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PATIENT-CENTERED PERSPECTIVES: A QUALITATIVE ANALYSIS OF BREAST CANCER PATIENTS' EXPERIENCES WITH HEALTHCARE SERVICES

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ABSTRACT

Breast cancer is a non-communicable disease with the highest prevalence in Indonesia that requires optimal health services. RSUD dr. Mohamad Soewandhie is one of the referral hospitals, but still faces obstacles such as long waiting times. This condition impacts patient comfort and satisfaction. Objective: This study aims to explore the experiences of breast cancer patients with health services at RSUD dr. Mohamad Soewandhie Surabaya. Method: This study used a descriptive qualitative method. Data were collected through in-depth interviews with breast cancer patients undergoing treatment at RSUD dr. Mohamad Soewandhie Surabaya. The data analysis technique used thematic analysis to identify themes based on patient experiences during treatment at RSUD dr. Mohamad Soewandhie. Results and Conclusions: The results of the study indicate that the experiences of breast cancer patients with health services at RSUD dr. Mohamad Soewandhie have 3 themes. In the sensory experience aspect, patients feel adequate facilities, a structured service schedule and physical comfort during treatment. In the emotional experience aspect, responses to the diagnosis vary with positive service assessments and hopes for improved service quality. In terms of social experience, the decision to choose a hospital is influenced by the referral system, distance from the location and availability of BPJS, and is supported by positive interactions between patients and medical personnel who provide meaningful experiences during the healing process.

Keywords: Healthcare, Patient Experience, Breast Cancer

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Introduction

Breast cancer is a chronic non-communicable disease that remains a global health problem, causing morbidity and even death both globally and in Indonesia (WHO, 2020). Facing cancer, patients must undergo a series of complex and intensive treatments. Good healthcare is crucial for patients because it can influence the success of diagnosis, treatment, and the recovery process (Cahya et al., 2023). According to Febriane (2022), the problem at Dr. Mohamad Soewandhie Regional Hospital centers on very slow service. When patients register online and receive a booking number, they arrive at the appointed time. However, they are not seen for hours. This not only impacts the quality of care but can also disrupt patient comfort and affect the success of their treatment.

In 2020, 2.3 million women were diagnosed with breast cancer, resulting in 685,000 deaths worldwide. By the end of 2020, 7.8 million women were living with a breast cancer diagnosis within the past 5 years, making breast cancer the most common cancer worldwide (WHO, 2021). According to 2020 WHO data, breast cancer has the highest cancer prevalence in Indonesia (16.7%), and is the second leading cause of cancer mortality (11.0%) after lung cancer (12.6%) (WHO, 2020). Globocan data from 2020 shows that the number of breast cancer cases reached 68,858 (16.6%) out of a total of 396,914 new cancer cases in Indonesia. Meanwhile, the number of deaths from breast cancer reached more than 22,000 (Ministry of Health of the Republic of Indonesia, 2022). The number of breast cancer cases in East Java ranks second, reaching 12,186, after cervical cancer cases which reached 13,078 (East Java Health Office, 2020). In 2021 and 2022, cancer cases treated at Dr. Mohamad Soewandhie Regional Hospital continued to increase, with 492 cancer patients in 2021, then the following year, this number rose to 642, equivalent to 30% (Virnata, 2024). Based on data obtained from the Radiation Oncology Installation of Dr. Mohamad Soewandhie Regional Hospital on March 19, 2025, since the beginning of 2025, 178 patients have undergone radiation therapy in the room. Of these, 106 patients were breast cancer patients.

Data from the Surabaya City Government of Dr. Mohamad Soewandhie Regional Hospital (2021) shows that there are 8 outpatient indicators in the SPM-RS assessed at Dr. Mohamad Soewandhie Regional Hospital, 7 indicators have reached the target and 1 indicator has not reached the target set by the Indonesian Ministry of Health. The indicator that has not been achieved is the outpatient waiting time. The outpatient waiting time at Dr. Mohamad Soewandhie Regional Hospital has not reached the standard, namely 104 minutes from the target of ≤ 60 minutes. There are 8 indicators in the type of basic emergency services in the SPM-RS of Dr. Mohamad Soewandhie Regional Hospital, 6 indicators have reached the target and 2 indicators have not

