



Spiritual Experience of Breast Cancer Patients Undergoing Chemotherapy; Hermeneutic Phenomenology Study

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ABSTRACT

Breast cancer is the highest percentage of cancers and the biggest of new cases and deaths among adult women. Until recently, little information is known from study results regarding spiritual experience of breast cancer patients who undergo chemotherapy. This study provides a deeper understanding of spiritual experience among women with breast cancer who undergo chemotherapy. The purpose of this study is to obtain in-depth information about the spiritual experience of breast cancer patients who undergo chemotherapy in West Sumatera. The study design was a qualitative hermeneutic phenomenology. Fifteen participants participate in this research. Methods of data collection are in-depth interviews and field notes (field notes). Data Analysis method used a hermeneutic phenomenological approach by Diekelmann, Allen, and Tanner (1989). This research finds five main themes: (1) the vertical relationship with Allah Swt, (2) relationships with family, community and healthcare workers, (3) chemotherapy and spiritual activities, (4) patient's expectations related diseases and conditions, and (5) resigned to accept the conditions or situation. Study finds can provide a contribution to nursing practice, education and research. Further researches are expected with a qualitative approach from the perspective of the family, or community health workers so see another perspective associated with breast cancer undergoing chemotherapy. In addition, a quantitative research is needed to determine the next interventions for breast cancer patients.

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INTRODUCTION

In 2012, around 8.2 million deaths worldwide was caused by cancer, lung, liver, stomach, colorectal, and breast cancer specifications being the biggest causes of death each year (WHO, 2012). In America, 32% of incidents of breast cancer occur in women and less than 1% occur in men. Breast cancer is most diagnosed at the age of 40 years and above, but the most cases occur at the age above 50 years. The presence of a benign tumor in the breast will increase the incidence of breast cancer (Luwia, 2009). For chemotherapy in cancer patients performed in stage III (American Cancer Society, 2013; The Union for International Cancer Control (UICC), 2013). The prevalence of breast cancer in Indonesia in 2013 is estimated at 61,682 people or 0.5% and the province that has the highest prevalence of breast cancer is Central Java, which is 0.7%, with an incidence of 11,511 people (Riskesdas, 2013). The province of West Sumatra ranks seventh for breast cancer with an incidence of 2,285 people or 0.9% and this number continues to increase from the previous year with the number of cases of 2,120 people (Center for Data and Information of the Indonesian Ministry of Health, 2013). West Sumatra is the second province in Indonesia where people suffer from cervical and breast cancer with a percentage of 20 percent where Padang and Solok are the most numerous areas of cervical and breast cancer (Cancer Institution of Indonesia, 2016).

Someone has a good spirit if the person has full hope, optimism and positive thinking, on the contrary, if someone loses his spirit, then that person will show a hopeless, pessimistic and negative thinking attitude. Spiritual needs are a need to find meaning and purpose in life, the need to love and be loved and a sense of attachment, and the need to give and get forgiveness (Hamid, 2008). Words used to describe spirituality include meaning, transcendence, hope, love, quality, relationships, and existence (Potter & Perry, 2010). Spiritual needs are the need to find

meaning and purpose in life, the need to love and be loved, and the need to give and get sorry (Kozier et al., 2010). Spiritual aspects are religious beliefs or beliefs that are very important in the personal life of individuals and are known as a strong factor in healing and physical recovery (Hamid, 2008). Spirituality overcomes losses that occur throughout life with hope (Stanley & Beare, 2012). Another study also showed that there was a significant relationship between spiritual status and quality of life in the elderly (Yuzefo, Sabrian, & Novayelinda, 2015). According to Daaleman & Vandecreek (2000), an understanding of spirituality in the context of end-of-life care and interaction between patients and clinicians will reduce the spiritual problems that will arise. When the physical condition is disturbed there is a possibility that someone experiences emotional changes. In these conditions, a person's spiritual component is very important to overcome the emotional changes (Choumanova et al., 2006; Noor, 2012).

