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Phenomenological Inquiry of The Lived Experience of People Living with Breast Cancer

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RESEARCH ARTICLE

Abstract

This phenomenological study sought an in-depth understanding of the lived experiences of people living with breast cancer within the context of their day-to-day lives and the emotional burden brought by the disease and analyzed the data using phenomenological methods. A purposive sampling method was used to determine the number of required participants by interviewing women with breast cancer who will meet the inclusion criteria until the data are saturated and no new topics are generated. A total of six (6) women with breast cancer were interviewed. There are two major themes that emerged and describe the lived experiences among patients with breast cancer. These were varied views of people regarding breast cancer and the importance of the support group to a person, especially in overcoming the challenges and difficulties as they go along their journey of beating breast cancer. In conclusion, by using an in-depth interview, this study found out that the experiences of women who were diagnosed with breast cancer have completed the treatment and some have recurrence and ongoing treatment. Also, there is support received from her family, friends, and co-members, which helps them to overcome and cope with stress, especially the treatment. Through early detection, it plays a vital role in managing Breast Cancer. With proper information dissemination and awareness with regards to breast cancer, this could prevent it from late detection, and early management. However, with regard to early detection, they didn't seek immediate care; rather, they preferred to self-medicate and seek after it worsens.

Keywords: Cancer, Breast Cancer, Chemotherapy, Radiotherapy, Support System, Support Group

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1 INTRODUCTION

The woman's breast is considered an attribute of femininity, maternity, and sexuality; therefore, it plays a big role in a woman's life once diagnosed with breast cancer. A person's life can go through a long and tough period after receiving a breast cancer diagnosis, during which they may endure a variety of challenges and issues both physically and psychologically. According to the *Breast cancer* (2021), breast cancer develops in the lining cells of the ducts or lobules in the glandular tissue of the breast. Breast cancer is not transmissible or infectious. Certain factors increase the risk of breast cancer, including increasing age, obesity, harmful use of alcohol, family history of breast cancer, history of radiation exposure, reproductive history (such as age that menstrual periods began and age at first pregnancy), tobacco use, and postmenopausal hormone therapy.

Worldwide, breast cancer is the leading type of cancer that is commonly diagnosed among women. In 2020, there were 2,261,419 new cases of cancer diagnosed in women across the world. In

the United States, breast cancer is the second most common cancer among women, and black women die from breast cancer at a higher rate than white women. In 2019, in the United States, an incidence rate of 264,121 new cases of breast cancer was reported among women, and 42,280 women died of this cancer, so for every 100,000 women, 130 new breast cancer cases were reported, and 19 women died of this cancer. Changes in exposure to risk factors, screening tests, and improvements in treatment impact the rates of breast cancer diagnoses and deaths. In the same result from 2019 statistics in the United States, breast cancer affects people of all ages, races, ethnicities, and sexes. Furthermore, differences in genetics, hormones, environmental exposures, and other factors lead to differences in risk among different groups of people (**?**).

In a qualitative study in Taiwan, exploring the meaning of life of women living with breast cancer, four themes emerged from the study's findings. In the study, the first and second themes were the value of overcoming suffering and the value of spiritual comfort. In this study, the participants found the innermost value of overcoming suffering through attitudinal change and the value of spiritual comfort from religious beliefs. The third theme is the value of reciprocal love, which indicates that human beings can experience the meaning of life by building and maintaining relationships with others. The fourth theme is the value of self-transcendence, in which the participants find the meaning of life through creating the value of self-existence. In addition, many of the participants experience the value of self-transcendence by doing meaningful things and through self-challenge. After the participants had processed their cancer diagnosis, they understood their suffering and were aware that life is very fragile and short. Therefore, they wanted to do meaningful things to help others in their limited life (Sun et al., 2022).

The study by Rajagopal et al. (2019) suggests that most women experience high levels of distress following a breast cancer diagnosis and, as a consequence, have informational, emotional, and financial support needs. Many women experienced body image disturbances that impacted them emotionally and their relationships with others. However, many women reported receiving support from their spouses or healthcare providers (Rajagopal et al., 2019).