reached the target SPM-RS indicators determined by the Indonesian Ministry of Health, namely the standard customer satisfaction indicator ≥ 70% with an achievement of 59.62% and the patient mortality indicator <24 with an achievement of 0.015 (national target 0.002). In surgical services, there are 7 indicators in the SPM-RS. Of the 7 indicators, 6 indicators have reached the standard and 1 indicator has not reached the standard, namely the waiting time for elective surgery, which is 8 days from the national standard of ≤ 2 days. In the type of basic intensive services, there is 1 indicator that has not been achieved, namely the indicator for intensive care unit services for doctors (Sp.Anesthesia with cases handled, 100% of nurses at least D3 with an ICU/and D4 skilled nurse certificate) with a national standard of 100% while the achievement is 79.70%. In basic pharmaceutical services in the SPM-RS, there are 5 indicators. There are 3 indicators that have reached the standard and 2 indicators that have not reached the standard, namely the waiting time for finished drug services and customer satisfaction indicators, the waiting time for finished drug services reached 107 minutes from the national target of ≤ 30 minutes, the standard customer satisfaction indicator ≥ 80% with an achievement of 55.615% (Surabaya City Government, Soewandhie Hospital, 2021). A preliminary study conducted in the Radiation Oncology Unit of Dr. Mohamad Soewandhie Regional General Hospital (RSUD) involved brief interviews with three breast cancer patients undergoing radiation therapy. The interviews revealed that while the patients felt quite satisfied with the friendly attitude of the healthcare staff, they also complained about long wait times. The cause was a malfunctioning radiotherapy machine, which resulted in long patient queues and delayed treatment schedules.

Healthcare services are influenced by thoughts and feelings, personal references, resourcefulness, and culture. The impact of limited healthcare services on cancer care is felt not only at the individual level but also at the community level. The high death rate from breast cancer, reaching more than 22,000 cases (Indonesian Ministry of Health 2022), and the increasing burden of the health budget are some indicators that reflect the level of public health. Based on data from the Social Security Agency (BPJS Kesehatan), the cost of cancer in 2014 reached IDR 1.5 trillion, increasing to IDR 2.2 trillion in 2015. In 2016, the cost increased to IDR 2.3 trillion. By 2018, financing for cancer treatment through BPJS Kesehatan ranked second after heart disease. Costs incurred reached IDR 2.7 trillion with a total of 1.79 million cancer cases (Yuliawati et al., 2023).

Poor healthcare services can have a variety of negative effects that are detrimental to patients, medical personnel, and the healthcare system as a whole. Patients who experience long waiting times for care, especially cancer patients, will feel disappointed and anxious, which can ultimately worsen their physical and mental health. Delays in treatment can worsen the prognosis, reduce adherence to treatment, and decrease the patient's quality of life (Fitri, 2021). Furthermore, these

negative experiences can erode patient trust in hospitals. Poor access to healthcare will impact the quality of care and patient outcomes, and have a long-term impact on public trust in hospitals (Eftitah et al., 2023).

With more accessible health services, people can obtain the medical care they need in a timely manner, thus preventing more serious health complications (Weraman, 2024). To realize the direction of health development policies, collaboration between the government and the community is needed to achieve these goals. One way to achieve this is by increasing access to health services. Increasing awareness, willingness, and ability to live a healthy life for everyone to achieve optimal health, as well as the availability of good health services (Maulana & Avrillina, 2024).

Based on the description above, the author is interested in conducting research entitled "Breast Cancer Patients' Experiences of Health Services at Dr. Mohamad Soewandhie Regional General Hospital, Surabaya".

RESEARCH METHODS

This study used a descriptive qualitative research design with the aim of exploring the experiences of breast cancer patients with healthcare services at Dr. Mohamad Soewandhie Regional General Hospital, Surabaya. This design allows researchers to explore the meaning of experiences in depth in a natural context, with the researcher as the primary instrument. Participants were selected purposively based on inclusion criteria: patients with stable conditions, willing to be interviewed, and cooperative. The number of participants was determined based on data sufficiency until saturation was reached, with a target of 10–15 participants. This study has one main variable, namely patient experiences with healthcare services.

Data collection was conducted through semi-structured interviews, assisted by interview guidelines and documentation tools such as a voice recorder and field notes. Data analysis used the thematic analysis method from Braun & Clarke. Data credibility was maintained through source triangulation, verifying information from various participants to ensure the validity of the findings.

Ethical aspects of this research include informed consent, anonymity, confidentiality, upholding the principles of beneficence, nonmaleficence, and justice. Researchers ensure that all participants are treated fairly without discrimination, that information is conveyed honestly, and that participants are protected from risks throughout the research process.

RESULTS

General Data

This study involved 14 participants who were breast cancer patients undergoing radiation therapy in the Radiation Oncology Unit of Dr. Mohamad Soewandhie Regional General Hospital, Surabaya. All participants were women between the ages of 31 and 60, mostly from Surabaya and the surrounding area. The duration of their breast cancer varied from 7 months to 7 years. Most participants had undergone chemotherapy, surgery, and radiation therapy. Data were obtained through in-depth interviews and analyzed using a thematic approach to describe their experiences holistically.

