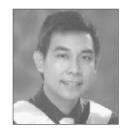
RESEARCH ARTICLE



Renante Dante Tan, MAN, RN



Gloria G. Yang, EdD, RN

Uncovering the Transformational Experience of Cancer Victors

Abstract

Introduction. Incidence of cancer morbidity and mortality in the Philippines continues to escalate despite the survival rate that much still need to be desired. Few were able to cross the bridge. Still the social processes surrounding cancer survivors' experiences has not been given much attention.

Method. A Grounded Theory was the design selected using in-depth, unstructured interview among ten (10) participants who were considered as cancer survivors. Purposive, snowball and theoretical sampling were used to recruit participants. Interviews were audiotaped or recorded and transcribed verbatim. Data analysis was guided by Creswell's four major phases; open coding, axial coding, selective coding and visual portraying. Memoing, field notes, member checking, audit trail and validation were all integrated with the study to enhance trustworthiness of study findings.

Result. Based from the participants' story, the primary psychosocial process that emerged can be described as "transformational journey". This core variable explains the complexity of the journey in the life of a cancer survivor. The researchers identified six (6) iterative phases namely: (1) seeking answers; (2) encountering burden; (3) will to survive; (4) exhausting measures to live; (5) becoming a victor and (6) transitioning.

Conclusion. The findings from this study elucidates that cancer patients who become victorious after battling the disease traverses a transformational journey that defies and changes their perspective at what life is. Healthcare provider should develop protocol on how to support and to assist patient as they battle through the challenges in the different stages of their journey.

Keywords: Cancer Survivor, Cancer, Grounded Theory, Qualitative, Data Analysis, constant comparison, theoretical sampling

Introduction

ancer is one among the major public health concerns around the globe. Statistics show that cancer is the second leading cause of death accounting to about 8.8 million deaths across the globe (World Health Organization, 2015), of which lung, breast, colorectal, stomach, and prostate cancers are the major cause of death. In the United States, one out of four deaths is related to cancer (Center for Disease Control and Prevention), which is about 1,555 American people dying each day (United States Cancer Statistics, 2009). It was projected that by 2022, there would be

around 18 million people in the United States living with cancer (Ness, 2013). In the Philippines, cancer is the third leading cause of death of which lung, breast, liver, cervical, colorectal, thyroid, leukemia, gastric, ovarian, and prostrate tops the list (Carreon, 2013).

When a person is diagnosed with Stage 3 or 4 cancer, it equated to a deathbed. Life expectancy diminishes as the stage of cancer increases. Survival rates range from 8% for lung cancer to 85% for breast cancer and 98% for testicular cancer. About 56% of women and 46% of men are still alive five years after being diagnosed (Hope, 2013) or more or less ranges from 6 months to 5 years (American Cancer Society, 2013). Fortunately, in the Philippines, although survival rate increases from 50% to 65% due to early detection and advancement in technology (Carreon, 2013) the country is still far behind as compared to developed countries.

Armed with statistics and survival rate, one can view the chances of getting a second lease of life and when they do, they are usually coined as cancer survivors. Cancer survivors are those who were able to continue living after overcoming serious hardship from the time of diagnosis to time of death (National Cancer Institute, n.d.).

Thus, exploring their journey of being a cancer survivor is an important phenomenon that needs to be investigated. A grounded theory was undertaken to understand and explore the social processes that cancer survivors experiences.

Methodology

Research Design

A grounded theory approached was chosen since the topic was relatively unexplored to understand the social processes that a cancer victor experiences. The purpose of grounded theory is to develop a theory (Munhall, 2001) through an inductive process from the individual level (Streubert and Carpenter, 2011).

Population and Sampling

Purposeful sampling was first utilized to recruit participants based on the criteria as follows: (a) diagnosed with any type of cancer, (b) on stage 3 or 4, and (c) a survivor. The first three interviews were all breast cancer survivors. Data was subsequently analyzed to formulate a tentative conceptual framework. After, the investigators looked for other survivors whose cancer originated from different body organs, such as lungs, uterine, cervical endometrial. This is known as theoretical sampling, "a systematic approach to sampling in participant observational research (Glaser & Strauss as cited by Bachman and Schutt, 2008, p.187)". The investigators used this technique to help shape the theory in the best form. A snowball sampling was also utilized to ask for referral to locate our next theoretical sampling participant. The sample size was grounded on the principle of saturation. It refers to the participants' descriptions becoming repetitive, with no new or different ideas or interpretation emerging (Fain, 2009). Ten (10) participants were recruited in the final study.

Research Instrument

The investigators utilized a two-part instrument: first was demographic profiling that contains basic information of participants and second, an open-ended unstructured interview was employed to allow discussion to emerge (Charmaz, 2006). The unstructured instrument was first tested to capture the context of the phenomena thoroughly.

Table 1: Profile Variables of Respondents

| VARIABLE | F | % |
|-------------------------|----|-----|
| Age | | |
| Young Adult (18-40) | 1 | 10 |
| Adulthood (41-65) | 9 | 90 |
| Gender | | |
| Male | 2 | 20 |
| Female | 8 | 80 |
| Educational Attainment | | |
| College Undergraduate | 4 | 40 |
| College Graduate | 5 | 50 |
| High School Graduate | 1 | 10 |
| Civil Status | | |
| Married | 5 | 50 |
| Separated | 3 | 30 |
| Widowed | 2 | 20 |
| Religion | | - |
| Roman Catholic | 10 | 100 |
| Residency | | |
| Cavite City | 5 | 50 |
| Quezon City | 2 | 20 |
| Pasig City | 1 | 10 |
| Caloocan City | 1 | 10 |
| Manila | 1 | 10 |
| Occupation | | 10 |
| Retired | 5 | 50 |
| Entrepreneur | 3 | 30 |
| Tutorial Service | 1 | 10 |
| Housewife | 2 | 20 |
| Diagnosis | | 20 |
| Breast Ca Stage 3 | 2 | 20 |
| Breast Ca Stage 4 | 2 | 20 |
| Bronchogenic Ca Stage 3 | 2 | 20 |
| Bronchogenic Ca Stage 4 | 1 | 10 |
| Uterine Ca Stage 4 | 1 | 10 |
| Cervical Ca Stage 4 | 1 | 10 |
| Endometrial Ca Stage 4 | 1 | 10 |
| Year Diagnosed | ' | 10 |
| 1995-2005 | 5 | 50 |
| 2006-2016 | 5 | 50 |
| Years of Survival | 3 | |
| 1-5 | 5 | 50 |
| 6-10 | 1 | 10 |
| 11-15 | 3 | 30 |
| 16-20 | 1 | 10 |
| 10-20 | 1 | 10 |
| Total | 10 | 100 |



