

# **The Relationship Between Spiritual Support and Anxiety Levels in Breast Cancer Patients Undergoing Chemotherapy at NTB Provincial Regional General Hospital**

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## **ABSTRACT**

Cancer patients generally experience psychological disturbances, including anxiety. One non-pharmacological approach to managing anxiety is optimal spiritual support, as a patient's spirituality can reduce tension in those undergoing chemotherapy. This study aimed to determine the significance of the relationship between spiritual support and anxiety levels in breast cancer patients undergoing chemotherapy. This study employed a cross-sectional research design. The population consisted of all breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital in March 2026, totaling 178 individuals. The sampling technique used was incidental (accidental) sampling, resulting in 49 respondents. Data were collected using a Spiritual Support Questionnaire and the Hamilton Rating Scale for Anxiety (HARS-A) questionnaire, and analyzed using the Spearman Rank test. The results showed that most respondents were aged 46–65 years (71.4%), all were female (100%), the majority had a high school education (59.2%), most worked as housewives (53.1%), and the largest proportion were in stage I cancer (71.4%). Regarding spiritual support, 22 respondents (44.8%) were in the moderate category, while most respondents experienced severe anxiety, with 21 individuals (42.8%). Data analysis using the Spearman Rank test yielded a p-value of 0.003 ( $p < 0.05$ ), indicating a significant relationship between spiritual support and anxiety levels in breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital. These findings highlight the important role of spiritual aspects in reducing anxiety and improving patients' quality of life, suggesting that spiritual support should be integrated into holistic nursing care for breast cancer patients.

**Keywords:** Anxiety, Breast Cancer, Chemotherapy, Spiritual Support.

## **1. BACKGROUND**

Cancer is one of the most dangerous diseases and a major cause of death worldwide. According to the World Health Organization [12], cancer is the second leading cause of death globally. Cancer not only affects patients physically but also has psychological impacts. One of the psychological effects experienced by cancer patients is anxiety, which can negatively affect the healing process [1].

One method of cancer treatment is chemotherapy. Chemotherapy is a therapeutic

intervention used in the treatment of cancer patients. It can affect both the physical and psychological health of patients, particularly by increasing anxiety [7]. The side effects of chemotherapy cause patients to fear losing their physical and work capacities. These effects also make it difficult for patients to meet their basic needs [10]. Anxiety can adversely affect chemotherapy outcomes, as well as patients' mental and clinical recovery, and may even lead to death related to chemotherapy. The patient's immune system is affected, which can result

in negative emotional impacts. Therefore, spiritual faith is needed to help reduce the negative effects of this condition on patients' survival [12].

Spiritual problems may lead patients to experience low self-esteem due to the side effects of chemotherapy, lack of self-confidence, and disrupted personal relationships. Ultimately, these issues can reduce quality of life and increase anxiety [5].

Based on interviews conducted by the researcher in September 2025 at the Oncology Surgery Clinic of the NTB Provincial Regional General Hospital, 70% of chemotherapy patients experienced anxiety. Patients reported feeling higher levels of anxiety during the chemotherapy process compared to when they were first diagnosed with cancer. About 50% of patients appeared restless to the point of crying and expressed anxiety about their illness. They feared the physical and psychological side effects of chemotherapy and were concerned about losing their ability to work and carry out daily activities. Patients also stated that their illness was a severe test from God, and they were uncertain whether they would survive.

Based on these findings, the researcher is interested in examining the relationship between spiritual support and anxiety levels in breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital.

## 2. METHODS

This study is a quantitative study with a correlational design using a cross-sectional approach [2] to determine the relationship between spiritual support and anxiety levels in breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital. The study population consisted of all breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital in March 2026, totaling 178 individuals. The sampling technique used in this study was incidental

(accidental) sampling, with 49 respondents who met the inclusion and exclusion criteria.

This research was conducted in April 2026 at the Oncology Surgery Clinic and the Chemotherapy Unit of the NTB Provincial Regional General Hospital. The research instruments used were a Spiritual Support Questionnaire to measure the level of spiritual support and the Hamilton Rating Scale for Anxiety (HARS-A) questionnaire to measure anxiety levels.

Data collection was carried out by distributing questionnaires to respondents after obtaining their consent through informed consent. Univariate analysis was used to describe the frequency distribution of respondents' characteristics, levels of spiritual support, and anxiety levels. Meanwhile, bivariate analysis using the Spearman Rank test was conducted to determine the relationship between spiritual support and anxiety. This study also considered research ethics to ensure compliance with scientific principles and to avoid causing harm to respondents.

## 3. RESULTS AND DISCUSSION

### 1.1 Univariate Analysis

**Table 1.**

Frequency Distribution of Age Among Breast Cancer Patients Undergoing Chemotherapy in April 2026 at the NTB Provincial Regional General Hospital

Age	Frequency	%
18-25	4	8,1
26-45	10	20,5
46-65	35	71,4
Total	49	100,0

Based on Table 1 above, it can be seen that the majority of breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital were

aged 46–65 years, with 35 respondents (71.4%), while a small proportion were aged 18–25 years, with 4 respondents (8.1%).

**Table 2.**

Frequency Distribution of Gender Among Breast Cancer Patients Undergoing Chemotherapy in April 2026 at the NTB Provincial Regional General Hospital

Gender	Frequency	%
Perempuan	49	100
<b>Total</b>	<b>49</b>	<b>100.0</b>

Based on Table 4.2 above, it can be seen that all breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital were female, totaling 49 respondents (100%).

