your body, after all, is a heroine as much as you are. You and your body have come this far together. Together you must make it worth all the hard work of surviving" (p. 108). Maggie described the changes she has experienced since her diagnosis. "At times I would very much enjoy doing physical (activities) but at other times I would just get tired doing physical (activities) and it would become physical work rather than physical play, and so there's been a shift for me. It doesn't mean that some physical work isn't physical work, but a lot less of it is now, because I'm just enjoying using my body and challenging my body in a different way; feeling the strength in my body gives me pleasure and at one point I don't think I thought about it before my diagnosis, I just didn't pay attention, because I took it for granted".

"Every adult needs to find their own source of play individually and in groups, and to feel able to put aside time for these activities without feelings of guilt" (Jennings, 1993, p. 187). Maggie describes a tea party that she hosted for two friends of her daughter and their children. "One has a baby and one has a year old, and they don't know very many young moms, so I decided to have a tea party and introduce them to each other and of course my daughter wanted to come too, so I had to bake chocolate chip cookies for them which I haven't done for years ... I had a wonderful time playing with these darling little children and got Willie the Worm out for the 1-year-old and discovered why there was

this great, very gross string around Willie's neck is because little ones love to pull and I'd forgotten about that and the baby pooped all over my t-shirt which just made me laugh, it was so sweet ... during that time my daughter's friend had unplugged the phone so the little 1-year-old could play with the telephone and then a few days later the phone rang and I went rushing over to the phone to answer it and then it was dead and I couldn't figure out why it was dead and I remembered and so I just burst out laughing". Jennings (1993) stated that in personal play

the individual gets up and takes full active responsibility for creation with mind and body ... but having been done with the full body and enactment, unless filmed or photographed, it is ephemeral, it is gone-disappeared into the mists of time. But the experience is still inside of you. No one can take that away (p. 192).

All these experiences connected for Maggie, "because the enjoyment of playing with the little ones, and including the baby, blowing bubbles and what not, then gets brought forth a few days and brings a smile back to my face".

Celebration

Today is my 48th birthday. I can only remember ever having one birthday party, when I was 10. Today I will have my second. I have invited my girlfriends; we'll have champagne and lots of good food and birthday cake. Together we'll celebrate my life (Personal Journal, April 8, 1996).

Osha

Osha describes how, after her diagnosis, she took a period of time off work during her treatment and recovery. "I had the time, and again, time is a big factor, for some new things and to allow myself to delve into new pursuits". Northrup (1998) believed that our "inner guidance" directs us toward "that

which is most life enhancing and life-fulfilling" for us (p. 50). "I think there was need; I think it was a need to increase the quality of my life ... something changed in me that allowed me to look at different possibilities in my life; that I didn't have to have such a prescribed life".

Imber-Black and Roberts (1993) described how rituals "can declare in action" that a person has moved from illness to health. "Sometimes very important changes take place, but remain unacknowledged recovery from medical or psychiatric illness is an aspect of change that is seldom marked by ritual" (p. 35). Osha's experience at Hollyhock, her initiation as a Green Witch, and her subsequent embrace of the Wiccan tradition was a pivotal point in her healing. Northrup (1998) stated that part of any healing is "letting go", relinquishing the illusion of control (p. 633). "That was something completely different than I would have done before. I mean, I just wouldn't ever have done it. I mean I always was sort of interested in those things and I thought, yeah, that would be nice to do those things, but I never would do it ... I think that for me what has happened over the years, and it has happened over a number of years is that I've become very inhibited and very aware of maybe how other people would view me if I did certain things and so I think I shut down a part of myself that allowed herself to have that kind of fun, and, freedom to do things and in those 5 days it was just like it all came bubbling out of me again to just have fun and not care what people thought, and it didn't matter, there wasn't a sense of being judged in that situation for, you know, for putting sparkles on your face and putting flowers in your hair, in fact you know, we all helped one another do that". Pennington (1988) stated that we all need help from time to time, "in developing a positive stance, in establishing our openness to and acceptance of whatever is life-affirming in nature, other people, and ourselves"

(p. 243). Osha's connection with the other women and her willingness to risk exposing herself to others in a completely new way revived a part of herself which she had closed away.

Resolution

I need to once and for all get over my fear of flying. There is so much I want to see; so many places I want to visit. I will buy a ticket to Edmonton and I will go and visit Julie and we will play together in the way that we could not before, mother and daughter (Personal Journal, March 12, 1997).

Osha recalls how even the pleasurable act of walking in the woods "changed after I'd had cancer into something much more".

"In the spring when I was having radiation, I actually went to Mt. Doug Park; we went twice a week and we did qi gong meditative walking, in among the trees and that was just joyful, it was a joyful experience. There was just something really healing, it was healing doing that. It was just, it was a lovely experience and so different, it was something so different and foreign to me and so it just really filled a part of me that needed something almost sort of mystical in a sense; there was a mystical sense too because I'm sure that he couldn't actually say what was happening to you ... he was playful, the man that taught us, he would jump out from behind the trees, so I mean it was funny, there was humor involved with it too, you know". "I guess it didn't have any purpose, besides giving pleasure to me, is how I saw it ... I know that it was a very significant part of my healing process, a very significant part of it".

Kornhaber (1988) stated that fantasy is the "springboard of creativity", a conscious activity that is the "serious stuff of existence ... these higher fantasies are rich in content and color, full of wonder and creativity" (p. 108). Osha describes her experience with meditation and visualization when she created a visualization for herself while receiving her radiation treatments. "Everyone had

said that radiation was going to be really hard on my skin and burn and so I decided that I had to find a way to lay there and have some different experience while I was having radiation and so I created this image in my mind where I was actually in a meadow and it's very weird, it would be really sunny, and I guess that was kind of the radiation, but the fairies would come and there was always the main fairy, I guess the queen of the fairies who would hover mainly around my face and whisper soothing things into my ears and then the others would dance around my breast area that was being radiated but what would happen then was a really gentle, gentle rain would fall on them, as they were dancing, and on my breast and then a rainbow would appear, because the sun was there, but there was rain to cool my skin and the rainbow of kind of hope, or whatever. I did that every time I went in for my radiation, and I never burned, I never blistered. I never had any problems with the radiation and I had the three boosts, too, which are supposed to be very hard, but I never had anything, it didn't bother me at all and I'm convinced it was the fairies. I've even told people that the fairies took care of me".