Data Collection Procedure

To capture the phenomena substantially, the following data collection method was used (a) self-report, (b) observation. Self-report specifically, unstructured, open ended questions were employed by the investigators to capture the essence of the phenomena (Polit and Beck, 2008). Observation was generated to enhance variety of data collection sources. All interviews were audio-taped, coded and transcribed verbatim. Memoing and journaling were used to keep track of all audit trails in order for another investigator to be able to follow the decision trail used in this study (Sandelowski, 1986; Rice and Ezzy, 2000; Lincoln and Guba, 2001; Koch, 2006).

Data Analysis

Data analysis was guided by Creswell's (1998) four major phases: (a) open coding, (b) axial coding, (c) selective coding and (d) visual portraying. The investigators manually analyzed emerging categories from the first three respondents who all had breast cancer at different stages and used constant comparison as the approach to develop tentative categories and codes. After which, the investigators proceeded to the next participants using theoretical sampling then compared the data to existing categories and codes that had already been previously developed. Similar facets of the same concept were then grouped together. Dissimilar results were discussed and settled. Overall, one hundred and sixty-six (166) initial codes were formed, twenty (20) subcategories were identified to form concepts of similar content through open coding, and these concepts were then grouped to form six (6) categories as axial coding while a core variable was identified to form the selective coding and finally, a framework was formulated to reflect its visual portrayal.

Rigor

The investigators undertook several measures to establish trustworthiness of research findings by adhering to principles of grounded theory as suggested by Glaser (1978, 1992, 1998) and Strauss and Corbin (1990, 1998). Credibility was enhanced by gathering an in-depth and rich narrative data through the method of triangulation. The investigators made use of variability of cancer cases and multiple sites, years of survival, age group, educational background, occupation as a means of triangulation. Imbibing the data through initial, phrase by phrase coding and constant comparison and member checking helps facilitate the construction of a grounded theory that reflects the participants' experiences. In order to ensure dependability, the investigators made sure that proper documentation, record keeping on raw data, field notes, field journals and memos are properly kept and organized to facilitate accurate audit trail as a means to ensure quality findings (Akkerman et al., 2006). The ability to confirm showcased various steps undertaken by the investigators, such as giving back and employing an auditor to reflect or to verify how the investigators arrived on the analysis, interpretation and the emergence of the theory itself with accuracy. Lastly, in terms of transferability, the investigators made sure that the emerging themes made sense to the participants through member checking (Sandelowski, 2002) wherein the investigators went back to the participants to ask for feedback to clarify interpretations of what has been observed.

Ethical Considerations

Ethical approval was granted by the ethics review board of Far Eastern University. Consent was secured prior to conduct of interviews. Pseudonyms were assigned to maintain confidentiality and privacy of participants.

Results

Core Category

Transformational Journey

Based from the participants' story, the primary psychosocial process that emerged was "transformational journey". Participants looked at their storyline to be a journey that transformed them from looking at cancer as a death sentence to finding a purpose in life. Most of the participants want to become "the voice" where others may draw strength from them. They wanted to share their experiences on how they walked through this ordeal in life. This core variable explains the complexity of the journey in the life of a cancer victor. The investigators identified transformational journey as the core social process with six (6) iterative phases namely: (1) seeking answers; (2) encountering burden; (3) will to survive; (4) exhausting measures to live; (5) becoming a victor and (6) transitioning.

Table 2. Categories and sub-categories: transformational journey

| Categories – Six iterative phases | Sub-categories of each phase |
|-----------------------------------|--|
| 1. Seeking Answers | Questioning Conceiving Death |
| 2. Encountering Burden | Mind Consuming Experiencing Emotional Distress |
| 3. Will to Survive | Holding on Being Strong Positive Outlook Clinging on to Faith Acceptance |
| 4. Exhausting Measures to Live | Pharmacologic Mediation Spiritual Intercession Emotional Healing Unwavering Support Seeking Financial Assistance |
| 5. Becoming a Victor | Overcoming Challenges Feeling Triumphant Staying Alive |

Phase 1. Seeking answers

Seeking an answer was the first phase encountered by the participants upon learning that they have cancer. They tend to revisit their life and try to figure out reasons or behavior that may have caused them the disease. Seeking answers was described by participants as a process of wondering why she/he had incurred the disease and the consequence of it. Two subcategories identified within this phase were (1) Questioning and (2) Conceiving Death.

Questioning

Most of the participants would resort to questioning either self or God to find a plausible reason as to why they encountered this disease. Perhaps finding an answer can give them a feeling of solace.

"I asked the Lord, why? I said. Why me? I have not done wrong." (P6)

Sometimes engaging with a good lifestyle habit would not also warrant that a person could be free from cancer. As one participant (P4) posed this statement:

"I was not believing at all the test result and I said how can I be sick with cancer, since 1997 I have been living a healthful living, I exercise, I sun bathe, I drink the right water blah (3x)......"

Moreover, cancer can also be asymptomatic (P8) or symptomatic (P5) although the symptoms have oftentimes associated with other disease conditions hence, participants are quite shocked when they were caught unprepared.

P8 verbalized, "I am surprised why so, there were no symptoms."

"Ehh. Syempre nagulat ako di ko alam na mayrun ako nun kasi nakikita ko ang sarili ko na parang malakas naman ako. Wala naman akong nararamdaman tapos bigla na lang sabi nila menopause ano lang yan menopause lang magmemenopause ka na niyan, kaya sabi ko ahhy siguro magmemenopause. "Ganyan din ako." sabi ng ate ko. "Isang planggana nga yung dugo dugo ko noon." (Ehh. Of course I was surprised because I didn't know that I have one (referring to cancer) because I see myself as a health person. I didn't feel anything and they just said 'it's menopause, it's just menopause. You're going through a menopausal stage. "it happened to me also" stated by my sister. The amount of blood I lost was like a basin-full.) (P5)

Conceiving Death

Participants would always associate cancer with a death sentence. The survival rate remains to be dismal especially in a developing country. Sometimes the only option left was to ask the doctor is, will I die?

