ANALYSING TOPICS OF FIRST MEMORIES IN ONCOLOGICAL PATIENTS

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Abstract

Early Recollections reflect a person's current view of others, the world, and themselves. Early Recollections are characterized as projective techniques. Oncology patients, suffering from cancer, are characterized by an impaired quality of life and mental health. Over time, many cancer patients adjust to their illness and report a positive state of mental health, while other patients have greater difficulty coping with the disease. Understanding how people perceive and interpret the world and the individuals around them is also from interpreting childhood memories. These early Recollections define as vivid memories of special events occurring before the age of eight. The aim of this study is to present and explore topics among Early Recollections in oncology patients who respond to the disease in an optimistic and pessimistic manner. Clinical interviews and the Early Recollections Questionnaire by Rule (1972), Altman (1973) and Zarski (1978) were used. The main hypothesis of this study is: "Early Recollections themes can differentiate optimistic patients from pessimistic patients" In this study were 10 (No. = 10) patients diagnosed with stage 2-3 cancer in palliative ward of Elbasan Regional Hospital. Analysis of Early Recollections was interpreted by classifying and using the types of themes and personality typologies of Mosak & Di Pietro (2006).

From the clinical interview, the classification in the category of disease response style was performed, dividing them into optimistic and pessimistic categories. By analyzing the themes of Early Recollections, people with optimistic reactions were more cooperative, optimistic about the future, seeking changes that would improve their health and psychological state, accompanied by feelings of happiness, joy, pleasure that you display typology personality such as: Satisfaction, Type of social interest, Conformist, Passive-conformist. Where patients with pessimistic reactions had resistance personality reactions, infantile, martyr, accompanied by low self-esteem, feelings of fear, shyness, strange, with personality typologies such as: Submissive, Infancy, Confusion, Resistant, Martyr, etc. Confirming the main hypothesis of this research. In conclusion, defining the personality typology as a projective instrument helps to determine the personality and reactions to current situations. It is therefore recommended that it be achieved to provide a foundation on which to build the clinical utility of the Early Recollections of these patients during the therapeutic process.

Keywords: early memories, oncology, psycho-oncology, lifestyle.

Introduction

Early memories represent an insufficiently treated field of study, although it has aroused interest in the scientific community since the beginnings of psychology. These "islands in a sea of oblivion" (Salaman, 1972) have aroused much interest in memory research. Information gathered from early memories reflects a person's current view for others, the world, and himself. The purpose of early memories is not to explain a person's childhood, nor are they intended explain the reasons. Early memories do not suggest that because something happened in childhood, an individual should act or reflect in a particular way.

Early memories give us clues as to how the individual perceives life. It is important to understand that the content of the memory is a projection; therefore, it makes no difference whether the memory is real or imagined. Early memories are characterized as projective techniques. Numerous researchers have tried to develop quantitative methods for establishing a relationship between early memories and lifestyle or even with current situations.

Oncology patients, suffering from cancer of different types and stages of the disease, are characterized by an impairment in the quality of life and mental health.. Over time, many cancer patients adjust to their illness and report positive mental health status, while other patients have greater difficulty living with the illness. A wide range of psychological interventions can be implemented to improve psychological distress and adaptation to being a cancer patient, thereby increasing the quality of life (Badr and Krebs, 2013;Preyde and Synnott, 2009) Rehse and Pukrop (2003). In psychological treatment various projective tests can be used that present personality traits, how a person perceives the world, others, and themselves.

Early memories are defined as vivid memories of special events occurring before the age of eight. These memories will not be confused with the report of simple events or by stories with parents or others (Dreikurs, 1967). The aim of this study is to explore the topics between early memories in oncology patients who are optimistic and pessimistic.

Objectives

1-To analyze the topics of early memories for each oncology patient with pessimistic and optimistic reactions to the disease.

Hypothesis

H1: Early memory themes can make a difference between optimistic patients from pessimistic patients.

Importance of the study

This study is important for counselors, psychologists, and the research community, to use early memories as a therapeutic tool. The information from this study will provide assistance in the interpretation phase by identifying as well as clarifying those perceptual skills which are most important for successful analysis. Moreover, studies that focus on oncology patients as a target group are more prefered in this area.