The Philippine Cancer Society report revealed 20,267 new breast cancer cases in 2015, which is 33% of all cancers, and more worryingly, an estimated 7,384 deaths from breast cancer in the same year, which is the third leading cause of cancer-related deaths. According to the International Agency for Research on Cancer (IARC), Filipino women face comparatively higher risks of developing breast cancer, with 1 out of 13 Filipino women expected to develop breast cancer in their lifetime with an age-standardized rate (ASR) of 47 per 100,000 women. Similarly, a Global Cancer Report, which surveyed 15 Asian countries, summarized that the Philippines has the highest breast cancer mortality rate and the lowest mortality-to-incidence ratio. The observed disparity may be because breast cancer is typically diagnosed in later stages (defined as Stage III and Stage IV) among low and middle-income countries (LMCs). In the Philippines, 53% of breast cancers were diagnosed in Stages III and IV, while only 2% - 3% of cases were diagnosed in Stage I (5, 6). These findings are particularly problematic as improvements in breast cancer survival rates are underpinned by timely and effective treatments made possible by early detection and screening (Wu & Lee, 2019).

The emotional response was the immediate reflection of cancer diagnosis based on the study of Mehrabi et al. (2016). Uncertainty of diagnosis, being worried about the future, and fear of death were the most common immediate experiences, whereas problem-solving responses, mainly cancer threat control, appeared subsequently. However, during the post-treatment period, a variety of sensations and emotions, such as uncertainty about the future, fear of cancer recurrence, and intrusive thoughts and worries about children, were not uncommon findings. Patients' perceptions have gradually changed, and problem-focused coping strategies have been replaced. Furthermore, in younger women, the illness has psychological negative effects and conveys great distress in comparison with older women; breast cancer diagnosis in the younger ones induced more burden of worries and fear, especially fear of recurrence. The majority of studies manifested that uncertainty about the future and fear of recurrence were the greatest concerns of these patients, even though cancer survivors face uncertainties about the future. This finding is in agreement with previous studies that confirmed that uncertainty about the future was a major

concern among the survivors of breast cancer (Mehrabi et al., 2016).

Therefore, this study aimed to gain an in-depth understanding of the lived experiences of people living with breast cancer within the context of their day-to-day lives and the emotional burden brought by the disease through interviews and to analyze the data using phenomenological methods.

2 METHODOLOGY

2.1 Research Method

This research utilized Colaizzi's phenomenological method to qualitatively analyze the lived experiences of people living with breast cancer. Colaizzi's phenomenological method focuses on the experience and effects on the participants' mental, physical, and psychological well-being and finds shared patterns rather than individual characteristics in the research subjects. Northall et al. (2020) added that Colaizzi's descriptive phenomenology is a popular methodology in health research, as it provides a way to understand people's experiences. Colaizzi's approach offers a way to analyze data and develop trustworthy findings. This scientific approach guarantees the authenticity of the collected experience of participants to adhere to scientific standards.

2.2 Participants

By using a purposive sampling method, the researchers selected women who have been diagnosed with breast cancer. Aged between their early 30s and 40s, the majority of these women are from the National Capital Region, and they were diagnosed with breast cancer while they were outpatients at the Cancer Institute. Only female breast cancer patients who are undergoing treatment with radiation and/or chemotherapy were participated in this study. The exclusion criteria were the inability to conduct 2 or more interviews during the study period. The participants were determined by interviewing women with breast cancer who met the inclusion criteria until the data are saturated and no new topics are generated.

2.3 Data Gathering

The primary data collection tool used in this research was individual interviews through video calls using semi-structured guided interviews. The guided interview was crafted by the researchers with open-ended questions to gather information with a sequence of light-hearted to serious questions. The one-to-one interviews were done through video call and were conducted in a room in a quiet manner without interruptions. The interviews took 40-60 minutes per person. The study subjects were allowed to withdraw consent at any time. The researchers remained neutral in collecting the data and established good relationships with the participants. The researchers used techniques such as unconditional acceptance, active listening, and clarification to promote the authenticity of the data and to avoid bias.

2.4 Data Analysis

The data collected were transcribed verbatim by the researchers. Within 24 hours of each interview, data was analyzed by Colaizzi's phenomenological analysis method. Three researchers independently reviewed the interview materials, summarized and extracted meaningful statements, and formulated the themes present. From this, the researchers developed themes regarding the lived experiences of patients battling on breats cancer.

2.5 Ethical Consideration

This study ensured participants' confidentiality and anonymity. All participants signed informed consent. The authors promise that there will be no academic misconduct, such as plagiarism, data fabrication, falsification, or repeated publication.

3 RESULTS

This study provides an in-depth inquiry into the lived experiences of facing their battle with Breast Cancer. This research used Colaizzi's phenomenological method which is to uncover the genuine experiences of the phenomenon that is under investigation. Descriptive phenomenology is particularly beneficial for describing the lived experiences of women diagnosed and living with breast cancer and helped researchers understand their experiences and undertakings. Colaizzi'e methods consist of seven (7) steps namely: (1) reading of the interview transcripts several times while listening to the tape recordings; (2) extracting essential elements and meaningful statements from the transcripts; (3) coding the same elements and statements of the data; (4) arranging the formulated meanings into several clusters of themes; (5) ensuring that detailed descriptions were stated and merged for every extracted theme; (6) undertaking a repeated reading by the researchers of the themes and the descriptions; and (7) returning the data to the participants to obtain their views and to be verified (Qeidari et al., 2023). Four emerging themes arose from the analysis of the participants' responses.

