

### 3.2 English abstract

This Ph.D. thesis is a collection of articles that form a new area of psychosocial support and rehabilitation in the cancer field. The dissertation seeks to answer the following research question:

How can narrative coaching used in natural surroundings support couples where one has cancer?

Based on current research on coherent patient trajectories, psychosocial rehabilitation for cancer patients and their partners, as well as learning in nature, the Ph.D. project was initiated. The primary focus is to investigate how natural environments can support the effort concerning the quality of life of cancer patients, from a learning perspective. The dissertation is an intervention study that invents new ways to create and facilitate reflection exercises that can support cancer-affected couples' experience of the quality of life and coherence in the disease process. With natural surroundings as a framework, pedagogical and rehabilitative perspectives link on facilitating a reflective environment for couples who need attention to the quality of life in the relationship undergoing medical cancer treatment.

The thesis consists of 3 articles. First, a systematic review that aims to find evidence that nature works on self-reliant mental stress during somatic disease. The review provides the result of 5 quantitative research articles (Cimprich and Ronis, 2003; Hitzig et al., 2012; Raanaas et al., 2012; Rosenberg et al., 2014; Watzek et al., 2016) and it gives an understanding of the field of nature, illness and psychological stress. There is evidence in the area of the effect of interventions for cancer-affected couples (Traa et al., 2015) and therefore, this dissertations' systematic review has focused on individuals self-reported stress in relation to nature-based interventions.

The second article of the dissertation is a methodical theoretical article describing the purpose and the theoretical basis for the intervention aimed at couples where one has cancer. The theory behind the article is based on a narrative foundation, as this kind of approach can be particularly helpful when people's stories are broken (Charon and Irvine, 2017). The specific questions of the intervention are also narratively based, with inspiration from, among others, Charon (Charon, 2007, 2008a), Bruner (Bruner, 2004) and

White (White, 2007). It is suggested why nature, as well as a dyadic perspective, can be helpful in focusing on the resources people have and which the healthcare system can advantageously enable.

The third article is a study of couples in cancer trajectories, their coping and narratives and the relationship between what they already do to cope together and how the Recap intervention supports this. The article consists of both a quantitative (short survey) and a qualitative element (narrative interviews). These two ways of acquiring knowledge about the purpose and effectiveness of the intervention are essential to show, as each approach has its strength in the illumination of this new research field. The process of incorporating both types of knowledge forms has been a continuous process that has given challenges and developed the project throughout the project period. The article shows that couples have needs that are not met by the health system and that the couples do things together to maintain a "we" while undergoing medical treatment. They manage to focus on listening to each other, being strong together, traveling together in time and find their uniqueness as a couple.

Overall, the three articles proposes a new way of working with cancer-affected couples and is an inspiration to think of new ways of providing support to people's everyday lives and relationships. The dissertation forms part of an intervention framework that should work in a healthcare system that is relatively "narrow" designed with a focus on treatment. The intervention is suggesting a possible way of thinking that fits into the healthcare framework and language, but at the same time challenges the way we design the healthcare system. The complexity of the challenges patients, and thus the health service, require new ways of working with research - and these errands are made difficult, for example, by the fact that the research aimed at treatment is significantly higher than complex interventions aimed at the whole person (Hansen and Jones, 2017).

The dissertation can be considered as a new way of thinking of narrative coaching for couples, which seems relevant in a postmodern health care system, with the mistakes that may be connected to this errand.