Breast cancer patients need spiritual power to live their lives. Spirituality includes belief in God (higher power), religious practices, cultural beliefs and practices and their relationship with other people or the environment both internally and externally (Videbeck, 2008). Breast cancer patients must face a disease that affects not only the patient's physical health, but also psychological, social and spiritual conditions (Prastiwi, 2012). Individuals will experience solitude and an unknown environment and feel insecure. The pattern of daily activities will change for example, attending formal events, religious activities, meeting with family members who support him (Susanti, 2009). Individuals who experience loss and suffer from serious illnesses such as women with breast cancer report that religious, spiritual and social support is very important (Mozlan & Sheilds, 2008). Spiritual well-being also influences the quality of life of

cancer patients and for that reason nurses are expected to integrate spiritual care into the nursing process (Potter & Perry, 2009). Chemotherapy treatment, causes physiological side effects and psychological effects including stress, anxiety, fear of death, fear of being burdened, fear of abandonment, disability and impaired self-esteem (Kovacic & Kovacic, 2011). Cancer patients who undergo chemotherapy treatment experience unpleasant physiological effects such as hair loss, fatigue, bleeding, dry black skin and itching, nausea, vomiting and abdominal pain, decreased sexual appetite and fertility. Changes in body image due to physical changes that accompany treatment have been found to be a psychological response that is very pressing for people with breast cancer (Stuart, 2013). Research on the spiritual experience of breast cancer patients is still limited, especially in West Sumatra.

This study uses a hermeneutic phenomenology approach to understand deeply the spiritual experience of women with breast cancer undergoing in West Sumatra. Until now there is still little information from the results of research on the spiritual experience of breast cancer patients undergoing chemotherapy in West Sumatra. Therefore the use of qualitative phenomenological methods is more appropriately used to explore in-depth information about spiritual experiences in breast cancer patients in West Sumatra.

This research explores in depth about the experience of breast cancer patients undergoing chemotherapy with the hermeneutics phenomenology approach (Heidegger) to understand the meaning and the meaning of life and life experiences of participants (Draucker, 1999) and hermeneutics phenomenology will multiply the factors that influence the meaning profoundly (Heidegger, 1962). In particular, the research aims to obtain information about spiritual experiences related to worship activities, the meaning of life, acceptance of

diseases and conditions, chemotherapy treatment and acceptance of chemotherapy in Sumatra.

METHOD

This study is a qualitative hermeneutic phenomenology. This research was conducted in one of Padang, West Sumatra hospitals. Dr. Hospital M. Djamil Padang is a hospital in West Sumatra which is an advanced reference for the Central Sumatra, Jambi, Riau and Pekanbaru regions for breast cancer. The study participants were 15 breast cancer female patients who underwent treatment with chemotherapy. The researcher determined participants using purposive sampling (Nursalam, 2008), was chosen to be oriented towards the research objectives (Afiyanti & Rachmawati, 2014). Research participants were chosen by the researchers themselves. The inclusion criteria for the study participants were: (1) breast cancer patients undergoing chemotherapy treatment (2) at least 18 years of age; (3) willing to sign an informed consent (4) and willing to be interviewed and recorded the conversation by the researcher. According to Boyd (2001), Creswell (1998), and Morse (1994) that 15 participants in phenomenology research were more than enough for data saturation. In this study, saturated data was obtained in the tenth interview.

One method of data collection in this study is in-depth interviews. When interviewing for one participant around 30-60 minutes. The timing of this interview is based on information that will be explored which covers the overall information both positive and negative and the participants' subjective meanings in depth. In addition to in-depth interviews, other data collection methods used are field notes. Field notes are chosen because they can complement the information provided by participants verbally in the interview process. Field notes are used to document nonverbal responses that contain descriptions of time and place which are descriptive of the interview process. Other

data collection methods are observed as a process of researchers in looking at situations related to observing the conditions of interaction, behavior and interaction between researchers and participants. The aim is to describe the focus studied, who, when, how, where and why something happened. The tools used in observing this study are sets of observation paper, records of events and information obtained from observations. In this study, information obtained through interviews was recorded using mobile phones and tape recorders. After that, verbatim transcripts (making the results of interviews in written form) are made. In this study, analysis of hermeneutic phenomenological research data (Heidegger phenomenology) according to Diekmann, Allen, and Tanner (1989) were used to organize, compile and analyze data comprehensively.