As P9 stated, "Niyanig yung buong katawan ko kasi una wala akong alam tungkol sa mga ganyan tsaka pag nalaman ko kasing may cancer e talagang mamatay na. Tapos eh, kinausap ko agad yung doctor ko sabi ko "Dok, ako ba ay aantayin ko na lang mamatay?" Kasi wala akong ano at kung magagamot pa yung aking ano yan cancer." (My whole body shook because at first I didn't know anything about that and what I knew about cancer, people surely die. After that I talked to my doctor as soon as possible and I asked Doc, how long do I have before I die?(because I don't have and if my cancer can be treated)

"Kasi alam ko yung cancer mahirap gamutin at bihira ang nakakaligtas sa cancer." (I know that cancer is hard to treat and most of the time seldom are be spared from cancer.) (P10)

Phase 2. Encountering Burden

The second phase participants' encounter is experiencing distress. It is a condition wherein participants become restless and worrisome having been diagnosed with cancer. It affects them mentally and emotionally. Two sub-categories were also identified within this phase: (1) mind consuming and (2) emotional burden.

Mind Consuming

A number of participants became bothersome with the condition that they have. Upon knowing their condition, their minds were pre-occupied with concerns. Three types of mind consuming has been identified, it could be children-driven (P1), condition-driven (P10) and financial driven (P5).

"Ano eh, napagod na 'yung aking mind kasi nga maliliit pa 'yung mga anak ko noon at tsaka nag-aaral pa sila. Walang titingin sa anak ko kundi ako." (My mind got tired because my children are very young then and are still studying. Nobody would look after them.) (P1)

"Noong unang sinabi ni Doctor na may stage IIIA cancer ako yung utak ko ayaw aminin na mayrun akong cancer kasi wala akong nararamdaman na masakit, malakas ako. Ang hirap ung magpagamot ka na wala kang pera dun po nakakadepress na kukuwan po yung utak ko." (At first when the doctor inform me that I have stage III A cancer, my mind didn't want to admit it because I wasn't feeling any pain, I am healthy. It's hard to undergo treatment having no financial resources and that depresses me that makes my brain turn upside down.) (P10)

Cancer is indeed a very expensive disease. Participants who were not economically stable have an added burden in trying to get funds for medical treatment. The lack of financial capability to undergo contemporary intervention lead them to feeling hopeless.



"Nag-iisip din ako kung saan ako kukuha ng pera para pampagamot kasi ang daming nilang sinabi na kailangan gastusin na para maradiation, atsaka chemo at saka brachy. Eh dun na ko pinaghinaan ng loob, at saka akala ko wala ng pag-asang magpagamot." (I was also thinking where to get the money to get myself treated because they are informing me about expenditure that would cover for radiation, chemo and brachy. I felt disheartned and I thought there's no hope for me to get treated.) (P5)

"Sabi niya (referring to the doctor) magproduce ka ng 300,000.00 for operation. Dapat within two weeks kailangan maoperahan ka agad." (The doctor said I should produce 300,000.00 for the operation. I should have that amount in 2 weeks so that I can be subjected to surgery as soon as possible.) (P10)

Experiencing Emotional Distress

All participants experienced emotional suffering too. Mixed view of different emotions can be captured from the storyline of the participants that ranged from being indescribable, to depression, feeling of hopelessness, isolation, outburst, being nervous and a shattering in their world in terms of their facial expression.

"Ehh basta yung naramdaman ko na para ka bang nauupos na kandila na di ka na makagalaw, parang di mo alam kung ano ang gagawin mo." (All I know is that I feel like a melting candle that was frozen in time, you don't know what you're going to do.) (P5)

As P2 detailed "Depress at saka Ma'am I feel like I'm dying. Akala ko katapusan na ng buhay 'yun. Ayoko na pong kumain, ayoko na pong lumabas ng kwarto. Nandun lang ako sa loob ng kwarto namin. Ni ayoko nang bumili ng kahit na ano, basta't gusto ko nandun lang ako sa madilim." (Depressed and also Ma'am I feel like I'm dying. I thought it was the end of my life back then. I didn't want to eat, I didn't want to go out of our room. I just stayed there nor I didn't want to buy anything at all. I just wanted to be in a dark place.)

"sabi ko nga naglalakad ako na parang wala ako sa sarili sabi kong ganun. Angie bakit? Ano? iyak ako nag-iyak noon." (I was walking in a limbo and I talk to myself (Angie, why? What? Then I cried and cried.) (P6)

However, a different emotional display was manifested among male participants. Women expressed themselves with more intensity in terms of their feelings as compared to male who were less intense. Perhaps, culture and male chauvinism playes an important role in this aspect.

"Medyo kinabahan ng konti pero hindi yung... basta inisip ko lang na katapusan ko na kaya? Pero hindi yung pagkagaling ko sa ospital andun ka sa bahay nakapangalumbaba o kaya nagiisip ng malalim, hindi. Hindi po ako ganon." (I felt just slightly scared but not really that..... I just asked myself (Is this the end of me? (I am not the person who after coming from the hospital, just stayed at home feeling so depressed and thinking so deep.) (P7)

"Tapos nung ganun nga lang po parang nalungkot ako nung sinabi nung doctora." (When the doctor told me about my condition I just felt sad.) (P10)

Phase 3. Will to Survive

Will to Survive is the next phase participants go through. This phenomenon serves as an inclination or the driving force that propel them to exhibit certain values necessary to deal with cancer. It includes internal and external forces such as social, spiritual, emotional and mental aspect. Holding on, Being Strong, Positive Outlook and Clinging on to Faith were the subcategories identified under this phase.

Holding On

Some participants expressed by their desire to live because of their children. Knowing that their children are still young and very much dependent on them, participants needed to remain well-grounded. The uncertainty of their children and their future without their proper guidance is what keeps them hold tight. Their children serve as the source of their strength of wanting to go through the battle and stage war against cancer.