Visualization

Hello Linac 10 - gray appointment card. I wait for over an hour today for treatment. Dr. King has to remark my breast for the electron boost, the beam that slices through the incision to remove any lingering cells. Lingering cells. I visualize little cancer cells in fedoras and pin-striped suits hanging around with their hands in their pockets. I envision them conversing. 'So, how's it goin', it's been getting' pretty hot around here don't ya think?' 'Yeah, I been thinkin' about movin' on, what about you?' 'Yeah, me too, but I notice they got the area blocked off. There doesn't seem to be a detour set up yet. Feels like they're movin' in.' Where does this ridiculous image come from? I don't know ... I use the humor; I use these bizarre images to get me through the last 2 treatments (Personal Journal, May 21, 1996).

Osha describes how her body feels "physically well" and "strong" and her engagement in playful physical activities has "enhanced it". She has made a more conscious effort to walk regularly since her cancer diagnosis. Others have

noticed a change, a metamorphosis. Paddling on the dragon boat team “has been just amazing ... a friend of mine actually said to me this summer, ‘it’s been so good for you to do that; I see such a change in you since you’ve done the dragon boat’ “. Similarly, she recalls how yoga has been “really good ... in my last session, before we finished in June, Leslie actually came over to me and said, ‘can you see the difference in your body since you started’ and I said, ‘absolutely’ “.

Anna

Anna's trip with her granddaughter provided her with a push toward “normalcy”, which she had not felt since her diagnosis. “Play brings things back in focus for you and brings back the normalcy”. Northrup (1998) stated that “our body heals best when we're living in the present ... when we're truly present we can heal almost anything” (p. 98). Anna recalls that when she was going through the treatments, “at times it would feel like you were on the outside looking in, to what was going on, but when I was with the grandkids and playing and at other times as well, it didn't feel like that. I was in the present, I was there, I was in the present ... that trip brought it back and I realized how beneficial it was to keep doing that and after that I arranged with my daughter-in-law that every Wednesday, she would come over with the children and we would interact ... it just made you sort of realize that life can be normal at times and that was a normal time for me that felt really good and sorta' motivated me to go to the next treatment and you know, keep on going ... you could do it and you could forget the cancer, forget death, about the fear, about the whole ball of wax with the breast cancer”.

In her article, ‘Touchstone: Finding a Lump in the Breast’, Underwood shared a quote by van den Berg (1980): “The healthy person is allowed to *be* his

[sic] body; he is his body. Illness disturbs this assimilation. Man's body becomes foreign to him ... the body has become unfaithful" (Underwood, 1990, p. 200). Play helped Anna trust her body again. Northrup (1998) described how trusting the wisdom of the body is "a leap of faith" in a culture that fails to acknowledge how intimately the mind and body are connected (p. 44). "I think that takes a while to learn to trust ... I think when you're, when I'm playing with the grandchildren, I'm being physical with the grandchildren, it's a good feeling". Anna and her husband started walking every day when she was going through her chemotherapy. "I think just being physical with the body, being with someone else that you cared for and being able to enjoy something, feeling the joy of life again, you know that there's something still in there, you're not just breast cancer, there is more and I think it gave me a feeling of a future ... the fresh air, the walk, the conversation, was enjoying the day and the scenery, you know it made you feel good; it made you realize there were other things to appreciate. When you get your mind into that place you sorta' open up, and you can appreciate everything around you more; it just puts you in a better place".

Anna describes how her social relationships with people have altered since her diagnosis. Northrup (1998) emphasized that it is "never too late to start saying no to those things that drain you and yes to those things that replenish you" (p. 61). "I think play is important; I think what I learned from having breast cancer was, you know, to make the most of each day and making the most of each day means enjoying the day, so you know, having more joy in your life, going out for lunch with friends, making sure you keep in contact with the people that you enjoy being with and not being with the people who you don't enjoy being with, that's important too".

Her connection with a support group has been a new experience for Anna. "I think with the healing process you really need to reach out and find all those things that are gonna' heal the emotional side of the breast cancer and connecting with others ... I think really helps that healing process". Northrup (1998) described how many people with illness come together "to share not only their tears but also their joy and their laughter when we gather together as women, we each hold a piece of the whole story" (p. 625). "Being a part of a group, which I had never been before ... I think just listening to other women, hearing their stories, what they do and what they read, just really opens you up to the possibility of other ways of looking at things and believing other things". Northrup (1998) also suggested that we heal faster together than when we are isolated. "Group members hold up a mirror for us so that we can see ourselves more clearly" (p. 626). "I think I have opened up so much to other ideas about life where before I was pretty regimented in my thinking. This is the way things were and this had to be factual and I realize that's not the way it is at all".

Anna has experienced a new sense of independence since her diagnosis. Northrup (1998) described how women in this culture have not been encouraged to state their needs and to pursue their ambitions:

We have been taught to distrust something if it is too fulfilling or too much fun ... our culture has too often taught us that it is selfish to have our own wants and dreams and to enjoy ourselves we have been brought up to avoid being seen as selfish at all costs (p. 60).

"I used to feel that taking time for myself, doing things for myself was being selfish, and that changed, that really changed a lot all of a sudden the light goes on and you realize, I'm not going to be a bad person if I say no, that's okay, it's okay to say no and it's okay to go out and do the things you want to

do ... I didn't want to be there anymore, I wanted to change; these were the things that I wanted to do and then I came to the realization that hey, you can do them ... a lot of things maybe, I used to feel I can't do that because so and so can't do it ... I think you know, just saying, 'I'm going for a walk' and not inviting your partner or anyone to go along, because sometimes you need to be by yourself and enjoy it on your own".