RESULTS AND DISCUSSION

Research result

Theme 1: Vertical relationship with Allah SWT

The condition of breast cancer undergoing chemotherapy does not make participant relations with Allah worse. The results of the study showed that the patients were still active in carrying out daily worship activities which were a manifestation of the relationship with God that was still well established. One participant said that he would still go to the mosque to perform prayer services and perform a fasting:

Worship is still being done, if I don't get sick, I still go to the mosque,... Subuh prayer also goes to the mosque, if Maghrib time my child is still working, so I pray in the house... Prayer... five times a day... Keep reciting but once in a while... Sometimes at night, it's already done. Continuing fasting from childhood has been taught by parents, fasting Monday and sometimes Thursday (PS.1).

The results of the study also showed that participant worship activities got better during breast cancer. In addition to the condition of suffering from breast cancer

undergoing chemotherapy, participants also became more active in worshiping. A participant said that he was active in reciting Yasin and attended the Taqlim assembly and recitation at the Mosque:

Gathering we listen to religiously, passage of the koran, reciting Yasin, once a month we gather together, in one district... Every surau or mosque throughout the sub-district has its taqlim assembly. So some of the months gather taqlim assemblies, there are 20 to 27 taqlim assembly... Listen to the Ustadz, after reciting Yasin. Once in a while, in mosques, Maghrib, Subuh... Yes, there are wired every week... Pengajian, Qur'anic surgeries, that kind of thing, once a week at the mosque, reciting the holy Quran then sprinkle with the Ustadz (Ps.9)

However, breast cancer also affects worship activities. One participant said that since he was ill and underwent chemotherapy, he did prayer activities at home and rarely recited and did not take part in tackling assembly activities.

Before the mother's illness prayed at maghrib and at subuh in the mosque, but after the mother's illness prayed at home,... Once in a while, if it doesn't hurt the recitation, but if it hurts immediately take a break... Yes, before we get sick we go to recitation. In the taqlim assembly... It will be once a month, sometimes once every 2 months, but since the illness doesn't come again (Ps.2).

Other participants believe that God is rebuking him by giving a test of suffering from breast cancer and getting closer to Allah SWT:

.... Just draw closer to Him, because the illness that we suffer from is not an illness [small]... this is a test from God, a rebuke from Allah, because every time we are reprimanded, we must be wrong, meaning God is still dear, still given us a trial,... that means he still loves us. For example, gold is tested if silver is not tested... His life is more meaningful, because of this test, we draw closer to Him. Because He gave us this illness, we draw closer to Him... The two draw closer to God because humans will die. The third is for our families and children... whatever he gives, O God, whatever you give means that there is the best way, it is impossible for us to be given the test without a solution (Ps.4).

Theme 2: Relationships with family, community and health workers

The results of the study prove that the participant relationship with breast cancer who underwent chemotherapy with the family was well established. One participant said that his family supported him:

All is well, at least we can help our children, the first child to work, now if we are healthy we can help the children... the family support say to consul to the hospital, the problem will be bigger, it will get worse, when will you... when do you... don't be late... Many of the older siblings have support, operate... Yeah bathed, cleaned, put on powder, use it clothes, prepared food, don't be disgusted with her, Doc, why is it disgusted with mother (Ps.1).

One participant said there was support from her husband and revealed that her husband was more affectionate:

Yes, my husband is more affection hehehehe [laughs], understand... now with children, the first time the husband comes, the first chemo husband comes. The husband also accepts, the more affection.... The husband still encourages. He said this was God's will, we should not try to get angry. Healing, I was escorted by my husband (Ps.6).

Participant relations with their neighbors are well intertwined, one participant said: there is support from his neighbor:

The single brother was with a brother who had a family, a close house... we both of us, my sister and neighbors... All is kind. They are the one who takes care of us, my sister basically support us... Neighbors,... they give enthusiasm, live it, God willing... Fine, and they support me, mother (Ps.2).

Participant relations with the people who live in their homes are also well established, one participant said that if the person in his village has a good relationship even the people in his village visit and pray for him to be healthy:

For the people around the mother,... the social community... When mother sick, they came to visit, pray for the mother to get well... Yes, come on, we have unity too. For example Taqim assembly, there is unity if there are sick people who are helped....

Divided a little to be happy, if there are those who are often get together, cook vegetables for the night (Ps.5).

The results of this study also showed that the relationship of participants to breast cancer who received chemotherapy with health workers was good. One participant said that he received support from health workers:

The health center community gives the support, we got the progress of information, we do know if they are not inform. When the mother is in the hospital, the relation between the mother and the health worker is good (Ps.4).