"Parang tahimik lang ako, naiisip ko na lumaban na lang. Labanan nalang. Paano makasurvive kung, paano ang gagawin, basta tiniis ko na ang lahat ng sakit na nararamdaman ko at para maisurvive ko ang sarili ko para sa mga anak ko." (I'm just quiet, I am thinking to fight it, fight for it. How to survive and what to do. Anyway, I have already endured all the pain just to survive for myself for my children.) (P5)

"Doc, kailangan kong mabuhay kasi may anak pa ako. Mayrun pa akong anong anak na. may anak pa ako. Labing dalawang session tiniis ko yan." (Doc, I need to live because I have a child. I still have a small child. I have endured all that 12 sessions.) (P6)

While others resorted to bargaining, participants are willing to make a trade-off in exchange to surviving cancer.

"Tsaka that time po nung time na meron akong, nadiagnosed ako na may cancer na nga po, nagpromise ako sa kanya na if ever na gumaling ako, malakas ang loob sa pagsubok na ito, maglilingkod po ako sa church namin."

(And during that time that I have, when I am diagnosed with cancer, I made a promise to Him (referring to God) that if I survive, I have strong faith about this trial, I will serve our church.) (P2)

Being Strong

Being strong is a value that most participants elucidated in order to help them keep afloat in battling the disease. The power of believing serves as an underlying force that boosts their sense of well-being. It becomes the building block that helps them to view things in a hopeful angle.

"Malakas ang loob ko. Eh ako talagang lumalaban ako kahit ano ang magyari kahit ako lang ang mag-isa." (Im courageous. I am really a fighter whatever happens I just fight even if I am alone.) (P6)

"So kailangan maging matapang ako, haharapin ko 'to, maging matatag ako kasi ano eh, kung hindi mo lalabanan 'yun ano eh, madedepress ka talaga." (So I really need to be strong, I will face this, I will be firm whatever it takes cause if I will not, you will just end up being depressed.) (P1)

All participants needed to be strong because they still have children to take care of. Their children become the source of their aspiration of not letting go and of being, ultimately, defeated by cancer. Their role as a mother to their children speaks volume more than thinking about their own self and their condition.

"Kayanin ko 'to para sa mga anak ko." Kasi ano sila eh, maliliit pa sila kaya that time. Iniisip ko yung mga anak ko, maliliit pa sila. Walang titingin sa mga anak ko, kundi ako." (I will survive this for the sake of my children.(Because they were still young that time. I thought of my children because they were still young. No one can take care of my children except me.) (P1)

"Ay naku Ma'am lakas lang ng loob 'yan. Kasi pagka isipin mo iyon ikaw din ang madedepress di ba? Kaya dapat ano labanan mo 'yun alang alang sa mga anak mo tsaka 'yung mga apo mo. Ganun lang po." (Ma'am, you just need to rely on your guts. Because if you were to think about it (cancer), you will only be depressed right? So you should overcome that for the sake of your child and think about your grandchildren. That's it.) (P3)

"Basta ang iniisip ko lang ang anak ko di ko na iniisip ang sa sarili ko kasi ang anak ko ang nag-iisa nalang siya." (I'm only thinking about my child, I don't think of myself anymore because my child is the only one that I have.) (P6) Furthermore, some participants draw their strength from others. Seeing others who are just like them help them realize that they are not distinct. That sense of connectivity, belongingness and relatedness is enough to empower and help them to recognize that she/he is not fighting the battle alone.

"Pagpasok sa pinto nakita ko ang daming mga pasyenteng nakaupo, hilehilera nag-aantay ng mga tawag nila. Nakita ko na may nakasumbrero, may mga naka ano, na wala ng buhok. Sabi ko, "Di lang pala ako yung ano, akala ko ako lang ang nag-iisa un pala mas marami pa. Oo medyo gumaan, gumaan talaga ang loob ko yung time na nagkaroon ako naglakas ng loob. Di lang pala ako. Marami rin pala kami kaya iyon gumaan ang loob ko." (When I enter the door, I saw a lot of patients sitting, queuing just waiting to be called. I saw one wearing a hat, some are already bald. I said (I'm not the only one; I thought I was the only one, only to find out that there are others like me. The heavy burden I felt becomes lighter and I become braver. I wasn't the only one, there are still others too so I felt better.) (P5)

Positive Outlook

Another characteristic that participants emphasized was to have that positive outlook. This mental conditioning becomes a triggering factor in assisting them in shaping the will to survive. Being optimistic gives participants that sense of direction to pursue.

As P7 verbalized, "Yung misis ko nga e, minsan pag siya ang tinitingnan ko siya yung nag-iisip. Minsan sumisinghot, lumuluha, sabi ko, wag ka mag-isip, gagaling ako, ako ang may katawan. Kasi ako ang may katawan alam ko na gagaling ako, pakiramdam ko. Saka hindi Niya ako pababayaan." (As P7 verbalized, (Sometimes when I look at my wife, she was the one who is thinking deeply. Sometimes I caught her teary eyed, and sometimes crying. I told her not to overthink, I will be cured, I know my body. Because I know my body well, I felt I will be cured and my wife will take care of me.)

"Mukha kayong mga walang sakit." Kasi sabi namin kailangan kahit may sakit tayo o wala, kailangan maging positive ang outlook natin, 'yung aura natin, physical, may nararamdaman ka man, kailangan maging maganda ka. 'Yung sa puso mo, sa isip mo, malakas ka." (You all look healthy because we need to project even if we are sick or not, we should be positive on our outlook. Our aura, the physical thing, even if you are sick, you need to have a good look. What's in your heart, your mind, you need to be strong.) (P1)



Clinging on to Faith

Spirituality also becomes the refuge of majority of the participants. They look at things as trials in life. Faith seemed to play an important role that weaves the fabric of connectedness in giving them that sense of hope. It is also a profound aspect that molded them to have that will to thrive.