Pausing on the Path

"We must learn to trust that the symptoms in the body are often the only way that the soul can get our attention" (Northrup, 1998, p. 45).

Maggie

With the diagnosis of cancer, Maggie realized that she needed to make some changes in her life. "I needed to really take every day and find the joys in every day and find the beauty in every day or find within every day what I call gems. Gems can be anything ... I think of sitting on the deck and a colourful bird comes along and I'm just learning about birds and my heart opens up and I feel, like, wow, that bird is so wonderful, or look at the hummingbird, the hummingbird is just sitting on my clothesline. It's a gem ... often they're something associated with nature but sometimes you know, the phone will ring, and it will be someone with a story or someone with a joke, or just some connection that makes the moment feel really vital and alive and great ... gems put me in a, for the most part, in a playful mode, or put me in a place of greater appreciation and thankfulness and that's always to me had a quality of play about it, uh, because play is enjoyment and play is when my heart is singing".

Osha

“We have so much lost sight of what’s really important in this world”.

Osha recalls visiting a brook in Nova Scotia with her sisters, and preparing a visualization for a friend. “The bugs there were unbelievable, the black flies and mosquitoes, but they never touched me. My sisters had to flee to the car because the black flies were biting their legs and I stayed down there by the water where they were and never had one bite. So it was my magical place you know, and there is a mystical part of that you know, and I consider that to be, those things are the essence ... the essence of what life is maybe supposed to be for us ... the essence for me are those simple but really delightful and meaningful moments that happen to us when we allow ourselves to have them ... and so I need to stay in that place of allowing myself the time to do that, and then I just find that my heart stays very open ... and so it’s like, geez, Osha, you know, like just remember that this is the stuff that’s important, this is the essence; the other stuff is all just frantic nonsense”.

Anna

Anna describes the “really special gifts” that she has received from having breast cancer. “You know, learning how to take care of myself, learning to take the time for myself and really believing that it’s okay and it’s the right thing to do for me; meeting all the other wonderful women that I’ve met through having had breast cancer that I wouldn’t have before; being part of a group which I just love”.

Reflections

New friends, good-bye to others. Letting things go. New job-realization of a dream - so many blessings. Dragon boating! More new friends. So many wonderful experiences. School - continuing with less focus - more things in life

and living of importance. I am grateful for all the blessings I have experienced this year. I feel tired and renewed at the same time. Each day, each minutes is a moment to be savored and lived fully. My goals for 1998? To live fully - in the moment - in optimal health. To love and be loved - give and receive. To exercise my body and quiet my mind-therapeutic touch, meditation. To continue my new love affair with clay and art and photography. To be. To experience (Personal Journal, December 31, 1997).

Climbing

“New perspectives engender change, and illness seen from a more positive point of view can create opportunity” (Pennington, 1988, p. 248).

Maggie

“I have to be vigilant ... I do fall back into the old way, but I recognize it now sooner and then I do something about it because I always say to myself, now you can't afford this, you no longer can afford to be careless about this”. Pelletier (1977) explained that becoming conscious is an essential component of the healing process. “Once an individual adopts the concept that (s)he is an active and responsible participant in the process of self-healing, (s)he is no longer the passive recipient of a cure” (p. 33). “ It's so easy to get into a place where it feels like we don't have choices and of course we do, and when I get into a place of feeling like I don't have a choice and I'm taking on more and more and more and it's feeling like a huge weight on my shoulders and I'm not getting the pleasure or enjoyment; I'm not having as much laughter and fun, uh, that to me becomes the signal and since my diagnosis it is a signal that I have to look at this, I have to do something about this, I have to make some shifts here, and I don't think that happened to me before. I think I just sort of let it snowball and if a shift happened, great, and if it didn't I just sort of knuckled under and worked harder”. Johnson (1987) stated that true acceptance of one's experience and the

ability to create new goals is “coming to terms with reality, and going on from there ... acceptance is coming out of the wilderness and back into the light”. Maggie describes how she “became more conscious rather than falling into a pattern; I felt like I needed to be really conscious about what I was exposing myself to; to what degree and was I able to keep the balance of the happy, fun times, and so not to allow myself to go down just a dark path but to be able to constantly move into the sunshine”.

A New Direction

I reflect on my life, living it fully every moment and recognize that my pace over the past months has not been a healthy one. I feel I’ve been living in chaos - running from job to job - place to place - and I know that it is not a healthy place for me to be. I must change it. It is a beautiful day. I’m enjoying just sitting here and drinking my coffee and feeling the sun on my face and body. I have to believe that the cancer is gone. I have to believe that I will live a long and healthy life ... (Personal Journal, April 26, 1998).

Osha

“I don’t think it would have been enough just to have treatment, I think that I had to have a shift because I think that I was, uh, I don’t want to say rotting because that’s too harsh a word, but I was stale inside and I needed to be awakened again and enlivened”. Northrup (1998) described how we sometimes “kill the messenger of illness” by ignoring it, or suppressing the symptoms. She believes that we need to examine our life “with compassion and honesty while cultivating detachment - which simply means caring deeply from an objective place” and from this place “identify those areas of (our) li(ves) that require harmony fulfillment, and love” (p. 593). Osha recognized that there was an inner conflict, a need for change which penetrated to the very centre of her being. “There’s no question in my mind I would never have done the things that I have done since I had cancer. If I hadn’t had cancer I would have just carried on in the

same vein, I'm sure ... I've allowed myself to explore many different things that would enhance the quality of my life, is how I see it, and so all those things that I do now, like work and parenting, are play. I've built in all kinds of things that I would never have dreamed of doing before I had breast cancer".

Anna

"I've talked about the gifts from breast cancer and that wouldn't have happened without breast cancer, I'm sure. It would have taken something like breast cancer to make that happen". Crawford (1991) presented her sister's reflections as a testimonial to her healing from cancer:

To this day, the word, 'cancer' carries for me a meaning of transformation and regeneration. As odd as it may sound ... I am glad for my sister's suffering. It created a stronger, spiritually centered woman who embraces her life genuinely and contentedly (p. 4).