Another participant said doctors and nurses supported him by encouraging patients to seek treatment:

Said to be treated, it's okay, the doctor said at the hospital. In the health center community, the nurses are good, if they are sick, they do not need a lot of thoughts, they say that they seek treatment at the MD (hospital),... the tools are complete, he said (Ps.7).

Theme 3: Chemotherapy and spiritual activities

The results of the study prove that the effects of chemotherapy due to breast cancer include dizziness, nausea and vomiting that affect worship and spiritual activities. One participant revealed some of the negative effects of spiritual chemotherapy related actions:

Can't sit for 4 days, nausea, vomiting, lung, stomach... with the common effect of mother's activity... changing dizziness, nausea, vomiting. Initially nausea, vomiting, so the mother does not worship, because conditions are not possible, where do we want to pray... But after the cameo effect [chemotherapy] the mother lost worship again..... Yes, because it can't, after being chemotherapy the mother feels nauseous, so the mother has not recovered (Ps.5).

Theme 4: Patient expectations regarding disease and conditions

The results of the study prove that breast cancer patients who undergo chemotherapy

have hope for chemotherapy treatment that with this therapy so that he can recover:

In order to recover, the cell [cancer] can die... After being chemotherapy, so that it will heal, the illness will not return, so that it will run out [cancer cells]. Mother's prayer is finished with her chemotherapy, never do that again (Ps.8)

Other participants revealed about his submission and he continued to try and endeavor to God:

The best thing is to get well... no more surrender. The main thing is trying, and the important thing is trying to leave everything the same above [God]... Can be cured and can live life as usual,... can enjoy old age, can see successful of grandchildren (Ps.9)

In addition, the results of the study found participants' expectations for breast cancer he suffered. A participant said about his wish to recover and be able to move as usual:

... My hope want to get well, so that mother can try to work, religion is even more active. Hopefully more healthy. If sick, there must be death, we want to get well,... The purpose of life first is to get well (Ps.1)

Theme 5: Resign to accept situations or conditions

From the results of the study, participants with breast cancer who underwent chemotherapy resigned to the disease and conditions suffered. A participant resigns and says he is still passionate about living his life:

We surrender to God. We must be enthusiastic, spirit is a medicine for people who are ill. Can you make it, it has happened, you can't avoid it... Leave us alone... What can I do? Yes, just accepted. Surrender but keep trying... Thank God you can accept [her condition] (Ps. 10).

Breast cancer participants consider everything to be fate or the condition of the disease is a trial and test from God or the will of Allah SWT:

We accept what He [God] gave us is a trial for us... if not given a test by Him... Only the world is thought... This test makes us [patients] think ahead because we are given a test by Him (Ps. 4).

One participant said that breast cancer he suffered could possibly reduce his sins:

It's the situation that people say to reduce their sins... Some views that cancer hurts not long, but

You just live... Yes, this is a destiny of God (Ps. 5).

One participant said that breast cancer, which is suffering could possibly reduce her sins :

It's the situation that people say to reduce their sins... Some views that cancer hurts not long, but I just live ... Yes, this is a destiny of God (Ps.5)

DISCUSSION

Spirituality related to spiritual relations with the Creator (Allah SWT)

Spirituality can be interpreted as the relationship between humans and their God. Breast cancer patients tend to be influenced by the value of spirituality in dealing with the disease. In this study, the vertical participant relationship of breast cancer patients undergoing chemotherapy with Allah SWT especially related to worship activities became better. Patients say that Allah is most merciful, sincere and surrendering. Cancer is a test, humans are God's creations and their illnesses can reduce sin. Participants stated that she still went to the mosque to recite and pray. This proves that worship activities and vertical relations with God are still going well. The spiritual growth of cancer patients is explored in the form of prayer, recitation, reading the Koran, reading religious books (Ningsih, 2013).

Optimism as a patient's personal resources increases, one of which is influenced by the awareness of the transcendent dimension (God Almighty) in his life (de Jager Meezenbroek et al., 2012). There is a relationship felt by patients with something that is transcendent (God and higher power). Participants feel an event that befell them is a test bestowed on him (Craven & Hirnle, 2003). There is a positive correlation between spirituality and quality of life for women with breast cancer patients (Wildes et al., 2009).