"Pag ikaw ay kukuhanin na ng Panginoon kukuhanin ka pero kapag ikaw ay lumalaban tutulungan ka ng Panginoon." (If the lord will take your life then it will be your time, but if you are fighting for your life the Lord will help you.) (P6)

"Ewan ko kung ano ang pakiramdam eh yung akin kasi ang iniisip ko kaya siguro ako nagkarun ng ganito, mga pagsubok lang siguro ito. At least sabi ko yung faith ko andun pa rin. Hindi ako kumakawala kay Jesus." (I don't know the feeling is, but in my case I think this is just trials in my life. At least, I told myself that I still have my faith and I hold-on to Jesus.) (P10)

"Hindi ko naman po sinisisi ang Diyos kung bakit ako pa ang nagkaroon ng sakit. May dahilan ang Diyos kung bakit ako nagkaroon ng sakit at saka iniisip ko rin na gagaling ako hindi Niya ibibigay to kung hindi ko kaya. Basta sabayan ko lang ng dasal kahit na nagkasakit ako ng ganito. Lalo akong kumapit sa Kanya." (I am not blaming God as to why I have this kind of disease. God has the reason why he gave this challenge and I believe that I will be healed because He will not give me something of which i cannot conquer. As long as continue praying even though I have this disease. I hold-on to Him the more.) (P7)

"Unang-una lahat sa Panginoon, lahat tinataas natin sa Panginoon 'yan, na tayo'y gabayan na maging matatag lagi sa ating mga pagsubok sa buhay." (First of all for the Lord, I left everything to God, that He will guide us to become strong in all of undertakings in life.) (P1)

Acceptance

Acceptance as participants have foretold becomes the bridge that connects the gap. It is a phenomenon that helps them to move on. Two facets of acceptance have been identified by the participants' acceptance coming from own free will (P7), due to family solicited advise (P8), or due to family history (P6).

"Kailangan lang mag-ano ka na sa sarili mo na natanggapin mo sa sarili mo." Doc, wala naman akong magagawa eh, ganun po talaga, ehh baka lahi din po namin, ang tatay ko may lung cancer, ang anak ko leukemia." (You just have to wholeheartedly accept it in yourself.(Doc, I can't do anything, maybe it's just like that, perhaps it's in our blood my father has lung cancer, and my child has leukemia.) (P6)

"2012 April na diagnosed ako. Tinawagan ko agad yung sister ko kasi nasa Riyadh, so siya ang nag-advised, nagsupport, na huwag mag-alala na suwerte ka na binigay sa iyo ng ganyan, na tanggapin mo. Maganda ang pagkasalita ng kapatid ko kaya hindi ako nagwoworry." (I was diagnosed April 2012, I immediately called my sister who was in Riyadh, she was the one who advises me, who supported me, and told me that I should not worry and that I am lucky I got this that I should accept it. The way she talked to me was so appealing enough to make me not to worry.) (P8)

"Noong sinabi na may cancer wala naman akong masisisi dahil na ninigarilyo po ako eh. Sa akin alam ko na kasalanan ko talaga na malakas akong magnigarilyo kaya wala po akong sinisisi. Tanggap ko na ako ay may cancer." (When I got the news that I have cancer I couldn't blame others because I am a smoker. For me, I knew it was fault because I smoked too much that's why I am not blaming anyone. I do accept that I have cancer.) (P10)

Phase 4. Exhausting Measures to Live

All participants subjected themselves in combining different modalities that most often include both pharmacological and non-pharmacological. They tend to exhaust all means possible to keep living. For them, it is not solely about drugs or medication that can heal but it goes beyond what contemporary measures can offer. Sub-categories included in Phase 3 were: (1) Pharmacologic Mediation, (2) Spiritual Intercession, (3) Emotional Healing (4) Unwavering Support and (5) Seeking Financial Assistance.

Pharmacologic Mediation

Contemporary measures are the only known therapeutic intervention that science can offer. The massive and potent pharmacological drugs that participants need to endure, session after session, not to mention the undesirable side effects that participants encounter is another battle cry for them to beat. However, some participants tend to combine contemporary with alternative as an adjunct medication while others rely solely on natural intervention.

"Nung natapos ako sa lahat ng mga therapies therapy kong ganyan ininum ko yung mga binili kong herbal pagkatapos may nagsabi sa akin ung mga dahon ng guyabano, ilaga, tapos inumin. Ayon uminum din ako nag-uminum, un ang pinakatubig ko. Mga guyabano leafs." (After Im done with all my therapies, therapies like that, I take all the herbal

supplements I bought then someone inform me about Guyabano leaves, just boil it and drink it. Then I started drinking it and it served as sort of as my water intake. The Guyabano leaves.) (P5)

"Medyo masakit din pagkatapos ng chemo at radiation. Yung chemo naman, habang ginagamot ka, chinichemo ka, hindi masakit wala kang maramdaman. After three days, dun mo maramdaman parang hinahalukay ang bituka mo. Ayaw tumanggap ng pagkain. Tutulak niya yung kakainin mo." (It was a bit painful after the chemo and radiation. In terms of chemo, during the process of chemotherapy it was not painful, you will feel nothing. After three days that is when you will start to feel that something is like digging your intestine. It doesn't want to accept food. You will throw it up.) (P7)

"I went to the facility a friend of mine na sinasabi ko sa yo natural path doctor. I was there for 15 days. I have parang cyclic cleanse, colon cleanse, kidney cleanse, liver cleanse, gallbladder cleanse." (P4)

Spiritual Intercession

Most of the participants are lifting their fate to a spiritual being. With a stronghold on faith, this phenomenon seemed to aid in the healing process of participants. It somehow facilitates to help them feel better knowing that somebody is there, though invisible, to provide them with comfort.

"Tutulungan tayo may awa ang Diyos. May gawa ang tao may awa ang Diyos" sabi ko ng ganun." (The Lord will help us. The Lord have mercy. If man acts, the Lord will have mercy, As I stated.) (P6)

"Isang oras lang ang tulog ko pero ang ginagawa ko naman eh wala naman akong malapitan kundi si GOD. Pinapasa Diyos ko na lang kung ano man ang katutunguhan ng aking pagpagamot." (I only slept for an hour but what I do since I have no one to approach, I call unto God. I leave it up to the Lord as to whatever outcomes it maybe during my treatment.) (P10)

"Tapos Ma'am nagconsult din ako sa different faith. 'Yun nga healing session, syempre 'yun po. Kay Father....., kay Father (mentioning name of priests)." (And then, Ma'am I also consulted on a different faith. A healing session, of course. To father... to father... to father... (mentioning name of priests.) (P1)

Emotional Healing

Emotional healing is another modality that some of the participants pursued. For them, the healing process should include soothing the emotions to be relieved from distress. Participants wanted to

resolve this emotional issue to help them feel free of burden and to achieve inner peace.