Theme I: EMOTIONAL BURDEN

Theme 1.1: Varied Views of Breast Cancer

According to the Centers for Disease Control and Prevention or CDC, breast cancer is a disease in which cells in the breast grow out of control; it can begin in different parts of the breast. It can spread outside the breast through blood vessels and lymph vessels. With regard to their view on breast cancer. First, they taught that cancer is not treatable; it leads to death, and it is also the third most common cancer worldwide and most common in women, as stated by one of the key participants. Some had their thoughts on what the procedure, treatments, and drugs would be because their costs are known to be very high.

However, these negative thoughts change as they go along with their treatment and attend their regular check-up. They see that there is "*pagasa*" or hope, and breast cancer is curable. According to them, during their treatment and attending different seminars and workshops, they realize that there are ways to be treated and be cured. From the end of life, they considered it as a new life given by the Creator; this new opportunity is seen by them like what the key participants said: "***There is no such problem or challenge will be given to you if you cannot handle it.***"

Theme 1.2: Presence of Support Group

Having a support system helps and provides an opportunity in which they can cope and express their thoughts freely without judgmental opinions against them. Allowing them to be themselves freely as they wanted to be treated like ordinary people who are well. Among the six participants, they identify their husbands, children, and friends as their support system by which they care and give them love and support along their journey. Also, three of the participants indicated that they had joined a support group, whereas all females also had breast cancer.

As stated by one of the participant, "***Simula noong sumama ako sa KABOOBS, doon ko nafeel na hindi ako nag-iisa, nawawala yung kalungkutan ko dahil sa mga actibidad nilang ginagawa para saamin, Ito ang nagpapanatiling abala sa akin…***". (Since I joined KABOOBS, I felt that I was not alone; my sadness disappeared because of the activities they do for us, and this keeps me busy. Support groups are developed by other organizations to invite and join people together who are dealing with similar conditions and circumstances like they are facing and coping with specific diseases like Breast Cancers and other ailments. This group offers a safe place where they can vent out, express their thoughts, and share their knowledge and experiences. With this, they could also learn about coping and be an advocate to other people so that they are aware.

Theme 1.3: Public View of Patient Condition

When it comes to the public view about the term cancer. One of the key informants said, "***kawawa ka naman mamamatay ka na***" (Poor you, you're going to die). Other people take advantage of their weakness to abuse them by means of verbal abuse; sometimes also, their neighbors steal from

their sari-sari store because they know she doesn't. This kind of abuse is very traumatic for them. However, one of the key participants said that she always looked into the positive side as these scenarios happen. They accept the fact that other people don't know what their condition is and other people don't know what they say or do affects them too badly. Acceptance and forgiveness are two of the keys to setting oneself free. The researchers could see that these two processes prevent us from holding on to the past and make everyone move into a better future. It provides a positive energy that all the worries come along.

Theme 1. 4: Overcoming the Difficulties

"***Hindi mawawala ang pagtitiwala ko sa Diyos***" (I will not lose my trust in God), as stated by all the key participants . Every person has experienced challenges, failures, and difficulties in life. There are times when those events are uncontrollable. Providing that all of them take all the risks. All of the key participants said that nothing is impossible when you believe and everything will be alright. Also, overcoming the difficulties in their life wouldn't be possible without having their support team, such as their husband, children, close friends, and other supportive family relatives. With the unending support and constant encouragement.

Theme II: QUALITY OF LIFE

Theme 2. 1: Treatment Process and Effects

There are different types of cancer treatment that a cancer patient undergoes; these are chemotherapy, radiation therapy, immunotherapy, targeted therapy, stem cell or bone marrow transplant, hormone therapy, and surgery. The most common type of cancer treatment that the participants undergo is commonly chemotherapy and radiation therapy. Chemotherapy is a primary treatment that is done to destroy cancer cells. It prevents the cancer cell from growing and enlarging and increases its number of cells. The drug flows through the bloodstream and circulates throughout the body until it reaches all parts of the system. Chemotherapy is also given before the surgery to shrink or constrict the tumors.