Literature

Early memories.

The first mention of early memories in the psychological literature occurred around the turn of the century (Hall, 1899; Henry 1895, and Henry, 1898). Early investigations had a primary and descriptive character, related to the characterization of memory age, the affective character of memory, and other aspects of memory content (Mosak, 1958).

Early memories were later recognized as a powerful tool in clinical psychology. This instrument was recognized by Sigmund Freud and Alfred Adler, although have different meanings. Freud theorized that early memories represented a view by which certain repressed conflicts were revealed but in disguised form (Freud, 1925; 1938).

The Process of Interpreting Early Memories.

Techniques for taking early memories. Instructions for retrieving early memories have been structured by a number of authors (Mosak, 1958; Olson, 1979; Kopp and Der, 1982). The right idea for using interview techniques to facilitate memory creation and interviewing the answer with a number of questions. The need for sufficient detail was highlighted by Dreikur (1952) a detailed review by Kopp and Der (1982) to extend the standardization of the standard of questions. Only a limited number of authors have published their techniques (Mosak, 1958; Nickel y and Verger, 1971; Olson, 1979; Kopp and Der, 1979) reserving most of their expertise and skills in this field. Most interpretation is based on knowing the main themes, patterns and vocabulary, it needs an essential element. It falls somewhere between customer sensitivity and an understanding of the and complexities essentials of Adler's personality theory (Mosak, Di Pietro 2006).

Oncological aspect.

Cancer has a deep impact on individuals both on personally and interpersonal aspect.

Cancer is not only a series of different diseases that need complex and multidisciplinary treatment but also a very stressful condition with important psychosocial implications regarding physical, emotional. spiritual the and interpersonal dimensions. Some ways of confronting with illness are: a fighting spirit (i.e. tendency to actively cope with illness), is hopeless (i.e. tendency to have a pessimistic attitude towards illness), anxious preoccupation (i.e. tendency to constantly perceive impact of the disease in his own life) and denial, with poor adaptation to the disease and a higher risk of anxiety. (Nipp RD, El-Jaëahri A, Fishbein JN, et al, 2016). One of the features of coping is ordinary or temporary optimism, in which a person generally expects positive results, Carver CS, Scheier 2014, 2010. Maik Thieme, Jens Einenkel, Markus Zenger, Andreas Hinz, 2017)

Projective Techniques and Oncology.

One study used a projective personality test, the Wartegg-Zeichentest Test, administered to 30 cancer patients at the start of chemotherapy, adjuvant treatment in 30% of cases, and palliative treatment in the remaining 70% of cases. Quality of life was also assessed during treatment with the Edmonton Symptom Assessment System (ESAS) and the possible presence of psychological disorder with the Psychological Stress Inventory; each patient attended a psychological support program. Diagnosing cancer affects the perception of reality, presenting patients with personality profile characterized bv demoralization. depression, inhibition and passivity.CM La Spina, C. Murasecchi, S. Stinco, A. Cassano, A. Strippoli, N. Trigila M. Di Salvatore, A. Quaranta, E. Straffi, C. Barone, 2010).

In one study, where the method used was crosssectional based on a population of 167 cancer patients were enrolled in a hospital in China from December 2015 to December 2017. The conclusion was the S-HTP drawing test could help examine depression in cancer patients (Guifang Yang, Liping Zhao, Lijuan Sheng, 2019). Research Studies.

In a quantitative study that reflects the distribution of autobiographical memories during the first decade of life, Rubin (2000) collects a total of 10,118 memories obtained from previously published studies on American men and women (20-70 years old). Only 1.1% of respondents recorded memories before age 3, with a strong increase in the distribution of existing memories after that age. Female participants may have more memories before the age of 4 compared to males (Rubin, 2000). Another feature in a study was the persistence of early memories (Bauer, Tasdemir-Ozdes & Larkina, 2014). In relation to individual changes, were included memories about / or before age 2 (Henri & Henri, 1898; Jack & Hayne, 2010; Rubin, 2000; Usher & Neisser, 1993; West & Bauer, 1999; Bauer, Tasdemir-Ozdes & Larkina, 2014). Most subjects had early memories at age 6 years or later (Bauer, Stennes, & Haight, 2003; Bauer, Tasdemir-Ozdes, & Larkina, 2014). There are people who can recall many events from early childhood while other people recall only a few (Jack & Hayne, 2010; Weigle & Bauer, 2000; West & Bauer, 1999; Bauer, Tasdemir-Ozdes & Larkina, 2014). Regarding group changes, women have more early memories than men (Mullen, 1994; Bauer, Tasdemir-Ozdes & Larkina, 2014).