"The part that it says you will also need a mental detox, (oH!) so I did a physical detox but I do mental, emotional detox too." (P4)

"May gamot hindi lang yung medical na gamot, syempre spiritual, emotional—kailangan maging strong ka talaga." (There's treatment not only conventional but of course spiritual, emotional – you just need to be strong.) (P1)

Unwavering Support

The power of support can never be downplayed as an important factor in the journey of a cancer patient. Support from friends, family, health care provider and even from unknown person is a priceless in making them to move on. The feeling of being loved that surrounds a cancer patient becomes a fuel in helping them to continue winning the race.

"Meron po akong isang kaibigan na nagbukas ng isip ko. Binuksan n'ya po ang isip ko kasi blangko na nga po eh. Binuksan n'ya yung isip ko na, "Lumabas ka." sabi n'yang ganyan. "Hindi pa katapusan ng buhay." (I have this friend who opens up my mind. she opened it up since I am no longer thinking well. she opened up my mind to (Get out(she said. (It's not the end of life yet.) (P2)

"Family ko po supportive sila sa akin hindi nila ako pinapabayaan." (My family is very supportive, they took good care of me.) (P10)

"Pag 'yung feel mo na love ka ng doctor mo. Oo Ma'am, pagkamahal, 'yung mabait ang doctor mo sa iyo" (That feeling that your doctor loves you. Yes ma'am, if your doctor is kind to you, your doctor loves you.) (P3)

"Pag yung mura lang, dun lang sa paligid ng PGH kasi may nagbibigay naman na doctora. "O Doctora wala po ako nag ganito." Sige umano ka lang pipirma ako. Pagkapirma binibigyan naman ako kaya ito Salamat, Panginoon." (If the price is cheap, you can find it just around PGH since there are doctors who are willing to dole it out. (Doctor, I don't have this, Just fill out the form and I will sign. After signing they will give me what I need, so thanks God.) (P6)

"Oho Ma'am maraming magpe-pray sa iyo. 'Yung limang pagsabihan mo, baka dalawa magpe-pray sa iyo. Ganun po 'yung sabi nila kaya sa 'kin noon kaya naging parang proud na ako na may cancer na." (Yes ma'am, there are lots of people who will pray for you. If you share your condition to 5 persons, maybe 2 of them will offer a prayer



for you. That's what they told me, that's why for me I began to be proud of having a cancer.) (P3)

Seeking Financial Assistance

As stated earlier, cancer as an expensive disease that becomes burdensome for patients who are not well-off. Mental exhaustion to be exact, is the result of such added burden due to the need to figure out where to get the necessary funding. An identified strategy identified by such patients was to solicit financial assistance either through government agencies (P10) or from family (P5) for them to be able to go through the whole cycle of treatment.

"Naaawa na nga po ako sa Missis ko laging nakabantay sa Philippine Charity Sweeptakes Office (PCSO). Hindi ko pa kakayanin kasi itong second line ko po nakakahalaga na po ng 62,000.00 per cycles. Eh kung wala po yung gamot na nagagaling sa PCSO malamang hindi ko matapos ang six cycles." (Honestly, I pity my wife for she always at the lookout at the Philippine Charity Sweepstakes Office (PCSO). I won't be able to shoulder this 2nd line because it cost around 62,000 per cycles. If there's no assistance coming from PCSO then probably, I wouldn't be able to finish the six cycles.) (10)

"Ngayon, yung Ate ko, sinabi ko rin sa kanya, tapos nagulat ung Ate ko. "Paano na yan, yung mga anak mo malilit pa, mga bata pa, o sige titingnan ko, kung ano, sige, tutulungan kita". Nagkarun na ako ng pag-asa. Nung time na yun, inantay na lang namin na magpadala siya ng pera." (Now, I professed my condition to my sister, and she was shocked. (what's going to happen, your children are still young, let's see what I can do for you, I'll help you. (then I saw hope that time, we were just waiting for the money that she will send us.) (P5)

In contrast, those who have insurance do not have to worry about financial implications of their disease and are somehow relieved of each burden.

"As P10 verbalized, "Kung saan kami kukuha ng pampagamot yun po ang mahirap pero kung siguro kung may kaya lang siguro ako noon hindi ganun ang mararamdaman." (As P10 verbalized, (where to find the money is the most difficult part, if only we are well-off then probably I would not felt this way.)

"Wala naman silang binabayaran kasi sa insurance, so libre po ako lahat doon, mga taxi taxi lang ng mga kasama ko. Wala rin akong iniisip ng mga gastos." (They don't pay for anything because I have insurance, so everything is free. Just the transportation expenses of my fellow worker. I don't think of my bills.) (P8)

Phase 5. Becoming a Victor

Becoming a victor was the fifth phase identified in the process. It is a stage wherein participants were able to combat and to survive cancer. It was described as an overwhelming feeling of elation for successfully overcoming the challenges.

Overcoming Challenges

All the participants were able to surpass the challenges of being a cancer patient. They viewed these challenges as trials in life that gave them a greater sense of accomplishment after they won the battle.

"Kaya nga po 'yung mga napagdaanan kong mga challenges talagang, sabi nila talaga, nasurpass mo lahat ng mga challenges." (That's why all of the challenges l've been through, they said I surpassed every challenges.) (P1)

"Nalampasan ko. Mabait ang Panginoon kung talaga ako ay di pa niya kinuha na niya di ko na makikita pa yung anak ko, yung apo ko." (I exceeded. The Lord is kind if He has taken my life I won't able to see my child, and my grandchildren.) (P6)

"Cancer is not a death sentence. It's a challenge and it's God's way of sharing our challenges to other people." (P1)

Feeling Triumphant

Participants felt victorious after the storm ended. This elated feeling reflected the success that they have achieved. They associated themselves to superheroes who were able to defeat their enemy.

"Masayang-masaya ako kasi naitalo naiano naisurvive ko siya. Ayon, tapos di natural nalang ang ano ko parang wala lang nangyari." (I'm very happy because I have defeated it, uhmm... I survive it and I just act naturally as if nothing happened.) (P5)

"Feeling ko superman! (both laughing) Ako si superman! Darna! (hahaha) dahil kilala ko siya at nanalo ang anak ko sa akin, dahil pinaglaban ko, ipinaglaban niya ako "pinagdadasal niya ko na lumakas na umano pa ang buhay ko. Kaya ipinagsasalamatan ko na ako ay si Superman, si Batman, si Darna." (I feel like im superman (both laughing) I am superman! Darna! (hahaha) because I know him and my child wins over me because I fought for it, my child fight for it. (my child prays for me to be strong to extend my life that's why I am thankful that I am Superman, Batman and Darna.) (P6)

Staying Alive

Staying alive is the barometer of their success in battling cancer. All participants were able to go through the experience in knowing how to fight their battle. This second lease in life makes them views life more meaningfully. At the end of the tunnel, participants were able to see the light brought about by their sheer and strong determination to live alongside their faith.