Susanti & Tarigan (2012) states that the cancer suffered by patients is believed to be a test, eradication, punishment, reprimand, and even felt enjoyable by cancer patients. The Thuné-Boyle, et al. (2011) study in the United Kingdom, showed that the strength of faith and religious / spiritual practices felt by patients were significantly higher after the diagnosis of breast cancer. The worship activities carried out truly believed to be able to balance the stressful turmoil and emotions of a person (Nirhayati, 2016). However, there is a potential loss related to the spiritual in the form of difficulties in worship due to the movement for worship to be limited, participants who rarely worship than usual in breast cancer patients.

Gall, Kristjansson, Charbonneau & Florack (2009) found that cancer women who have aspects of involvement in religious or spiritual activities that are lacking before being diagnosed with breast cancer, and actively engage in religious and spiritual activities during treatment will experience spiritual problems and doubts that will affect treatment. Cancer patients who have a low level of spirituality tend to be more depressed (Hasnani, 2012). When someone is finished worshipping, the mind, heart and emotions become calmer and more stable. Praying is a spiritual therapy that is often carried out by cancer patients and prayer has great personal value and is a source of need for courage and strength (Ornish et al., 2007). The results of the study revealed that 13.3% of breast cancer patients had a lack of trust in God or religion and 20% of participants in breast cancer rarely did Palu (2013). In this study, women who suffer from breast cancer do not make patients stay away from God, but conversely worship activities get better, because patients pray more, worship more solemn and consider religion to be important. It can be concluded that daily participant worship activities are still going well. This can greatly help breast cancer patients live their lives.

A similar study was also conducted by Balboni et al (2007) and it was found that

96% of adults in the United States expressed trust in God and 70% of them revealed that religion was one of the most needed for patients with cancer. Breast cancer patients who undergo chemotherapy for their worship activities at the mosque are also more active, patients attend lectures and recitations, reciting Yasin once a month and follow taqlim assembly. One of the external factors that influence the spiritual growth of women with breast cancer is the presence of clerics who guide cancer patients to think positively to God (Ningsih, 2013). A religious community is needed by someone who often meets with believers who will be able to increase the person's faith (Kozier, 2010). Cancer patients who have strong religious sources will deliver these patients to a better-than-expected prognosis (Bussing et al., 2008). In this study the conclusions and interpretations are that breast cancer patients continue to worship such as prayer and other activities such as recitation, wired, listening to lectures, reciting together at the mosque.

It can be concluded that the spiritual breast cancer patients who undergo chemotherapy are getting better where the patient still surrenders himself to God and does not consider it a punishment but is a trial or rebuke so that the patient is getting closer to Allah SWT. In other words, because of the condition, the patient does not become far away from God, but the patient becomes increasingly dean and the relationship with God is also getting better. Spiritual related problems or disorders (e.g., feelings of abandonment by God) are issues of patients suffering from cancer, including breast cancer (Winkelman et al., 2011; Hui et al., 2011; Alcorn et al., 2010; Sharma et al., 2012).

Spirituality related to human relations

Because health workers are the ones most trusted by breast cancer patients, a good relationship and support from health workers will be very beneficial for breast cancer patients. From the research, the relationship

between patients and health workers is good, where doctors, nurses and midwives continue to provide motivation, moral and spiritual support to patients. In this study it was found that the relationship between breast cancer patients who underwent chemotherapy and their families was well established. There is support from the husband, support for the child, and support from his brother. Cancer patients need family support in pursuing ways to deal with emotions, medication, and later lifestyles (Muhammad, Afshari and Kazilian, 2011). Support from the family allows the family to function fully and can improve family adaptation and health (Friedman, 2010). The spiritual dimension can foster strength that arises beyond human strength. Research participants still get support from their husbands, children and relationships with family members are also good. The relationship between the patient and husband is good, for example the husband's support for breast cancer patients, the husband accompanies when he is treated.

Ningsih (2012) indicates that it is very important that the husband's role or husband's support is very influential on his wife to give her confidence so as not to despair of her illness. In H. Adam Malik General Hospital Medan, the higher the family support, the higher the self-esteem of breast cancer patients undergoing chemotherapy (Handayani, 2010). The role of the family is very important in care to improve the spirit of life and commitment of patients to continue to undergo breast cancer treatment. Support from the family can provide positive results for health and well-being in breast cancer patients (Rachmawati, 2009). High spiritual beliefs for a cancer patient can undergo activities in his life well and can improve relationships between families (Rahnama, Khoshknab, maddah & Ahmadi, 2012).