However, no research has been done that applies this technique to oncology patients, at least in Albanian culture. This can be seen as a reflection of the minimal attention paid to the study of this population.

The successful implementation of the early memories approach suggests that this powerful projective technique can be used to shed light on one of society's least understood populations.

METHODOLOGY

The purpose of this study is to present and explore topics among early memories in oncology patients who respond to the disease in an optimistic and pessimistic manner.

Objectives

1-To analyze the topics of early memories for each oncology patient with pessimistic and optimistic reactions to the disease.

Hypothesis

H1: Early memory themes can differentiate optimistic patients from pessimistic patients.

Data analysis.

The data analysis phase is needed to further document the procedures used within the study (Patton, 1990). This stage is very important to analyze the data accurately. The data in this study were analyzed using various theories such as text interpretation, thematic coding for personality typologies, etc. All of these approaches use the predefined categories in the analysis. They relate to the use of the early memory collection procedure. This process is adapted to the procedure of Harold H. Mosak and Roger Di Pietro (2006).

First the organization of memories, where each memory will contain:

- a. Age
- b. Description of memory
- c. The strongest moment of memory
- d. Feelings about memory
- e. The most important part of memory

Secondly. Data Unit: This phase deals with data reduction and rearrangement. The presentation of the description of the early memories of the participants was done for qualitative data. It has been pointed out by Miles and Huberman (1994), that the use of data display constitutes an important aid for their analysis and conclusion drawing. This allows the researcher to display reduced or selected data, extracted from the extended text.

Third. Recognizing relationships and developing memory categories: This phase involves using data screens to rearrange categories of memory titles.

Fourthly. Development and verification of finding: After the presentation and analysis of memory topics by categorizing patients with optimistic and depressive reactions.

Procedure.

Patients were randomly selected in the palliative ward for a period of 4 weeks. The subjects were given the purpose and instructions for completing the questionnaire.

Assessment.

Under the identity of the clinical psychologist, the evaluation of the reaction of the participants was performed respecting the competencies allowed by this profession. The instruments used in this study are permitted to be used by professionals for therapeutic purposes. Accordingly, they have been translated, adapted and edited in relation to the purpose of the study. APA provides a number of measurements developed for further research and clinical evaluations. (www.aipcp.it).

The instruments.

1-Semi-structured clinical interview. Clinical interview was used to enable categorization of patients with optimistic and pessimistic reactions. Based on the assertions of the patients, the division into categories was realized. The open-ended clinical interview focused on assertions related to: demographic data, medical diagnosis, how long they have been informed about the disease, how their lives have changed since they were notified of the disease diagnosis, etc.

2-The instrument used in this study is the "Early Recollection Questionnaire". The questionnaire aims to explore what first memories can be brought to mind from childhood. This Early Memories questionnaire was a modification of instrument development by Rule (1972), Altman (1973) and Zarsk i (1978).

Interpretation Procedure.

Early memories were interpreted by classifying and using the types of themes of Mosak (1971) Mosak & Di Pietro (2006). The data from this study consisted of writing the titles of the memoirs as well as identifying the main themes for each memoir and subject. The results were also evaluated by comparing the personality typologies of the patients.

Study Limitations

No generalizations can be made from a limited amount of data and with a limited sample collected in this study, 10 patients.

In the future, other elements such as ethnicity, culture should be studied, as well as by the researcher as it is based on subjective assessments, which can affect the generalization of results. There was no specific definition of age groups. The 2nd and 3rd stage of the severity of the disease was taken under study. Lack of parallel studies related to this study.

Results

The clinical interview was administered to 20 (No. = 20) patients, to initially realize the same division of the two categories of optimistic and pessimistic reactions. Ten (No. = 10) patients who were diagnosed with different disease typologies were randomly selected. Participating patients belonged to the second and third stages of the disease.