Radiotherapy, also known as radiation therapy, is a cancer treatment that uses a high-energy beam or rays of radiation to shrink tumors and kill cancer cells. Combining both chemotherapy and radiotherapy is often more effective, though it depends on the severity of the tumor. Regarding the key participants, these treatments have different side effects on their body. They experienced nausea, vomiting, fatigue, loss of appetite, alopecia, feeling of being sick, etc. These greatly affect their health; however, they said the treatment gives relief to the pain that they feel.

Theme 2. 2: Benefits and Hindrances of Treatment

Throughout the treatment process, key participants said. "***Malaking bagay ang naitulong ng pagpapa chemotherapy, nababawasan ang sakit na aking nararamdaman***" (Chemotherapy has helped a lot, the pain I feel reduced.) They feel solace as they go through their treatment; though there are after-effects of the treatment, key participants felt that there are big improvements beyond their condition.

Treatment of breast cancer has different cycles and schedules. The patient must not fail to attend to the treatment. The informants cite some hindrances that caused them to miss their therapy. Includes: a. No available vehicle that can be used to go to the hospital, b. The feeling of being sick, such as cough, cold, weakness, and fatigue, c. Need enough time to process the papers for medical assistance to government agencies so they can avail themselves of the medicines they need for their treatment. As mentioned above by the key participants. These hindrances never let them stop pursuing and fighting against breast cancer. It gives them motivation to do or seek more. And keep them motivated to overcome the challenges that they encounter in the cruel world.

Theme 2. 3: Strengths Brought by Moments

Amidst the diverse situations of every individual, a challenge is a situation wherein something that needs great effort in order to successfully overcome and test a person's ability to manage

him/herself. These challenges or problems could result in a breakdown that affects one's personality. With the support of their relatives as a support group, they spend most of the time talking, going out, and having bonding moments. Time spent by the participants and their relatives gives them strength and makes them feel safe and okay. Also, they help them to be like an ordinary person without sickness when they are with the support group.

Theme 2. 4: Reason to Stand and Live

"***Gusto kong mabuhay para sa aking pamilya at lalong lalo na aking mga anak***". (I want to live for my family, especially for the children). A steady response between the key participants. They were the reasons why they pursued living so that they could guide their children as they age. To see their children grow and provide what they need. Though they couldn't give it fully the care they wanted to share, just seeing the important person gives them so much strength to strive and be eager to live and survive.

4 DISCUSSION

The purpose of the study was to better understand the lived experiences of women with breast cancer by means of their quality of life, emotional burdens, treatment and coping process. Sometimes, they felt abandoned, though they were thankful to God that they were being guided by him.

Consistent with the literature Rajagopal et al. (2019) said that women experience high levels of distress because of image disturbances that make a huge impact with regards to emotional stress. However, the key participants also added that they experienced being an apple of the eye of the public, which leads to bullying, but they didn't take it as a hindrance to showcasing who they are. They only consider it in an optimistic way that other people don't know or don't have enough knowledge of what they have gone through or experienced. That's why they could tell it without knowing how hurtful it is for them. As seen, the support team consists of their spouses, children, friends, and health care providers, which provide them comfort and freedom.

In the present study, the participants at first only knew that breast cancer is the end of life, but as they went to treatment. Eventually, they concluded that it was not the end; there was hope. Cancer can be cured by proper treatment and medicine. Which brightens the darkest days of their life. The support that they received from the providers and group supporters changed, and also the expectations of the family and friends changed with positivity. They suggest that the support they receive must be consistent until they recover and transition to a new life.

The key participants in the study convey how important awareness is with regard to breast cancer symptoms, management, foreseeable risks, and progressions through the treatment and recovery stages. They added that with the support of organizations managed by health professionals and other cancer survivors, they anticipate the importance of awareness for all new patients and other women with regards to breast cancer. With that early detection, care and management could be served. They also advised that if a person is in doubt and sees symptoms manifest like breast cancer, it would be better to seek professional advice rather than doing self-treatment. Ullah et al. (2021) had a strong statement that there is a greater need to enhance awareness of women regarding breast cancer in their study. Studies have shown poor awareness regarding warning signs of breast cancer because of cultural sensitivity. Women feel embarrassed to share about their breasts; thus, most of them remain undiagnosed and untreated.

The primary objective stated by every study participant was to fight cancer. As one participant said, "I want to live for my family, especially for my children." Having a loving family and children was a source of strength, helping them find meaning in their battle against cancer. This sentiment is supported by Bosankic et al. (2021), who state that finding meaning in fighting cancer involves reevaluating one's purpose and role in life. Dealing with the illness made them realize the essence of life, redefining their role as a parent and prioritizing their child's needs and care above their own. Furthermore, despite battling cancer, women found the strength to be there for their family and continued to be good parents, considering it their moral duty.

