Research Implications: There has been little research on the effects of humor as a tool to work on anxiety, within a psychological program, in patients with cancer and their families. In the present investigation, the intervention of humor has been structured in a psychological program.

Practice Implications: Using techniques of humor, as the therapeutic clown in a structured manner and within a psychological program, can allow patients and their families to change their beliefs and expectations about the disease, which allows reducing anxiety. It is possible to teach humorous techniques and relaxation techniques to psycho-oncologists’ child patients and their parents.

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P1-82

Young Asian American Women with Breast Cancer: Exploring Coping Strategies

1Grace Yoo, 1Anantha Sudhakar, 1Mai-Nhung Le, 2Ellen Levine 1San Francisco State University, 2Walden University

BACKGROUND/PURPOSE: In recent years, breast cancer rates among young Asian American women have been increasing. Despite increases in breast cancer among young Asian American women, little is known of how this population copes with their diagnosis and treatment. METHODS: This study was a qualitative exploration of how young Asian American women cope with the diagnosis of breast cancer. In-depth interviews with 22 young (under the age of 50) Asian American women diagnosed with early-stage breast cancer were conducted. RESULTS: Through qualitative data analysis, five major themes emerged including caring for others, maintaining work and productivity, reaching out to others outside of the family, living courageously, and expressing emotional vulnerability. CONCLUSIONS: The participants worked to maintain normalcy including caring for others and being able to work during treatment. In addition, they also found ways to reach out to others to express emotional vulnerability.

Research Implications: Further studies are needed to understand how to enhance positive coping tools among young Asian American women impacted by breast cancer and how this can ultimately impact their healing and recovery.

Practice Implications: Many people with cancer suffer because healthcare professionals lack understanding of the cultural and environmental contexts in which they live. Further research into specific types of coping can be used to educate healthcare professionals on how to relate to diverse cancer patients including young Asian American women with breast cancer.

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P1-83

Task Self-efficacy: Role in Exercise Engagement in Cancer Survivors with and without Depressive Symptoms

1Gregory Levin, 2Kate Powe, 3Kenneth Greenwood 1University of Calgary, 2University of Queensland, 3Edith Cowan University

BACKGROUND/PURPOSE: Many people living with cancer experience depression. Research suggests that the therapeutic effect of exercise on depression is similar to pharmacotherapy or psychological intervention, yet cancer survivors are under-exercising compared to recommended doses. Self-efficacy may be a factor to explain exercise engagement. This cross-sectional study investigated whether exercise task self-efficacy (ETSE) was associated with exercise engagement, further examining differences between cancer survivors with and without elevated depressive symptoms. METHODS: Ninety-seven cancer survivors (60.8 ± 9.9 years) were mailed self-report questionnaires on ETSE, exercise engagement, and depressive symptoms. A Hospital Anxiety and Depression Scale D cutoff score (≥8) was used to assign participants to a symptomatic (n = 34) or non-symptomatic group (n = 63). An independent t-test was used to examine differences in ETSE between groups. Correlational analyses were used to examine relationships between exercise task self-efficacy and exercise engagement. RESULTS: There was a significant difference in the degree of exercise task self-efficacy between cancer survivors with (M = 35.74, SD = 31.47) and without (M = 57.30, SD = 26.71) depressive symptoms, t(95) = −3.56, p < 0.01, with a large effect size (d = 0.74). A positive association was found between ETSE and exercise engagement, r(95) = 0.49, p < 0.01, which was similar for both groups. CONCLUSIONS: Exercise task self-efficacy appears to influence exercise engagement independently of mood status, but people with higher levels of depression symptoms tend to have lower self-efficacy. Therefore, future research should examine interventions to enhance exercise task self-efficacy, thereby potentially increasing exercise engagement in cancer survivors.

Research Implications: These findings demonstrated that cancer survivors with depressive symptoms have low ETSE and that ETSE can predict exercise engagement. This suggests a role for enhancing ETSE to influence exercise engagement in cancer survivors. Future research could investigate causality between ETSE and exercise engagement and interventions to enhance ETSE. The
findings of the present study could assist with more definitive research which could aid clinicians interested in behavioral change with regard to exercise engagement and improvement of depressive symptomatology in cancer survivors.

**Practice Implications:** The findings illustrate that exercise self-efficacy predicts exercise engagement, independently of mood. Therefore, clinicians working with depressed or non-depressed cancer survivors should initially target increasing exercise self-efficacy as opposed to reinforcing the positive health benefits of increased physical activity.

**Acknowledgement of Funding:** None.

**P1-84**

**Application of the NCCN Distress Thermometer among Cancer Patients in Shanxi Province**

Deqin Chu  
Shanxi Tumour Hospital

**BACKGROUND/PURPOSE:** Psychology of cancer originated in the mid-1970s in the 20th century. In Western countries, there are lots of tumor psychology professional journals and monographs and regular international conferences on tumor psychology. Many cancer centers and large general hospitals have a cancer psychology specialist, providing counseling and treatment for a large number of patients each year. These programs for the clinical treatment and prognosis of cancer patients have played a positive role. China is relatively backward in this respect; there are still a lot of cancer patients living in physical and mental pain, which extremely affects their life and work and even leads to suicide to escape. This research investigates the psychological distress condition and its influencing factors among patients with cancer in Shanxi Province, China. METHODS: By using Distress Thermometer (DT) recommended by the National Comprehensive Cancer Network (NCCN), the screening for psychological distress of patients with cancer. It can discover promptly the causes and assess the severity of psychological distress of cancer patients. And according to the result, proper psychological guidance and adjustment can be applied to patients.

**Research Implications:** The project has great significance for long-term treatment and rehabilitation of cancer patients and will fill in the blank research area in our province. The screening result plays a role of benchmarking, which can be used for comparison with other provinces or countries and further analysis based on the similarities and differences.

**Practice Implications:** The result of this research arranges related factors from minor to major, from less to more important, which can be used for cancer patient care precautions in order to take appropriate measures and family as well as protection and intervention of family and society. It can play a catalytic role for the province administration in the health sector to provide cancer patients improvement of the living environment, improvement of the mental health, promoting the development of social harmony, and can be used as guidance to prevent cancer and fight cancer.

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**P1-85**

**Effectiveness of Japanese SHARE Model in Improving Taiwanese Medical Students’ Perceptions for Cancer Truth Telling**

1Woung-Ru Tang, 2Chung-Kai Fang, Ji-Tseng Fang, 3Yeong-Yuh Juang, 4Chien-Hong Lai  
1Chang gung university, 2Mackay Memorial Hospital, 3Chang Gung Memorial Hospital, 4Chang Gung Memorial Hospital, Keelung, Taiwan

**BACKGROUND/PURPOSE:** This study explored the effects of communication skill training (CST) on cancer truth telling of medical students at one medical center in northern Taiwan. METHODS: For this experimental study, 141 subjects (medical clerks: fifth-year medical students) were randomly assigned to two groups: experiment (n=91) and control (n=50). Subjects in experimental group received CST for 6 h, under the assistance of two facilitators and simulated patients. In addition, subjects in control group received training on physical assessment for six hours, under the assistance of two attending physicians. Data were collected on medical students’ perceptions of truth telling before training (T0), immediately