From the clinical interview, it was possible to identify and classify the category of disease response style, dividing them into two categories with the same number of patients (nr = 5) optimistic and (n = 5) pessimistic.

An individual's early memories tend to show repetitive responses to certain topics and these provide an indication of how the person responds to life in different situations.

Table 1. The division of themes of early memories according to 2 categories of optimistic and pessimistic reactions to the disease.

	Optimistic reactions	Pessimistic reactions
Themes of early memories	- Pleasure	- Submitted
	- Type of social interest	- Infancy
	- Conformative	- Confusion
	- Passive-conforming	- Resistant
	Ŭ	- Martiri

Dividing the themes of the early memories on persons diagnosed with stage 2-3 cancer, a significant difference of the types of reaction to the disease is observed. People who had optimistic reactions to coping with the disease, was characterized by the typology of personality themes of the type who is satisfied and tries to satisfie the others, the kind of social interest that shows cooperation, self-care and to achieve coping with pain. The conformist type, which expresses the acceptance of the situation and the effort to keep the real self under control. The passive conformist type that expresses a line of connection of moderately optimistic and pessimistic reactions, that accepts the reality of the situation, but asking others to act on changes in life activities.

Comparing to people with pessimistic reactions to coping with the disease, it was characterized by depressive traits, low self-esteem, submission to authoritarian figures, empty feelings, loneliness, etc. kjkj

This confirms the study objective and the main hypothesis: "Early memory themes can differentiate optimistic patients from pessimistic patients. So there is considerable difference in the topics of early memories of optimistic and pessimistic patients with terminal illness.

Discussions and conclusions

From the differentiation of the two categories and the analysis of the themes of early memories, it appears that optimistic people were more cooperative, optimistic about the future, seeking changes that would improve their health and psychological state, accompanied by feelings of happiness, joy, pleasure, etc.

In contrast, the category of pessimistic patients had resistant personality reactions, infantile, martyr, accompanied by low self-esteem, feelings of fear, shyness, strange sensations, etc. Thus proving the main hypothesis of this research.

The pessimistic category of patients, from the analysis of three memories for each person, personality typologies were classified as: infantile, which expressed the need to be safe looking for environments and attachment persons to interact. Submissive personality type that expresses conformity, to easily to obey to others regardless of personal needs. Confused expresses personality type, which the uncertainty about life what will happen and the insecurity he feels in himself. Resistant personality type, which expresses the insistence on not changing and resisting more in previously known environments despite the changes occurring to achieve a life objective as was the case with the disease. The type of martyr or selfsacrificing personality, who express personal sacrifice to come to the aid of other persons despite the aggravated psychological-emotional state.

In the category of optimistic patients, personality type is presented as, satisfied. In the memories of this typology, emotional states of happiness, of joy are emphasized, showing that during the illness they manage to show the desire to change and to think positively about the future. The type of social personality was displayed by individuals who presented themselves as cooperative, polite.

The conformist personality type exhibited adaptive and affirmative behavior from others. Activity to change their aggravated condition by interacting with doctors, caregivers to achieve improvement.

The passive-conformist personality type could be classified as an intermediate category. The person expresses the need to have caregivers to feel optimistic about the future, but does not take in itself substantial initiatives but by accepting from others. Confirming the objective of this research.

From the analysis of data based on literature, theories, topics, personality typologies, as well as numerous studies (Friedman and Schiffman, 1962), (Hafner, Corotto and Fakuri, 1980), (Barrett, 1981), (C..Burgess 1, T.Morris, KWPettingale, 1988), (Rosemary Cogan 1, Allen Stringer, Jann Aldredge Clanton, John.H.Porcerelli, Wendy Clason, Brandon Scott, 2009) show the importance of analyzing the first memories in the personality of the individual, in the lifestyle but also in the way of reacting to situations.

Recommendation

Further research is needed to evaluate and identify personality elements in more dettails.

Research should be conducted in the future to objectively assess the categories of coping styles of the disease.

As shown by the study and its achievements, the integration of this test serves as an additional and efficient tool in determining the patient's personality.

This study can be supportive of other studies in the clinical field, in creating a research guide as a projective test. This overview can provide support for the analysis of patients with various diseases.

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