Anna stated that there were many times when she questioned, 'who am I?' "I wasn't Anna, the mother, the wife, um, that person for me felt like it was in the background, like where'd she go?, um, brought about by fear and the whole emotional part of having breast cancer. And then, I think, it evolved along the way, the healing process, the further past the diagnosis and treatment, that finding me again, but a different me, you know, that had gone through a lot of changes, but a me who I liked a whole lot better and was more comfortable with, really, than I was before ... I guess it all goes back to, you know, just knowing that the rest of my life is going to be as self-fulfilling as it can be and that doesn't mean that that's at the expense of other people".

Arriving at the Knoll

“No matter what has happened in her life, a woman has the power to change what that experience means to her and thus change her experience, both emotionally and physically. Therein lies her healing” (Northrup, 1998, p. 41).

Renewal

So many fears faced and confronted; so many changes. My fears of December 1995 realized - breast cancer. A terrible sense of aloneness; many strong steps forward ... the realization that I cannot, could not continue in this marriage any longer. I felt as if a part of me was slowly dying. I do not know where I am going; the cancer has taught me to enjoy each minute - to savor and squeeze every ounce of joy or pleasure or fun that I can out of it. I live; I love. I will BE and I will continue to try to grow and to reach outside of myself (Personal Journal, December 31, 1996).

Walking the path has been an adventure unique to each of us, and yet, the journey with breast cancer has resulted in special meanings for all of us collectively. Now, as we arrive at the knoll, together, in the present, we can reflect on the healing that has taken place, clearly visible in some of us, in others, perhaps not so easily discerned, a quieter, less ebullient manifestation. We are different women now than when we began. As Ferguson (1995) noted, “(we) no longer see with the same eyes” (p. 74). Each of us has experienced a profound loss, however within the death there has evolved a new awareness of life and appreciation for living that is indefinable in its magnitude:

Our ordinary walking life is a bare existence in which, most of the time, we seem to be absent from ourselves and from reality because we are involved in the vain preoccupations which dog the steps of every living (wo)man. But there are times when we seem suddenly to awake and discover the full meaning of our own present reality. Such discoveries are

not capable of being contained in formulas or definitions. They are a matter of personal experience, of incommunicable intuition. In the light of such an experience it is easy to see the futility of all the trifles that occupy our minds. We recapture something of the calm and the balance that ought always to be ours, and we understand that life is far too great a gift to be squandered on anything less than perfection ... (Merton, 1992, p. 42).

Phenomenological research refutes a summary or conclusion. However in the sharing of our pilgrimage on the path, several common themes have emerged from our experience.

Integrating Play Into One's Life

Play has become an integral component of each woman's life, in a way that it had not been before. It has moved far beyond something that one should make time for; something to be saved until the end of the day when all other tasks, more important tasks, are completed. Maggie describes how she sees play "in a much wider definition" in her life now. "We get caught up in only seeing play in a certain way and so you know if physically I'm not able to play in the same way that I was able to play at one time or that other people my age play, sort of thing, we then feel limited that we can't do it; we have to be really open to all the different ways that play can be in our life and not be restricted according to, you know, how we are at any given point".

Osha describes how bringing play into her life helped her to cope through "a very traumatic time" and how she continues to build on that and bring more and more of those kinds of activities that are "nurturing" and "fun" and "good for [her] soul", into her life. "The experience of breast cancer forced me to look at how I was living my life and include a lot more activities that were more

fulfilling to me and those activities tended to be things that I considered fun and playful. It's something I think I've really incorporated into my life now and it's become part of who I am since I've had breast cancer". She doesn't believe that she would have "survived" breast cancer if she hadn't made those kinds of changes and brought those playful activities into her life.

Anna has truly internalized playfulness. "I don't think of it [as] I've got to do this today so that I can have something playful in my life. I don't think of it that way anymore. It's just what I do; it's just who I am. I don't think it's a thing that I think about doing, it happens. But back when I was going through the hard time I did have to, force [my]self to do it, like go on the trip with Brenda. I didn't want to do it but I did it".

Reconnecting to Childhood

"Resurrection" is defined in the Oxford Dictionary of Current English (1990) as a "revival after disuse or inactivity or decay" (p. 638). The vehicle of play has rekindled, in each woman, a reconnection with the earlier self of joyful childhood pursuits. Through play, there has been a resurrection of the playful child each once was.

"I'm still a playful child indeed". Maggie describes how she has "gone back" to an earlier part of her life "because of the wake-up call. I've gone back [to] my childhood and early 20's, you know when I was very physical, and enjoyed that". Northrup (1998) believed that our biological memory has already been encoded; intellect can bypass us directly. "... we can be sure the events of our childhood set stage for our beliefs about ourselves and therefore our experience, including our health" (p. 39). Maggie describes how being in the water at the Cayman Islands facilitated her healing process and helped her to

reconnect with her early years. "It can be in the Caribbean and looking at the beautiful gorgeous stuff under the water or it can be you know, here, just feeling the velvet of the lakes, or, you know, the cold of the ocean, whatever it might be, but just, it really brings the child forth, I feel a real healing".

Osha's playful experiences at Hollyhock put her in touch with experiences of childhood joy. "It was like, wow, this is just so cool to be like a kid again, that's what it was like, it was like being a kid again and being very free, a sense of being free and uninhibited and it was a group of only women and I think in some ways that made it easier to be that way. We were very, and I would use the word playful, the whole thing was very playful and then the experience of just being at Hollyhock, too". Singer and Singer (1977) posited that a childhood rich in fantasy play also lays the foundation for an adult life "with well developed imaginative and playful capacities, and with adaptive skills useful and necessary in dealing with a complex society" (p. 4). Osha believes that the fairies which she created for her radiation were summoned from her childhood. "I suppose in a way there's something that was always just hovering, in my mind, from the time I was a little girl, I was always interested sort of in fairies, but I never knew they would come, you know, at a time of need and be able to create with my mind these wonderful images of healing and love".