"Natutunan kong number 1 'yung, fight your own battle. Kaya in spite of cancer, my life is fine. Yang cancer na iyan, it's not a death sentence kasi mamamatay lang ang may cancer pagka 'yung mahina ang loob mo kaya dapat lumaban ka." (The number 1 thing I learned is fight your own battle. That's why in spite of cancer, my life is fine. That cancer, it's not a death sentence, because cancer patient will only die if you are weak so fight it.) (P3)

"Mahal ako at binigyan pa Niya ako ng mahaba habang buhay. Yung stage III, wala yan" sabi kong ganun, "kayang-kaya ko yan, stage IV kaya ko pa rin yan." Sabi kong ganun. "Kaya ko pa rin iyan." (He (referring to God) loves me that's why He has given me a longer life to live. Stage III? its nothing (I said(I can handle this, even if its stage IV, its still can handle it (I said, (I can handle this.) (P6)

Phase 6. Transitioning

The final phase identified was transition. It is a stage wherein participants evolved into creating a more meaningful life after cancer. This second chance changes the participants' perspective into how they must view life from a different angle..

Taking Control

Some participants adapted a total behavioral change. They were able to turn their back against unhealthy lifestyle practices. They became more health conscious and cautious, even vigilant with the food they ate and avoided their old vices.

"By the way, because of this I have to walk my talk I have a farm. Sabi ko nga sa farm ko no chemicals can enter my farm." (By the way because of this I have to walk my talk I have a farm. No chemicals can enter my farm, I said.) (P4)

"Ngayon mga prutas na lang, isda, kung hindi man sa ano, paksiw, eh sabi ko paksiw, araw-araw paksiw umaga't hapon. "(Currently, I only eat fruits and fish, if it is not (paksiw((boiled fish in vinegar). It's (paksiw(, everyday, morning and afternoon.) (P6)

"Kaya gusto ko rin ibahagi ito sa mga ibang tao na yung masamang bisyo lalo na sa sigarilyo iwas-iwasan na yun. Hindi lang iwasan kundi talagang iwasan. Ayun nagpapasalamat tuloy-tuloy ang pananampalataya sa Diyos at saka sabayan ng tamang diet sa pagkain." (This is why I wanted to share this to other people that vices such as smoking should be avoided. It should be avoided but totally do not entertain it, so, I am very thankful and I am keeping my continues faith to God at the same time to engage in right diet.) (P7)

Expanding Horizon

Some of the participants were able to experience life after battling cancer. They were able to spread their wings and even hold positions in an organization. Engaging in this aspect boosted their self-esteem and self-confidence.

"Anyway, they elected me as their President so I am trying to influence din people kasi. I am the President of what we call ourselves San Fabian Organic practitioner ah entrepreneurs pala" (Anyway, they elected me as their President so I am trying to influence people also. I am the President of what we call ourselves San Fabian Organic practitioner oh, enterpreneurs rather.) (P4)

"Na hanggang ngayon naman po nagsisilbi ako bilang MB Chief. Mother Butler po ako sa simbahan namin." (And until now, I am still serving as an MB Chief. I am the mother butler in our church.) (P2)

Finding Mission in Life

Finding ones' mission in life is the ultimate end-product of some of the cancer victors. It elucidates their sense of altruism and reaching others through their experiences. They wanted to be the "voice" of hope to others. And they wanted to be the living example so that where others may be inspired. The deeper sense of sharing one's self becomes the focal task of a cancer victors' existence to possess.

"At tsaka sine-share din namin sa mga newly diagnosed patient na ganito kami noon pero nakayanan namin na kung baga, it's not the end of the world na kailangan nating lumaban." (And we are also sharing to those newly diagnosed patient that we are like them before but we went through it, it's not the end of the world, we really need to fight.) (P1)

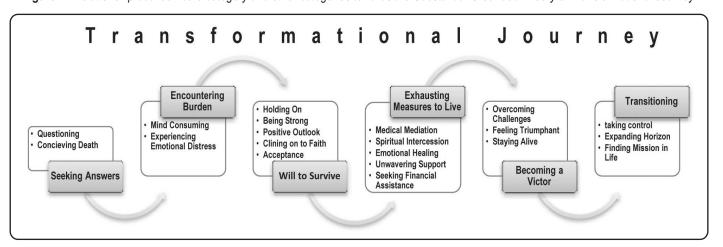
"Ako naman kaya nagvolunteer na ako sa PGH gawa ng yung pinagdaanan ko ma-ishare ko doon sa mga taong dumaan din sa akin na parang paano ba ako magkapagpagamot. Yung mawalan ba ng pag-asa ba dahil wala kang pera hindi ka makapagpagamot. Naiiaano din naman sa amin kasi may mga seminar naman kaming pinagdadaanan para ma-iguide yung mga pasyente kung saan pupunta, kung ano yung gagawin. May nagtatanong sa akin "mabubuhay pa ako, te?" sabi ko "Eh, bakit ka

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Figure 1. Relationship between core category and other categories towards the Substantial Grounded Theory of Transformational Journey



nandito ibig kong sabihin nandito ka para magpagamot di ibig sabihin mabubuhay ka kasi nagpapagamot ka. E sabi ko ako nga e malapit na sa Stage IV buhay pa ko, ibig sabihin nakakapagbigay tayo ng inspirasyon sa mga pasyente na nawawalan na ng pag-asa." (while as for me already volunteered in PGH so that I could share what I went through to people what I have encountered on how I get myself be treated. The hopelessness feeling of you having no money for treatment. This is being tackled during seminars we have attended to guide patients where to go and what to do. One cancer patient ask me, (I am still going to live?(and I replied (then why are you here? This only mean you are here is to get yourself be treated then it Then I told the patient, my diagnosis was almost close to a stage IV and yet I'm still alive, this means we can give inspiration to others who are feeling hopeless.) (P9)

Figure 1 illustrates the relationship between the categories. As described earlier, the participants went through a transformational journey identified as the core category. Participants go through six (6) phases in their journey. The first phase is seeking answer as to why they developed cancer, hence experiences so much distress. Despite experiencing the weight of their burden, participants were able to have the courage and the will to survive based on several factors identified (holding on, being strong, positive outlook, clinging on to faith and acceptance) that prompted them to exhaust all measure to live leading them to become victorious in their fight against cancer. After battling cancer, their life perspective have changed, which was identified as the last phase.