In times of hardship, such as battling life-threatening illnesses, women cling to their religious beliefs. All the main participants maintain their faith that nothing is impossible when they believe. Faith offers comfort and strength during the challenging journey of fighting the disease. This is supported by a study conducted by Sukartini et al. (2020), which suggests that religion is crucial in the process of finding meaning. Religious beliefs enable individuals to confront their health conditions more positively, giving them the strength to overcome life's difficulties when there seems to be no other hope. Furthermore, finding meaning in life helps women navigate stressful changes due to breast cancer. Therefore, religious beliefs can profoundly impact breast cancer patients, offering them support, comfort, and hope throughout their struggle with the disease.

5 CONCLUSION

According to Marini (2014), narrative medicine is used as a tool that explores living with illness by the patients, caregivers, and their providers of care. It also evaluates the light and shadows in the illness of people affected by a certain disease or illness, and it brings more coping; the mere action of each telling or writing their own pattern of living with the disease is already shown to be therapeutic in itself. By using an interview, the two main themes were identified to address an issue or area that is unseen and should be further investigated. This study hopes to provide a set forth to the lived experiences of the women and appraise all the health agencies for awareness with regards to breast cancer early detection and management. The study comes to the conclusion that although those who have been diagnosed with breast cancer have experienced feelings of isolation, frustration, despair, and worry, they also have a commitment to fight the disease despite its difficulties. Balancing work and life needs has significantly changed the participants' lives. However, the support from the family and friends contributed to the coping and still proved what being a survivor meant to them.

REFERENCES

Bosankic, N., Draganovic, S., Ramic, J., & Haque, A. (2021). Every Cloud Has a Silver Lining Lived Experience and Coping Strategies of Breast Cancer Survivors in Sarajevo. *Journal of Muslim Mental Health*, *15*(1). https://doi.org/10.3998/jmmh.132

Breast cancer. (2021). https://www.who.int/news-room/fact-sheets/detail/breast-cancer

Marini, M. G. (2014). *The coping energy through narrative medicine.* https://www.medicinanarrativa.eu/coping-energy-narrative-medicine

Mehrabi, E., Hajian, S., Simbar, M., Hoshyari, M., & Zayeri, F. (2016). The Lived Experience of Iranian Women Confronting Breast Cancer Diagnosis. *Journal of Caring Sciences*, *5*(1), 43–55. https://doi.org/10.15171/jcs.2016.005

Northall, T., Chang, E., Hatcher, D., & Nicholls, D. (2020). The application and tailoring of Colaizzi's phenomenological approach in a hospital setting. *Nurse researcher*, *28*(2), 20–25. https://doi.org/10.7748/nr.2020.e1700

Qeidari, H. S., Seyfi, S., Hall, C. M., Vo-Thanh, T., & Zaman, M. (2023). 'You wouldn't want to go there': what drives the stigmatization of a destination? *Tourism Recreation Research*, 1–12. https://doi.org/10.1080/02508281.2023.2175561

Rajagopal, L., Pranee, P., & McBride, K. A. (2019). The Lived Experience of Australian Women Living with Breast Cancer: A Meta-Synthesis. *Asian Pacific Journal of Cancer Prevention : APJCP*, *20*(11), 3233–3249. https://doi.org/10.31557/APJCP.2019.20.11.3233

Sukartini, T., Dewi, L. C., Nihayati, H. E., Laili, N. R., Nandaka, I. K. T., Nugraheni, A., -, & -. (2020). The Lived Experience of Women with Breast Cancer. *International Journal of Innovation, Creativity and Change*, *13*(6), 249–262. Retrieved 2024-06-20, from file:///C:/Users/HP/Downloads/The%20Lived%20Experience%20of%20Women.pdf

Sun, F.-K., Long, A., Tseng, Y. S., & Yao, Y. (2022). Exploring Meaning of Life in Women With Breast Cancer in Taiwan: A Phenomenological Study. *Journal of Nursing Research*, *30*(5), e236. https://doi.org/10.1097/jnr.0000000000000514

Ullah, Z., Khan, M. N., Din, Z. U., & Afaq, S. (2021). Breast Cancer Awareness and Associated Factors Amongst Women in Peshawar, Pakistan: A Cross-Sectional Study. *Breast Cancer: Basic and Clinical Research*, *15*, 117822342110253. https://doi.org/10.1177/11782234211025346

Wu, T.-Y., & Lee, J. (2019). Promoting Breast Cancer Awareness and Screening Practices for Early Detection in Low-Resource Settings. *European Journal of Breast Health*, *15*(1), 18–25. https://doi.org/10.5152/ejbh.2018.4305