Anna's playful connection with her grandchildren evoked pleasant childhood memories. Singer and Singer (1977) described how as adults reach out for a child in imaginative play, "they will find themselves coming back into contact with long-forgotten fantasies, wishes and games, hidden in secret recesses of memory like little private hideaways under stairs, in attics or in woodland groves children love so well" (p. 16). "Some of the play things that we do, I remember from doing as a child and it sorta' takes you back to being a child

again, when you play, you remember, you know how to play. You remember how to use your imagination again, and talk like someone else and talk in a crazy voice". Singer and Singer (1977) also described the exhilaration of observing and playing with children, " ... you can recapture your past innocence and simultaneously cherish the thrill of being *you* - an adult still capable of fun and excitement, and you can rise from the experience afresh, with a new sense of lightness and delight" (p. 24). Anna's experience coincides with the "recapturing" of her childhood, when she joyfully listened to the radio with her father, "imagining the characters".

Expressing Spirituality

A deepening spiritual connection was common to each woman's experience of healing through play. Play and playful experiences allowed each to transcend the present moment and achieve a sense of connection between herself and the greater universe. Each spoke of an opening of her heart; a sense of connection to something greater than herself as a result of her experiences. Remen (1988) stated that the most important thing in defining spirit is the recognition that spirit is neither moral, ethical, psychic or religious. It is "an essential need of human nature. There is something in all of us that seeks the spiritual; this yearning varies in strength from person to person but it is always there in everyone. And so, healing becomes possible" (p. 7).

Kornhaber (1988) queried that the existence of spirit had to be "scientifically proven" in order to be useful and credible:

Lack of scientific proof doesn't mean lack of existence ... your own 'proof' is your experience. Have you ever wondered when you enjoy something

what part of you does the enjoying ... what part of you savors and suffers life? (p. 9).

He described several spiritual imperatives, closely intertwined, which when fulfilled result in "feelings of joy, even of ecstasy ... this can happen with 'organic' experiences: the birth of a child, a walk in the woods, an outstanding achievement ... " (p. 94). Included in these imperatives are: a need to give and receive love; harmony within the self and between the self and the world; communion with creation; artistic expression in some form; the imperative to learn and the will to exist in the world and to celebrate life. These parallel the playful experiences of Maggie, Osha, Anna and I; each of us identified, within our own play experiences, one or all of these imperatives. Kornhaber questioned whether spirit is "life itself or something separate from life?" (p. 15). He queried further,

does it manifest itself in a person at a specific point of development or does it enter each of us with our first breath and leave us with our last? Could this intangible thing called spirit ever be given substance - even a little - so a person could consciously use its power within the self? (p. 15).

I believe this "substance" is play. For each of us, there has been an inseparable affiliation among early playful experiences and current pursuits, linked by an overarching sense of spirit.

Northrup (1998) believed that "the very essence of a life based on inner guidance is abundant delight and joy" (p. 66). Maggie's spirituality has "been growing" all of her life. She speaks of play as, "what is joyful". "Play involves a delight of the soul". Epstein (1994) stated that,

the present moment is the place where there are no disquieting emotions. In the present is calm, peace and a feeling of happiness. When we become

light, our whole being is lifted, and our immune and hormonal systems are up as well (p. 145).

Maggie describes how “play brings my heart into that moment, whatever it is. It’s a matter of opening to it; relaxing enough to let the light in.”

“Emotionally, that’s where the lightness comes in, so the actual being playful, the opening up, the expansiveness is what makes my emotions feel so much lighter and happier and more peaceful, just better. But before the diagnosis you know, when the emotions got all lopsided, um, there wasn’t as much play to balance it. There was a real change after the diagnosis, because I wanted more, I knew I needed in order to survive the diagnosis, I needed to have more balance in terms of just not having a lot of emotional lows but having a lot of emotional highs or ongoing times of fun”.

Osha experienced a “lack of spiritual connection” prior to her diagnosis of breast cancer. Csikszentmihalyi (1975) described how certain “states of rapture” share the characteristics of flow with play and creativity. “These include almost any account of collective ritual ... ” (p. 44). Osha attributes her experience at Hollyhock and her subsequent involvement in Wicca, as precipitating a new connection; a spiritual awareness. Remen (1988) described ‘spiritual isolation’ as “living with a closed heart” (p. 8). “I think what happened was just that my heart was just allowed to become open again”. “I don't think that one can have those kinds of experiences and experience a lot of kindness from people and love and compassion without having their own hearts open as a result of that; I mean you just can't stay closed in the face of all that around you. You wouldn't want to, and I think when your heart's more open, you're more open to the playful side of life”. Osha recalls how this feeling came up more frequently during

“what I would consider play, which would be visualization work, therapeutic touch, kind of stuff. I’m much more conscious of my heart during those times”.

Anna’s connection with the support group facilitated the evolution of a new sense of spirituality for her. Remen (1988) stated that “religion is a bridge to the spiritual - but the spiritual lies beyond religion. The spiritual is inclusive. It is the deepest sense of belonging and participation” (p. 7). Anna describes how she “never did a lot of spiritual work; for everybody spirituality is different”.

Hover-Kramer and Shames (1997) differentiated between religion and spirituality: “... spirituality is very individualistic, a unique reflection of the person’s inner search for meaning” (p. 117). Anna reflects on the depth of her own spirituality with the circle of women. “Doing the healing circle in the group and holding hands and you know, it not being a religious type of thing but a spiritual type of thing where you can feel, you can feel that sense of strength in the group, you know. That’s really spiritual. You know, to connect with that and to think, there is more there.” Reeder (1994) described the essence of a healing ritual with a quote by Achterberg, in which she confronted the duality of the healing ritual, the giving and the receiving of care:

The other duality of healing ritual is that in transcendent moments one is reminded both of the grounded, unitive connection in the flow of all life and at the same time, one can perceive revelatory visions that are far beyond the life experience itself (p. 158).