The understanding of the family that gives attention, services to patients, provides motivation by always being present and a place to tell stories in the midst of patients experienced will be very helpful in the treatment of breast cancer. A good

relationship between breast cancer patients who undergo chemotherapy with family (husband, child, child or sibling), community (neighbors) and health workers can be a strength for patients to live their lives and undergo the treatment they are undergoing. Lack of support from family, friends and others will lead to depression in breast cancer participants (Maeda et al., 2014). However, there are studies that breast cancer patients are not fully supported by the family to treat the disease where patients are forbidden by the family to perform breast removal surgery (Tiolena, 2008). As with patients with mental disorders, family and community relations with patients are sometimes not harmonious so there is a lack of family and community support (Subu, 2015).

From the results of the study it was found that the social relations of participants with neighbors around their homes were well interwoven. There is support from their neighbors by encouraging them to undergo treatment and helping when participants ask for help. Social support is positive feelings, likes, trusts, and attention from other people, namely people who are meaningful in the lives of individuals (Ozkan & Ogze, 2008). According to Wardiyah, Afiyanti & Budiati (2014), there is a positive effect of social support on optimistic recovery of patients and women benefit from the positive social support for their healing spirit. Thus, it was concluded that the relationship between patients and their neighbors and surrounding communities was well run. Support from others can encourage participants to seek treatment and move with others so that there are positive benefits obtained by the patient. Ardahan & Yesilbalkan (2010) stated that support from other people, including families has a positive impact on the trust and spirituality of breast cancer patients in Turkey.

Participant relations with health workers are also well established. For example, nurses have many thoughts, suggest buying vitamins, nurses and midwives recommend treatment, pray a lot and trust everything to

God. Doctors also always provide referrals for better hospital treatment. Providing spiritual support is one of the roles of nurses nursing care services. Spiritual support given by nurses to fulfilling spiritual needs will enhance the spirituality of participants. Spiritual support provided by nurses in fulfilling spiritual needs will increase the patient's spirituality (Hamid, 2008).

According to Krippendorff (1998), the majority of study participants reported the existence of adaptive conditions in physiology, self-concept, function, role, and the effects of interdependence between breast cancer patients and participate in support groups. The role of health care workers is to provide health education proactively about various patient strategies in overcoming the negative aspects of chemotherapy (Mattioli, Repinski & Chappy, 2008). The existence of spiritual support by nurses can motivate patients to carry out their worship activities according to their respective beliefs (Chan, 2009).

Spirituality is related to chemotherapy

The results of the study prove that the chemotherapy obtained by some breast cancer patients has little effect related to spirituality. The side effects of chemotherapy are felt, such as nausea, vomiting, dizziness in breast cancer patients. Most breast cancer patients with chemotherapy experience hair loss, feeling nauseous and vomiting, which interferes with their activities in performing worship activities. However, the action of chemotherapy also has a positive effect, the cancer shrinks, turns off the cancer cells, some participants say they know the chemotherapy procedure and this results in understanding related to good spiritual participant experience. Breast cancer patients while undergoing chemotherapy treatment still have a good spiritual picture that is accepting conditions experienced by increasing spirituality (Choumanova et al., 2006; Intang, 2012).

From the results of the interpretation of this study is that breast cancer patients get side effects from chemotherapy treatment that experience problems such as hair loss, nausea, vomiting, dizziness. However, participants are still trying to keep on doing other religious and spiritual activities, even with unhealthy conditions due to the side effects of chemotherapy.

Spirituality related to patient expectations regarding illness and conditions

Breast cancer patients with chemotherapy have hope for treatment. Their hope is that chemotherapy can kill cancer cells, hope for the disease to recover and move back, cancer can be removed, taken by God. In addition, participants in the study continued to try to surrender everything to Allah SWT. The hope of participants to recover is a motivation from within to fight illness and undergo the treatment process. The enthusiasm of the participants was shown by expressions that they must be passionate and strong to endure the pain experienced in the desired healing. Yanez et al. (2009) proved by research on the relationship between spiritual well-being and psychological conditions and patient expectations and hope for recovery is the hope of cancer patients. Cancer patients try to learn to live in uncertainty, define and identify each of their spiritual developments (Alcorn et al., 2010; Hasnani, 2012). There is a close relationship between spirituality and personal characteristics and expectations related to breast cancer (Meraviglia, 2006).