Special Data

1. ***Sensory*experience**

*Sensory experience*reflects how patients directly experience healthcare services through their five senses. Most participants stated that the facilities available in the radiotherapy room at Dr. Mohamad Soewandhie Regional Hospital were adequate. "Thank God, the facilities are sufficient for me, ma'am," (P11). This indicates trust in the quality of the services provided. Furthermore, punctuality in scheduling was also a highly appreciated aspect by patients. "The wait wasn't too long, ma'am, according to each session's schedule," (P6). However, some patients faced challenges due to radiotherapy machine malfunction. "Yesterday, ma'am, the machine was broken, and they left at 10:00 and left at 3:00," said P5. However, positive experiences were also felt after therapy, when their physical condition began to improve. "The wound has shrunk, thank God, ma'am, my body feels lighter," (P5). These experiences shape patients' perceptions of the service and are an important part of the healing process.

2. ***Emotional*experience**

The participants' emotional experiences reflected the psychological dynamics that emerged from receiving the diagnosis to undergoing treatment. The initial response was dominated by feelings of shock and fear. "Shock, miss... between believing and not believing," said P3. This emotional reaction demonstrates the heavy mental burden experienced when first learning the cancer diagnosis. Some participants showed a resigned attitude as a form of acceptance, as expressed by P11, "It's normal, miss, because you're already old... so I surrender." Some even viewed this disease as a form of test, as expressed by P1, "God is being very good by eliminating sins through illness... so just go with it." On the other hand, feelings of satisfaction with the service also emerged. "The service is really good, miss... I feel like a queen here even though it's free," (P2). Hopes for service improvements were also expressed, particularly the addition of radiotherapy equipment. "Maybe more equipment can be added so it can be faster," (P9). Several participants also hoped that all staff would treat patients professionally without discrimination. "All hospitals should accept patients, whether BPJS or

private, the service is the same," (P6). This shows that the emotional aspect is an important component that influences patient perceptions of health services.

3. *Social*experience

Social experiences are patients' experiences in building relationships and interacting with culture and the social environment. Most participants stated that they came to Dr. Mohamad Soewandhie Regional General Hospital due to referrals from previous health facilities. "Initially, when I was undergoing chemotherapy and surgery in Mojokerto... I was referred directly here for radiation therapy," (P7). In addition, distance and family considerations also influenced the choice of health facility. "It's closer to home... I have small children, so if I stay there, it's not too long from home, about 15/10 minutes..." said P2. Economic factors were also very influential, with the availability of BPJS services being an important reason. "Yes, because BPJS is also available here... in oncology, it's not," said P9. Interactions with medical staff were also very impressive. "From the moment I entered, I already felt that they supported us," (P1). Friendly and informative communication strengthened patients' psychological resilience. "The people here are friendly... even though we are sick, we enjoy it," (P12). All participants used BPJS, which greatly helped ease the burden of medical costs. "Because I use BPJS, I don't really think about it," (P1). While most felt it went smoothly, some participants faced obstacles due to the distance from their homes. "It takes at most an hour and a half to travel every day... that's the worst part," complained P10. These overall social experiences shape patients' perceptions of the quality and access to healthcare they receive.

DISCUSSION

1. *Sensory*experience

*Sensory experience*This reflects how patients directly experience healthcare services through their five senses. The study results showed that most participants stated that the facilities available at Dr. Mohamad Soewandhie Regional Hospital were adequate and supported the treatment process, particularly radiation therapy. Some participants felt that their needs during their treatment at Dr. Mohamad Soewandhie Regional Hospital were met.

This aligns with research conducted by Rahmadani (2023), which states that healthcare facilities play a crucial role in providing healthcare services to the community. The better the facilities and infrastructure provided by a hospital, such as medical equipment, therapy equipment, patient waiting rooms, and laboratories, the greater the impact on the quality of care provided to patients. Patients will feel more at ease and confident undergoing treatment when they see that the hospital is equipped with the necessary equipment. Furthermore, the

availability of clean and orderly treatment rooms, along with a well-organized service system, contribute to a positive patient experience during treatment.

Research by Gusrianti (2024) found that facility quality influences patient satisfaction with a hospital. Therefore, hospital efforts to sustainably maintain facilities and equipment will support patient recovery and strengthen trust in the services provided.

The availability of complete and well-functioning healthcare facilities helps build patient trust in the hospital. Complete and adequate facilities not only support a smooth treatment process but also provide a sense of security and comfort for patients during their treatment.