Pursuing playful activities within nature also facilitated a spiritual awakening in Anna. Breathnach (1995) described how she “walk[s] regularly for her soul and her body tags along” (p. 62). Anna agrees. “I think you know when you’re out in the fresh air and walking with someone who cares it’s a spiritual feeling, you know, it feels good, it feels good”. Rew (1996) defined

healing as, "a process of recognizing a unity of life" (p. 88). Anna concurs. "It comes from the heart and the soul and the mind and the emotions all together. I think the really important thing to me now is love ... maybe at that moment you're loving yourself; you're loving the universe".

Transformation

Engagement in playful activities during diagnosis, treatment and beyond has provided a shift for Maggie, Osha and Anna that has been transformative, in the manner in which they view themselves, and interact with others.

Pennington (1988) described how one acquires a new, fresher perspective as a result of illness. "A confrontation with illness can mobilize your resources for healing; most important, it can inspire a dramatic shift in values" (p. 248). Each woman expressed how they had cast off previous expectations and assumed a new role since diagnosis. Maggie expressed her need to shift from being "supereverything"; with the diagnosis she realized that she "needed to make some changes". She recalls that this "way of being in the world" had provided "gratification" for her in being the very best she could be. "But what I never looked at was the cost". Among other aspects of her life which have changed, family celebrations have assumed a more casual mode for Maggie since her diagnosis. "(I'm) going to have a family dinner, and it can be a lot of work getting it together, I only do it now if I can feel like I'm loving what I'm doing. If I can't then we'll order in food and I won't try to make a meal".

Osha describes feeling "more vulnerable, emotionally" as a result of building in all the playful pursuits that she has. Remen (1988) has noted how frequently the process of physical healing "runs concurrent with the healing of the heart. A greater altruism, a greater compassion, seems to occur in different

people ... " (p. 9). "Being vulnerable, not being shut down and closed about it, I think that my own sense of compassion for others has been enhanced, by you know, by the visualization, the meditation, that stuff has made me far more compassionate". Osha continues to pursue intuitive meditation, in order to employ it in the work she does with adolescents. Northrup (1998) believed that the mind and soul permeate the entire body, and are "much vaster than the intellect can possibly grasp". She also stated that "our inner guidance comes to us through our feelings and body wisdom first-not through intellectual understanding only" (p. 31). Osha's newfound wisdom and energy reflects this belief. "Something I've learned in the last 3 years is that heart is the connector to a lot of things and I just need to, I need to stay on that path ... it is the path I'm on and intuitively, I guess there's some sort of intuitive feeling, that's the right place for me to be and I think that I allow myself to be there more and more through playful pursuits, not through an intellectual analysis of it".

A renewed sense of self and an enhanced sense of self-love has evolved for Anna, since her diagnosis, through her involvement with playful activities. She describes "the playful Anna" as someone who "can be who she wants to be and do what she wants to do and that's okay". She has experienced a sense of freedom to be [her]self, "a feel good freedom, a pat on the back type of feeling". Her newfound independence to "be yourself and do your own thing" evolved slowly for her. Rew (1996) described healing as "a new awareness that is created out of breakdown in the natural wholeness and harmony between a person and the universe" (p. 133). Anna reflects, "when you're sorta' becoming a new person and going through that process which is a long, long process to go through and finding yourself again, it is a lot to do with loving yourself and appreciating yourself for who you are and having made new discoveries about

yourself that you really like about yourself and these have come about because of your experience”.

CHAPTER FIVE

Reflections and Implications

Reflections

As I reflect on what I have learned from this study, what stands out the most for me is that this has been a journey of self far greater than I had anticipated when I began the process of writing this thesis. Possibly one of the most significant things that I have learned is just how very difficult it is to continue to play in the face of this disease. I feel somewhat like a surgeon who, while wielding a scalpel through assumingly healthy tissue, suddenly has a tumor revealed to her. The tumor is a loss not grieved, tears not shed. My feet have stumbled on the path; my knees are scraped. I have not been able to revisit the joy of play without revisiting the fear and pain, the potential death from this diagnosis - the shadow side. Inherent in the diagnosis of cancer is speculation that one is never cured; that cancer is chronic and in a millisecond, one's life can change again, never to return to that sense of health and wholeness that was, perhaps, so nonchalantly assumed prior to diagnosis. In the rapid proliferation of cancerous cells, there is a death of self. One struggles to hold on to "what was" before, knowing, yet not wanting to believe or to accept, that she is forever changed and can never again be that previous self, that somehow "more complete" self. My journal entry of February 11, 1996, reflected my struggle with this loss:

Tomorrow is my lymph node biopsy, another anaesthetic, more pain, more waiting. Positive nodes mean aggressive treatment, chemotherapy, my worst fear. Negative nodes mean good news. I pray for negative nodes, I pray for something good to come up here for me. If I have to have breast cancer can't I please have negative nodes? Bargaining ... The words on the permission sheet loom before me - carcinoma, left breast. I don't like these words, this label. I don't like being a 'breast cancer patient'. On January 29th I was a woman, a

student, a practitioner, a wife and mother, a sister, a friend. That was enough for me to be. On January 30th I was a woman, a student, a practitioner, a wife and mother, a sister, a friend, with breast cancer. A few words on a page and I have been assigned to a new sub-culture to which I have no orientation other than a vicarious one ...

With the diagnosis of breast cancer, one faces death beyond simply that of the physical realm. How have I continued to respond?