Discussion

Cancer being one of the major health concerns across the globe that claims millions of lives must be given an attention. Despite of its markedly high death rate, some cancer patients survive to share the experience of a cancer victor due to technological advancement. This study was undertaken to understand and to explore the social processes of a cancer victors' experience. To our knowledge, it is the first grounded theory that was carried out to develop an evolving theory to help explain the processes that cancer victor experiences.

The study's findings revealed that a cancer victor goes through a transformational journey. Their journey were described that also changes their perspective in life. Cancer participants are meaning making (Pascal, 2006) contrary to the findings of Williams and Jeanetta (2015), where it was shown that cancer survivor find it difficult to articulate the meaning behind survival. However, study of Van der Spek and et. al indicated that meaning making is highly individualized (2013). In addition, participants in this study were able to find meaning by engaging in activities to serve as a beacon of hope for others in proving that there is more to life despite cancer. Given all these, nurses should be able to identify their important role in helping the patient find meaning in life.

Furthermore, results also showed that despite of the increase in the survival rate due to technological advancement (Carreon, 2013), cancer was still associated with a feeling of having received a death sentence. Contrary to the view that cancer is no longer an automatic death sentence as survival rates soar (Willey, 2014) nearly half of cancer patients still viewed that cancer is a death sentence despite advances in treatment" (Hope, 2013).

Moreover, gender is another aspect that is worthy to be accounted for. Female participants tend to display intense emotional outburst as compared to males, who seemed to be subtle. This could be associated with the "macho" image depicted in the Filipino culture that men seemed to showcase a projection of being strong. This is contrary from the research indicating that men suffer much than women when diagnosed with cancer ("Men hit harder," n.d., para 1).

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Interestingly, there were quite a few unexpected findings in this study. Several types of mental consuming have been identified; it could be children-driven, condition-driven and or financial driven. All these aspect keeps their mind floating. It basically becomes their central focus after learning about their health condition. However, in terms of financial aspect, those who are under health insurances are spared from this distress. Likewise, acceptance can be in the form of: from own free will, due to family solicited advice or due to family history. Family involvement plays a crucial role in the process to facilitate earlier acceptance to help them move on. This is in consonance with that study of McDonough, Sabiston and Wrosch (2013), showing that high level of social group can lead to the improvement of subjective, well-being of cancer patient.

In addition, numerous factors had been vividly recognized by the participants that need emphasis to help them strengthen their will to survive. Foremost, are their children, especially in having children who are still young. This concern becomes the defining factor that gives participants that determination to go through the struggle of fighting cancer. Children become their light in shining armor. Another characteristic highly valued by the participants emphasizes on strengthening support system, being optimistic, having faith and acceptance. Consistent with the study of Phillips and Jones (2014), cancer adults faced their experience with optimism, leaned on relationship with family and health care provider. Many cancer patients who dealt with the battle, turned to their faith which serves as spiritual motivation (Gorman, 2014). The value of a support system and the determination to stage war against cancer through being optimistic and faith is a priceless commodity that needs to be strengthened among the participants.

However, some of the limitations of the study could be related to profile variables; the investigators were not able to find participants who were single and younger. Moreover, this study only contains a small sample size. Although data saturation has been reached, additional types of cancer could have been included to determine proper fit in the categories to the evolving theory that emerged in the study.

Therefore, the current study is only limited to five types of cancer. Thus, future researcher should include other types of cancer and likewise, examine the experiences of those individual who were single, younger and with different religious backgrounds. Furthermore, future researchers can utilize the evolving theory that emerged from the study to determine relationship among variables.

In general, this study walks us through the journey of a cancer victors' life. Healthcare providers can be guided by using the evolving theory to help them understand the different phases that

a cancer victor goes through, and henceforth can provide the most appropriate intervention to strengthen the values that are highly priced by participants.

Conclusion

The findings from this study elucidates that cancer patients who become victorious after battling the disease apparently goes through series of steps or processes and traverses a transformational journey that defies and changes their perspective at what life is. The person's will to live shows to be an important determinant that seemed to play a key element and demarcation between surrendering or surviving the disease.

Recommendation

Healthcare provider should develop protocol on how to support and assist patient as they battle through the challenges in the different stages of their journey. The study can be broaden by adding more cancer survivor with other disease origin to determine fittingness of the theory. Follow-up studies that examine the substantive grounded theory of transformational journey and assess the effectiveness in the aspect of understanding the journey of a cancer victor.

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About the Authors

Renante Dante Tan, MAN, RN, is a full time faculty at FEU, Institute of Nursing, for almost 15 years. Earned his BSN degree from Centro Escolar University, and his Masters at Far Eastern University with high distinction. Currently, he is undertaking his doctoral degree in Education major in Curriculum and Instruction. He teaches both in the undergraduate and graduate programs; sits in research projects and thesis both as adviser and panel member. He heads the research committee for three years now. His research interests include caring in teaching, cancer, death and dying. He is a member and officer of Philippine Nursing Research Society.

Gloria G. Yang, RN, EdD, co-researcher, started her clinical experience in the early 80's as Head Nurse of Chinese General Hospital &Medical Center-ICU-CCU. In the mid- 80's, she worked at Misericordia Hospital at Edmonton, Alberta and Toronto East General Hospital Canada respectively. In the Philippines, she worked at Far Eastern University Institute of Nursing as a full-time professor both in the Baccalaureate and Graduate program. A graduate of Chinese General Hospital College of Nursing, completed Master of Arts in Nursing, Systems Administration at Philippine Women's University and graduated with high distinction at Far Eastern University -Doctorate in Education, Major in Education Administration and Management. Currently, serving as President and a past HOD of PNA-NCR, Zone 1, Manila Chapter and Chairs, the PNA National Office -Committee on Independent & Entrepreneur Practice. Her scope of research interest includes Cancer related studies and Gerontology.

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