The interpretation of the results of research related to breast cancer patients' expectations is that breast cancer patients with chemotherapy therapy have hopes to recover and believe that the chemotherapy treatment they are carrying out will help them to return to health. Patients also believe that the recovery they get is also help that comes from God. Helping patients to explore and develop, this is the most important part of spiritual care.

Spirituality related to the acceptance of situations or conditions

Breast cancer participants with chemotherapy surrender and accept the condition or condition of breast cancer sufferer. They remain sincere and consider everything to be a trial and destiny of God. Personal resources play an important role in the reception of chronic diseases including breast cancer. Breast cancer patients seem calm undergoing therapy after reassuring that everything they experienced was a trial from God. Spiritual offers health promotion that focuses on psychological well-being in breast cancer patients (Alcorn, et al., 2010; Ningsih, 2013).

Individuals who consider cancer to be a threat, will turn out to be a challenge if individuals have spiritual power. There is a moderate positive correlation between spirituality and acceptance of disease in breast cancer patients, thus, the higher the spiritual level of breast cancer patients, the higher the acceptance of the disease (Arnovela, 2011). Pain in the breast disrupts the self-acceptance of breast cancer patients (Balboni, et al., 2007; Rahayu, 2009). The interpretation of the results of the study is that breast cancer patients who receive chemotherapy except the state of illness. This is also influenced and closely related to the adaptive ability of the spirituality that is owned by the patient. The patient considers the pain he suffered is a trial from God and therefore participants of breast cancer still sincerely accept the conditions he suffered.

CONCLUSIONS AND SUGGESTIONS

Breast cancer patients as participants who undergo chemotherapy continue to actively carry out daily worship activities even though they are ill. This study also found that the relationship between breast cancer patients who underwent chemotherapy with Allah SWT especially related to worship activities became even better. Participants consider the illness to be a test, humans are God's

creations and their illness can reduce sin. The correlation between breast cancer patients who undergo chemotherapy with a good family, support from their husbands, support from their children, and siblings. Participant relations with the community are also well established. Neighbors around the house and the people in their village visit, pray for health, and support the surrounding community. Breast cancer patients who undergo chemotherapy believe that chemotherapy has side effects such as nausea, vomiting, dizziness, but some breast cancer patients who undergo chemotherapy continue to carry out daily worship activities slowly. Breast cancer patients who undergo chemotherapy still have a life expectancy and hope to get well soon, cancer can be removed, taken by God. They also continue to try to surrender and all are related to breast cancer and chemotherapy to Allah SWT. In addition, patients as breast cancer patients who undergo resigned chemotherapy, accept the conditions and conditions of their illness, be sincere, consider trials, and fate. From the information obtained, it shows that patients as breast cancer patients undergoing chemotherapy still have good spiritual beliefs. Even some participants revealed that their spirituality was even better after they had breast cancer.

The results of this study can contribute to nursing practice, service, education and research. For the practice of nursing services, the results of this study can be used as a reference or as a basic description of room nurses who treat breast cancer patients so that it can be used as a basis for implementing the spiritual needs of breast cancer patients, especially those receiving chemotherapy. For nursing services, except the existence of spiritual care nursing problems that are in accordance with the needs of breast cancer patients who are holistic in relation to the relationship with Allah SWT and relationships with others. Related to the side effects of chemotherapy experienced by breast cancer patients who undergo chemotherapy, eating research is the basis for

collaborative treatment of health workers to reduce the side effects of chemotherapy. For nursing education, the results of this study can be the basis of reference for thinking about the existence of materials related to spirituality in the nursing education curriculum specifically so that students are able to carry out nursing care related to spiritual problems for breast cancer patients, especially for those who undergo chemotherapy. Furthermore, in clinical practice and practicum activities, students can be taught to provide nursing care to breast cancer patients undergoing chemotherapy. Furthermore, for nursing research, research results are currently needed regarding the spirituality of breast cancer patients, especially in West Sumatra. It is hoped that the results of this study will serve as the initial basis for further research with other qualitative research approaches (case study, grounded theory, ethnography or ethno methodology) to see other perspectives related to the spirituality of breast cancer patients. Quantitative methods are also very necessary to determine appropriate and appropriate interventions to provide evidence-based nursing care to breast cancer patients undergoing chemotherapy.

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