The very question that drove my research has loomed on the path in front of me, like a great black bear, challenging me to find a quick escape. How have I continued to play in the face of this disease? What meaning has play held for me, in my own recovery? Since my diagnosis and treatment for breast cancer in 1996, I have had 3 subsequent breast biopsies. With each, I revisited the fear of yet another cancer diagnosis. Several days prior to the most recent biopsy, I recorded my fear, in poetry:

My mind searches
and seeks the truth...
Quietly, she says,
The truth will come quietly,
In a whisper.
Why then,
Do I want to stifle the
Scream?
(Personal Journal, February 4, 1999)

Thankfully, I did not have to face further treatment. Yet looking back down the path, I reflect that each time I endured the process of discovery, waiting, surgery and more waiting, I found it increasingly more difficult to summon the energy to play; to engage in pursuits which brought me joy. In the writing of this work, I have revisited those earlier experiences of play, and playful intent, and I am humbled by my original journal entries which I had not

accessed until recently. Two recent journal entries reflect my struggle to make meaning of the journey with breast cancer:

How can I write about play when women are falling and dying around me? Dying of this heinous disease. How to 'immerse myself in the data' in the face of this sadness, for my sisters who are walking the same path and not making it - stumbling, picking themselves up and falling again - not to get up again perhaps. Not unlike the challenge of playing in the face of this diagnosis that robs us of our nurturing breasts and of our lives (Personal Journal, January 12, 2000).

The survivor thing - as I approach my year 4 anniversary this Sunday, I wonder why I marked it on the calendar, I never have before. Perhaps in the writing of this thesis my mind is going back again to survival rates etc. and I have to wonder again - would my research be more rigorous if I chose only women who had made it past the 5 year survival stats? And what about me? Is this my need to somehow ensure my own survival from this disease? By including my own thoughts and perceptions in the writing perhaps I can find some respite from the waiting a part of me is always waiting and holding (Personal Journal, January 21, 2000).

Like Maggie, I sometimes "fall back into the old way".

I have played with women who have not survived this disease and in confronting my own potential death from breast cancer, I have experienced a need to reconnect with the playful child of long ago who somehow got lost over the years, the little girl who "held on" in the face of great challenges.

A highly spirited child of the fifties, I was brought up in a strict, authoritarian environment which dictated that "children should be seen and not heard". This proved difficult for me and I recall constantly challenging the rules and pushing the limits, even when it was unsafe to do so. A near drowning, when I was 6 years old, contributed to the suppression of my physical vivacity. I was a highly parentified child, raised in a single parent household after the death of my father when I was 10. I was a "latchkey child"; an anomaly, in those halcyon days when fathers went to work and mothers stayed home with the

children. In the absence of playful adult role models, I soon learned to contain my exuberance. In this way, I could more readily “fit in” within other environments; I became the quiet, polite little girl who was welcomed in the classroom and, more importantly, into the warm bosom of the families of my friends.

This need for control continued throughout my adolescence and adulthood. I began my own therapeutic process when my children were in their teens; as I slowly unraveled the confusion of my childhood, I gradually began to reconfigure my way of being in the world. Frey (1994) described manifestations in adulthood of “distortions” (p. 195) in play in childhood and adolescence. These include shyness; reluctance to experiment with singing, dancing, drawing or drama; awkwardness when around playful others; lack of knowledge about how to play with children and restriction of play to structured or competitive activities. These fit with my own patterns and the way in which I conducted my life. Vicarious reinforcement, through my children, allowed me to play; to sing and dance and walk across the stage with an air of confidence that I had long since quelled.

Although I had initiated the process of change, it was not until I was diagnosed with breast cancer that I was able to overcome these axioms and fully reconnect with the playful child I once was. When confronted with my own mortality, there was a need and a desire to pick up the lost pieces of my life; many of those pieces encapsulated joyful abandonment in play and playful activities.

The ultimate challenge for me has been to capture in words the meanings my 3 participants attribute to play in their lives; how they courageously began their trek on a reclaimed path and have continued to play while facing a life

threatening disease, 24 hours a day, 7 days a week, 365 days a year. Cancer takes no holidays. What I have discovered in conducting my research with these women was a depth of strength and courage which I can only describe as inspiring.

It was interesting to note the many common themes which emerged from my interviews and I was, at times, astounded by the synchronicity between the words of the participants and my own. In addition, although not within the context of play and healing, other common threads emerged which warrant expression. Each woman expressed that the impetus to return to optimal health was motivated by her children. The link to another generation; seeing her child or children grow and continue the life cycle was key to each woman's experience of healing. A second common link was the role that connecting with others assumed in the healing process. It can be assumed that within play, connection with others generally forms a foundation upon which the experiences are built. Anna and I strayed frequently, choosing to seek solace and healing in our own company. However, being in communion with others assumed a powerful purpose in the healing process.

Although specifically articulated only within Maggie's experience, laughter and humor link all of us. Frankl (1984) stated that "the attempt to develop a sense of humor and to see things in a humorous light is some kind of a trick learned while mastering the art of living" (p. 55). Plessner (1970) declared that "play has a specific relationship to laughter play is always playing with something that also plays with the player ..." (p. 77). Kornhaber (1988) described humor as a pleasurable emotion which is "spirit linked" (p. 98). Maggie, Osha and Anna also have identified, inherent within their experiences, a type of

laughter which emanates from the playfulness of interacting and connecting with the beauty in nature; with others; with life.

Each woman articulated an innate need to modify her way of being in the world; however none described this in the same manner. This resonates with the phenomenological inquiry. Hartrick (1994) stated that “throughout the research process (she) frequently had the experience of knowing and yet seemed to lack the words (she) needed to express that knowing” (p. 68). Similarly, there was a “knowing” of sorts, for me and for the others which was ineffable. Whether it was the “soul”, the “spirit”, the “inner guide”, a “mystery”, “God”, “Goddess”, the “inner voice”, or, as Osha speculated, “did my dead mother facilitate it from wherever she is, whatever dimension she's in? I don't know”, we all sensed “it” was there, giving us the strength to continue and to push, pull or drag ourselves toward a renewed, playful way of being in the world.