The study results showed that radiation therapy services at Dr. Mohamad Soewandhie Regional Hospital were considered fairly regular and adhered to the scheduled sessions. However, some delays occurred due to technical issues, such as equipment failure. These issues were tolerable as long as communication was good and patients were treated in the correct order. This demonstrates that patients place a high value on the punctuality of services.

This is in accordance with Minister of Health Regulation No. 129 of 2008 concerning Minimum Hospital Service Standards, which stipulates that outpatient waiting times in hospitals should not exceed 60 minutes. This standard was established to ensure service quality and improve patient satisfaction with the healthcare system. Furthermore, Minister of Health Regulation No. 15 of 2023 concerning Maintenance of Medical Devices in Healthcare Facilities regulates maintenance of medical devices to ensure they function properly, meet standards, and do not disrupt service schedules. Routine maintenance is also crucial to ensure patient safety and prevent delays in therapy. Therefore, hospitals need to have a regularly scheduled equipment maintenance system supported by competent medical personnel.

Positive experiences were also felt post-therapy, when their physical condition began to improve. Research results showed that some participants reported feeling physically better after treatment. Positive experiences at this stage can strengthen patients' trust in the hospital.

According to (Amri et al., 2024), patients will consciously and subconsciously assess the quality of hospital services in the post-service phase (after receiving medical care). This assessment encompasses various aspects, from the attitude of medical personnel, healthcare facilities, to comfort during the treatment process. If patients are well-cared for during treatment, their satisfaction tends to increase, even though clinically the treatment may not be fully completed.

Patient perceptions of care are influenced by their post-therapy experience and how they evaluate the care provided. When patients feel better after treatment, they tend to have a positive view of the quality of care they received. Therefore, the post-care experience is a

crucial component in evaluating hospital service quality and must be well-managed to create a lasting positive experience for patients.

2. *Emotional*experience

Participants' emotional experiences reflected the psychological dynamics that emerge from receiving a diagnosis through treatment. The study revealed that patients' emotional journeys to a breast cancer diagnosis varied widely. Most participants responded to the diagnosis with mixed emotions. Reactions such as shock, anxiety, fear, and disbelief emerged as initial responses to accepting a serious illness. However, some responded with resignation and acceptance through a religious approach.

This aligns with research conducted by Tarigan & Pasaribu, 2023, which found that women experience shock and anxiety when diagnosed with breast cancer. Emotional responses are not unique to breast cancer patients but also occur in other cancer patients, as the lengthy treatment process, anxiety, and worry about the future contribute to these emotional reactions. Emotional reactions can influence decision-making or hinder a patient's readiness to begin treatment. Therefore, understanding these emotional reactions is crucial so that healthcare professionals can provide a more empathetic and supportive approach from the moment a diagnosis is made.

Research (Komariah, 2019) suggests that religion and spirituality play a crucial role in coping for cancer patients. They can provide comfort, hope, and a sense of meaning. Improving spirituality can be a coping strategy for patients, increasing their resilience in the face of chronic illness.

The results of the study showed that the majority of participants expressed satisfaction and gave positive assessments of the services at the Radiation Oncology Installation. This is in line with (Mustakim et al., 2024), who stated that patient satisfaction is measured through the dimensions of staff attitude, technical quality, access, outcomes, continuity, physical environment, and availability. Staff attitude and technical quality significantly influence patient perceptions of professionalism and service competence, which are key indicators in determining satisfaction. When patients feel treated with kindness and receive appropriate medical treatment, trust in hospital services will increase. Therefore, hospitals need to ensure that all staff are competent and able to build good relationships with patients to maintain and improve overall service satisfaction.

The study results showed that some participants expressed their hope for additional radiotherapy equipment to avoid delays in the event of machine failure. They also expressed a desire for all staff to be more professional and respectful of patients.

This aligns with research conducted by Elektra et al., 2024, which states the need for regeneration and addition of radiotherapy equipment at Dr. Ramelan Naval Hospital. It was stated that existing equipment frequently breaks down and requires lengthy repairs, disrupting and suboptimal therapy services for cancer patients. Such disruptions can reduce the effectiveness of treatment, especially for cancer patients requiring long-term therapy. Therefore, the availability of adequate equipment and regular maintenance are crucial to ensuring the smooth operation of oncology services.

Beyond technical aspects, some participants also expressed their expectations regarding the professionalism of staff. They desired fair and non-discriminatory service for BPJS patients. This underscores the importance of the principle of equity in healthcare, as stipulated in Law No. 17 of 2023 concerning Hospitals, which states that every patient has the right to fair, quality, and non-discriminatory care.

