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Topic of this research the impact of Breast Cancer on Women's Body Image in the UK

1 Introduction Breast cancer is the most common malignant disease affecting women in the United Kingdom, with around 55,000 new diagnoses annually (Cancer Research UK,

2023). Advances in screening, early detection, and treatment have significantly improved survival, meaning more women now live with the long-term physical and psychological consequences of the disease.

Among these consequences, body image disturbance has appeared as a central concern and a key determinant of emotional wellbeing, social functioning, and quality of life.

Body image refers to a person's subjective feelings, thoughts, and feelings about their physical appearance. In the context of breast cancer, these beliefs are done by treatment-related physical changes such as mastectomy, breast-conserving surgery, scarring, reconstruction, (Hems et, al,2008, Dahl et, al,2010)

radiotherapy marks, alopecia, and weight fluctuations, hair loss, loss of one or both breasts, discoloration of the skin and nails. Such changes may disrupt women's sense of femininity, identity, and sexual self-concept, making body image a focal area of psychosocial health. UK-based evidence suggests that women often experience body dissatisfaction, reduced confidence, social withdrawal, and challenges in intimate relationships because of treatment.

Therefore, this research aims to explore the impact of breast cancer on women's body image in the UK.

Rationale

Breast Cancer is the leading cause of death for women, approximately 11,200 people die from breast cancer each year, or 31 people every day (2011 2023) many factors, such as age, genetics, and exposure to risk factors. Including some potentially preventable lifestyle factors, affect a person's change of developing cancer. Cancer

research UK (2023) This research help people to understand how improving body image may help the quality of life of women diagnosed with breast cancer.

Review Question

How may body image enhance the quality of life of adult's women diagnosed with breast cancer in the UK?

Objectives

To analyse the relationship between body image and cognitive behavioural therapy after a surgery to remove breast cancer in a women

To provide recommendation for effective programs to increase confidence in the potential, to improve the body image of women who have had breast cancer.

Background

Contextual information

Methods

A secondary research study using a scooping review this means collecting data that has been collected by someone else for research purposes, findings. They can be articles, books, papers. etc. It analyses and decides if going to be used in the research or not (Cottrell, 2022) The researcher takes information or re uses on their own research project (Denscombe, 2021)

A Scooping review is a method to map and synthesize data from existing sources (Arksey and Omalley, 2005).

Databases to be used

Google scholar

Uwtsd Library

KEYWORDS

Body image, Breast cancer, United Kingdom. Women adults, cancer burden, mortality, cancer control, cancer survivors.

Breast cancer or body image in the United Kingdom or breast cancer and body image in adults’ women in the UK.

Abstract

The construction of women's body image after cancer was examined in this study. A two-hour in-depth focus group was conducted with four women, ages 32 to 67, who had either breast or colon cancer. Discourse analysis showed that although women acknowledged that them experiences were also traumatic (hair loss, scarring, illness, swelling), they were oriented toward positive aspects of the post-treatment body (silhouette, trust, acceptance). Post-cancer bodies were accepted despite opportunities for normalization; bodies and illness were hidden from public scrutiny, and women gained new confidence in their bodies because of conquering cancer. There is discussion of the implications for individuals who wish to help women both during and after cancer.

4 Results

Authors and publication year	Aim	Methodology and methods	Findings
1 Smith et, at. (2018)	To show the feasibility of conducting a fully powered randomised controlled trial to evaluate online delivery of Accepting your body after cancer	Quantitative data on recruitment, retention Accepting your body after cancer attendance and questionnaire completion rates will be analysed using descriptive statistics. Qualitative data will also be collected to better understand the feasibility and acceptability of research process and intervention, with data analysed	The study has received Ethics Committee and will be disseminated to academic and health professionals via a peer reviewed publication and presentation at relevant conferences.

		using codebook thematic analysis.	
2 Smith, et, at. (2015)	The impact of appearance alteration on body image	Several psychosocial interventions targeting the body image of women who had breast cancer have been developed and evaluated, such as cognitive behavioural therapy approach have received the greatest support.	Physical activity has been associated with the alleviation of appearance dissatisfaction, using yoga, strength training, aerobic and relaxation activities. Provision of beauty treatments has also demonstrated the potential to alleviate appearance related concerns.
3 Sun, et al. (2025)	A meta synthesis of the impact in women breast cancer survivors	12 qualitative studies from 2000 to 2015. Using the Critical appraisal skills programme checklist and Sandelowski and Barroso step to synthesise the findings	The age of women in these studies ranged from 30 to 77 years old, Losing the breast was regarded as disfigurement, resulting in a discrepancy between and societal images