The intent of this thesis was not to explore the research on psychoneuroimmunology. However, in his book, Anatomy of an Illness as Perceived by the Patient, Cousins (1979) reflected on his experience of healing in the context of “mobilization of (his) own mechanisms” of resistance:

Cancer in particular has been connected to intensive states of grief or anger or fear. It makes little sense to suppose that emotions exact only penalties and confer no benefits. At any rate, long before my own serious illness, I became convinced that creativity, the will to live, hope, faith and love have biochemical significance and contribute strongly to healing and to well-being. The positive emotions are life-giving experiences (p. 86).

These “positive emotions” are implicit in play and playful activities.

Maggie, Osha, Anna and I have each experienced them, in our own unique, yet parallel manner.

Future Implications

Caplan and Caplan (1973) stated that “anything is a toy if I choose to describe what I am doing with it as play “ (p. 307). It is essential that we encourage play not simply as a convenient tool with which to study other more “relevant” aspects of development but as an essential component of coping with our increasingly complex society. Vandenberg (1986) stated that,

to be human, and to live in a meaningful way in a culture, requires that we live in and through a very sophisticated abstract and symbolic system that is largely imaginary. To be incapable of fantasy is to be barred from human culture. Thus the importance of play and fantasy is not found in indirect stimulation of cognitive, social, educational and problem solving skills. Rather play and fantasy are central features of what it means to be human and these other skills are spin-offs of the ability to imagine (p. 25).

Play and playfulness comprise one fork in the path, several steps in the journey of being with breast cancer. Play for me, personally, has been a metaphor for escape, a welcome sidetrack into the sunshine, during my diagnosis, treatment and recovery. There was a joy and a freedom which manifested within each new playful moment; there was a sense of renewed awe and wonder as I embraced playful activities. I recalled my delight in a testimonial to Walter Dexter, upon completing a pottery course with him: “I can no longer look at a piece of pottery without wondering about the technique or searching out the origin. I must pick it up, feel the texture, the shape and get a sense of the intent of the potter in creating the work. My curiosity is such that I have been known to leave friends waiting in the middle of a crowded Saturday

market in order to obtain a glaze recipe for a pot I have just purchased, something I would never have done before" (August 14, 1997).

What my research has demonstrated to me, is that play is a highly significant component of healing. I have questioned why it has, at best, been paid lip service to, veiled obscurely as "psychosocial adjustment", or, at worst, been omitted from treatment protocols entirely. Playfulness is not meant to be stifled and sequestered. Like Osha and I, sitting on our "survivorship" of 3 years, 3 months, and 4 years, 1 month, play, in the greater context of healing must be acknowledged, as a credible and valid modality, as relevant as medical and surgical protocols. Simonton, Matthews-Simonton and Creighton (1978) stated that "... the genuine medical accomplishments of our time can cause us to forget that many of the essential ingredients of healing are still mysterious" (p. 15); so it is with the healing which comes from engagement in playful pursuits.

Pennington (1988) offered a hopeful image for the future when she stated, For the paradigm of health to shift, our disease-care system must change to a health-care system. In such a system, noninvasive forms of intervention such as the use of imagery, exercise, nutrition, meditation, psychotherapy, physiotherapy, naturopathy, massage, communion with nature, and identification with a larger power will replace the current emphasis on drugs and surgery. Professionals will be regarded as partners rather than supreme authorities. Qualitative information will be equally or more important than quantitative information. Most important of all, the process of health - the mind-body-spirit interaction - will become the focus of attention (p 250).

We are not there yet. We need to include play. If, as Northrup stated, "all distress, all healing of distress, and all creation of health are simultaneously

physical, psychological, emotional, and spiritual” (p. 290), then as Maggie reflected, “we have to be really open to all the different ways that play can be in our life”.

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APPENDIX A

LETTER OF CONSENT

TITLE OF STUDY: Playing for Keeps: A Phenomenological Exploration of the Meaning of Play in the Healing Process of Female Breast Cancer Survivors

INVESTIGATOR: Jan Saunders 642-6886
SUPERVISOR: Dr. Brian Harvey 721-7856
DEPARTMENT: Educational Psychology and Leadership Studies

I hereby give consent for my participation in a research study conducted through the University of Victoria, for completion of a Master's Degree by Jan Saunders. The purpose of this study is to explore what meaning play has had for me during my healing process from breast cancer.

Participation in this study will involve one or two semi-structured interviews and one discussion session of the research findings totaling approximately 5 hours of my time. In addition, a debriefing session of approximately one hour will follow each interview in order to address any of my emotional needs resulting from the interview. If I need further support, I will have access to the researcher's home telephone number. If I feel that additional support is required, the researcher will provide me with an appropriate referral for professional counseling which I can access alone or with the researcher.

The interviews will be audio taped and transcribed by the researcher. I can refuse to respond to any question; I can request at any time that the tape recorder be turned off. My participation in the project is completely voluntary and I can withdraw at any time. If I choose to withdraw, I can stipulate whether I wish to have any of the information which I have provided included in the project. If I do not, the data will be destroyed immediately. I will have access to the thesis when it is completed.

Any information collected will remain confidential. Audio tapes will be held in a locked file drawer and will be destroyed upon completion of the analysis. Computer disks used for transcription will be erased upon completion and acceptance of the thesis. Anonymity will be protected by the use of a code number designated to me. Only Jan Saunders, and the three members of her thesis committee will read the code numbered written transcripts of the audio taped sessions. The committee members may examine the transcripts for the sole purpose of clarifying research findings. My anonymity will be further protected in the published document by the use of a code name.

If I have any questions regarding this study, I can contact Jan Saunders or Dr. Brian Harvey.

Signature of Participant

Date

Signature of Researcher

APPENDIX B**INTERVIEW QUESTIONS**

- a) When you think of the word "play" what comes to mind?
- b) Before your diagnosis of breast cancer, according to your definition, what was the role of play in your daily life?
- c) According to your definition of play, what role does play assume now, after your diagnosis?
- d) If there has been a change, how has your experience of play been affected since your diagnosis, and what do you think has brought about this difference?
- e) How has the role of play impacted your sense of physicality, emotionality and spirituality since your diagnosis?