Patients' expectations of hospital services reflect how experiences shape expectations for future service quality. Smooth and continuous service delivery is crucial, given that the therapy process requires consistency and timeliness to achieve optimal results.

3. *Social*experience

Social experiences are patients' experiences in building relationships and interacting with culture and the social environment. The study results showed that most participants stated they were referred from their previous hospital due to limited services, such as the availability of radiation therapy. Furthermore, distance from the hospital and the availability of BPJS services were other factors.

This demonstrates the crucial role of the referral system in cancer treatment. According to Minister of Health Regulation No. 1 of 2012 concerning the Individual Health Service Referral System, referrals are the primary mechanism in the tiered care system, particularly for cases requiring further treatment at facilities with more comprehensive resources. This is crucial for cancer patients requiring specific services such as chemotherapy or radiation therapy.

The research results show that some cited distance from the hospital and the availability of services through the BPJS as reasons for choosing a hospital. This aligns with research conducted by Sudiari (2022), which found that distance and BPJS availability were key determinants of healthcare utilization.

The study results showed that most participants described positive relationships with doctors and nurses. Participants felt that medical personnel were friendly, empathetic, and able to provide clear explanations during treatment. This aligns with research conducted by

Soraya (2021), which states that the role of therapeutic communication carried out by healthcare professionals is crucial as a form of health care. Therefore, establishing good therapeutic communication at every phase or stage will result in a positive relationship and foster trust and satisfaction in patients, believing that they will receive the best possible care and achieve recovery.

Research conducted by Hariyogik (2021) states that communication is crucial for nurses in interacting with patients. Ineffective communication can lead to misinterpretation of messages due to differing perceptions. Continuing misinterpretation can lead to patient dissatisfaction.

The study results showed that all participants utilized BPJS as health insurance. Participants felt helped by the treatment process without having to pay out-of-pocket costs. This aligns with research conducted by Kurniadewi (2024), which states that the BPJS Health program is quite effective, particularly having a positive impact on increasing the accessibility of health services in Indonesia. With BPJS, people from various social strata, including patients with chronic conditions such as breast cancer, can access medical services without being burdened by high costs. The effectiveness of BPJS as a national health insurance program demonstrates the government's crucial role in guaranteeing the public's basic right to adequate and sustainable health services.

According to Presidential Regulation No. 82 of 2018 concerning Health Insurance, which regulates the implementation of the National Health Insurance (JKN) program managed by BPJS Kesehatan, this presidential regulation includes provisions regarding participation, health insurance benefits, as well as payment mechanisms for contributions and health services for participants.

The study results showed that some participants said the attention and encouragement provided by medical staff were memorable during their treatment. Emotional support from doctors and nurses made patients feel valued and less alone in the healing process.

This suggests that a positive and supportive relationship between patients and healthcare professionals can improve therapy adherence and the quality of life of cancer patients (Hermansyah et al., 2025). This support can foster enthusiasm during long and tiring therapy sessions and reduce the anxiety that often accompanies cancer treatment. A positive relationship also helps patients feel less alone in facing their illness. Therefore, healthcare professionals need to build empathetic communication, not only by conveying medical information but also by demonstrating concern for the patient's emotional well-being.

Although most felt the process went smoothly, some participants encountered obstacles due to the distance from their homes. However, these obstacles were tolerable for the patients because they focused on the hope of recovery.

According to (Cahya et al., 2023), residence and travel distance are barriers to accessing healthcare. Furthermore, people prefer healthcare facilities close to their homes and only travel to distant facilities if there are no closer ones. These distance-related barriers not only impact patient comfort but can also affect patient compliance with long-term treatment. Research conducted by Fitriana (2023) indicates a relationship between travel distance and chemotherapy compliance in cancer patients. Therefore, having a closer facility or a flexible schedule can help mitigate these difficulties.

The sum of these social experiences shapes patients' perceptions of the quality and access to the health services they receive.

CONCLUSION AND SUGGESTIONS

Conclusion

Based on the results of this study, sensory experience, emotional experience and social experience can influence patients perspective of healthcare services. Positive interactions between patients and medical staff during treatment provide a meaningful experience for patients.

Suggestion

It is hoped that patients will maintain their enthusiasm and compliance with the treatment they have undergone, and will not hesitate to communicate complaints or hopes to medical personnel in order to achieve optimal service. Maintaining the good quality of service in the radiotherapy room. It is necessary to consider adding radiotherapy equipment to anticipate technical problems that could cause delays in treatment. It is hoped that future research can further explore patient experiences by involving more participants from various backgrounds and types of treatment.

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