From the analysis of the findings, two themes have been generated

Themes		
Themes 1	Changes in identity	
Themes 2	Coping with the changes in identity	

Theme 1 Changes in identity the findings showed that women breast cancer survivors experienced both negative and positive impact of losing their breast

Theme 2 Women were able to cope the changes in identity and live with the discrepancy.

Inclusion criteria

Primary and Secondary research studies.

Focus on adults' women living in UK.

Recognises that they are experiencing body image distress because of treatment(regarding how the body looks and /or feels).

Has sufficient understanding of English (as the intervention content and measures are currently only available in English).

Finished active treatment for breast cancer including chemotherapy, radiotherapy, targeted and immunotherapy.

Completed primary oncological breast cancer surgery with breast conserving surgery or mastectomy with or without immediate definitive breast reconstruction.

Exclusion Criteria

Reports, websites, books

Research conducted outside the UK.

Studies discussing the impact of breast cancer and body image in adult women in the UK.

Non-English papers or those published before 2015.

Still undergoing active treatment for breasts cancer.

Undergoing exploration for cancer recurrence.

Has not received a diagnosis of breast cancer, for example has had prophylactic treatment for a gene mutation (such as risk reducing mastectomy).

Has an eating disorder.

Unable to provide informed consent.

Data analysis Thematic analysis (Braun and Clarke, 2021).

5) Ethical Considerations

Since this project uses secondary data (already published research) will follow ethical considerations for secondary studies. For example, all sources will be properly cited, and only publicly and reliable available sources will be used. The researcher will also ensure transparency, fairness, and respect for intellectual property. The information will be reported accurately (BHBIA, 2020).

5 Discussion

The research question asked How may body image enhance the quality of life of adult's women diagnosed with breast cancer in the UK?

Improved treatment adherence women who justify physical changes as an essential part of treatment are more likely to follow doctors' instructions and adopt healthy habits, which improves their long-term health and quality of life.

Essentially, cultivating a positive body image enables women to incorporate their changed physical state into a new, confirmed self-concept, which results in a more optimistic course for recovery on enhanced overall quality of life. Women facing these difficulties can get resources and support from UK charities like Macmillan Cancer support and Breast Cancer. Concerningly, over one third (37%) of 1,007 British women with breast cancer who took part in a You Gov survey claimed that their diagnosis had negatively affected their mental health and self-esteem. 40% of women say they have never talked to anyone about their body image or how they feel about it because they are uncomfortable discussing these topics.

Importance of the findings for health and social care

Individuals cannot cope alone, they need support to live a fulfilling life post treatment after surgery, this tells that interventions targeting body image can effectively reduce depressive symptoms. Open discussions about body image options, including breast reconstruction. Are crucial for informed consent and patient satisfaction with their treatment path. Health and social care must provide ongoing, long term psychosocial support that extends into survivorship and beyond the transition back to primary care. Psychosocial care is a key part of quality care, as mandated by NHS long term plan cancer.

6 Conclusion and Recommendations

While navigating the conflict between the self and body and the expectations of femininity and womanhood set by society, the feelings of losing the breast were rife with contradictions, tensions, and uncertainties, for women undergoing mastectomy who may be at a higher risk of developing negative feelings of losing their breasts, a customized care plan must be created. Additionally, support for women who have more positive feelings of losing their breasts must be supported. Typically undergo multiple treatments that change their appearance body dissatisfaction has become a problem. The quality of life may be significantly changed by these body image issues, which after recovery, may continue for years. It is critical that health professionals recognize body image as a potential concern throughout the entire course of treatment and that access to information and support on a changed appearance be improved, the dissatisfaction with one's body can help better understand women who have breast cancer after treatment.

During follow up care, they should give women realistic and exact information. Pay attention to their needs and create psychological intervention programs that help them deal with circumstances.

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