**Table 3.**

Frequency Distribution of Education Level Among Breast Cancer Patients Undergoing Chemotherapy in April 2026 at the NTB Provincial Regional General Hospital

Education Level	Frequency	%
Elementary School	9	18,4
Junior High School	7	14,2
Senior High School	29	59,2
University	4	8,2
<b>Total</b>	<b>49</b>	<b>100.0</b>

Based on Table 3 above, it can be seen that the majority of breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital had a high school education, with 29 respondents (59.2%), while a small proportion had a higher education level, with 4 respondents (8.2%).

**Table 4.**

Frequency Distribution of Occupation Among Breast Cancer Patients Undergoing Chemotherapy in April 2026 at the NTB Provincial Regional General Hospital

Occupation	Frequency	%
Housewives	26	53,1
Farmer	5	10,3
Retired	1	2
Civil Servant	2	4
Self-Employed	15	30,6
<b>Total</b>	<b>49</b>	<b>100.0</b>

Based on Table 4 above, it can be seen that the majority of breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital were housewives, with 26 respondents (53.1%), while a small proportion were retired, with 1 respondent (2%).

**Table 5**

Frequency Distribution of Cancer Stage Among Breast Cancer Patients Undergoing Chemotherapy in April 2026 at the NTB Provincial Regional General Hospital

Cancer Stage	Frequency	%
I	35	71,4
II	10	20,5
III	3	6,1
IV	1	2
<b>Total</b>	<b>49</b>	<b>100.0</b>

Based on Table 5 above, it can be seen that the majority of breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital were in Stage I, with a total of 35 respondents (71.4%).

**Table 6.**

Distribution of Spiritual Support Levels Among Breast Cancer Patients Undergoing Chemotherapy in April 2026 at the NTB Provincial Regional General Hospital

Spiritual Support Levels	Frequency	%
High	14	28,6
Moderate	22	44,8
Low	13	26,6
<b>Total</b>	<b>49</b>	<b>100.0</b>

Based on Table 6 above, it can be seen that the majority of breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital had a moderate level of spiritual support, with 22 respondents (44.8%), while a smaller proportion had a low level of spiritual support, with 13 respondents (26.6%).

**Table 7.**

Distribution of Anxiety Levels Among Breast Cancer Patients Undergoing Chemotherapy in April 2026 at the NTB Provincial Regional General Hospital

Anxiety Levels	Frequency	%
Mild	13	26,5
Moderate	15	30,7
Severe	21	42,8
<b>Total</b>	<b>49</b>	<b>100.0</b>

Based on Table 7 above, it can be seen that the majority of breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital experienced severe anxiety, with 21 respondents (42.8%), while a smaller proportion experienced mild anxiety, with 13 respondents (26.5%).

**1.2Analisa Bivariate**

**Table 8.**

Analysis of the Relationship Between Spiritual Support Levels and Anxiety Levels in Breast Cancer Patients Undergoing Chemotherapy at the NTB Provincial Regional General Hospital

Spiritual Support Levels	Anxiety Levels						P value
	Mild		Moderate		Severe		
	n	%	n	%	n	%	
High	11	22,5	3	6,2	0	0	<b>0,003</b>
Moderate	2	4,0	12	24,5	8	16,3	
Low	0	0	0	0	13	26,5	
<b>Total</b>	<b>13</b>	<b>26,5</b>	<b>15</b>	<b>30,7</b>	<b>21</b>	<b>42,8</b>	

Based on the cross-tabulation in Table 8 above, it can be seen that breast cancer patients with high spiritual support mostly had mild anxiety, with 11 respondents (22.5%); those with moderate spiritual support mostly had moderate anxiety, with 12 respondents (24.5%); and those with low spiritual support mostly had severe anxiety, with 13 respondents (26.5%).

Bivariate analysis using the Spearman Rank correlation test showed a p-value of 0.003 (< 0.05), indicating that H<sub>0</sub> was rejected and H<sub>a</sub> was accepted. This means there is a significant relationship between spiritual support and anxiety levels among breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital.

**RESPONDENT CHARACTERISTICS**

**1. Age**

The study revealed that the majority of respondents were in the 46–65 year age range, with a total of 35 respondents (71.4%). The youngest respondent was 21 years old, and the oldest was 65 years old. Breast cancer (ca mammae) is caused by abnormal development of the mammary units. This disease is classified as a non-

communicable disease with an increasing number of cases. Abnormal growth can be influenced by hereditary factors. One of the main risk factors for breast cancer is aging, as the incidence rate is closely associated with increasing age. Women over 50 years old have a significantly higher risk of developing breast cancer [11].

## **2. Gender**

The results showed that all breast cancer patients undergoing chemotherapy were female, totaling 49 respondents (100%). Women are at higher risk of developing breast cancer because they have hormones such as estrogen, progesterone, and testosterone, which are also present in men but in lower levels. The levels of estrogen and progesterone in women are higher than in men [12].

## **3. Education**

The results indicated that the majority of breast cancer patients undergoing chemotherapy had a high school education, with 29 respondents (59.2%). Respondents with higher education tend to have broader knowledge, better self-monitoring when facing problems, are more receptive to medical advice, and have greater confidence that others can assist them in making decisions [9].

A study found that women with higher education levels are more aware of symptoms and seek medical examination earlier, allowing them to receive breast cancer treatment at an earlier stage [14].

## **4. Occupation**

This study shows that the majority of respondents were housewives, with a total of 26 respondents (53.1%). This is consistent with a study in which most breast cancer patients were housewives, totaling 21 individuals (58%) [1].

Based on research, more patients were in the unemployed category, totaling 23 individuals (67.6%), compared to 11 individuals (32.4%) who

were employed. Patients who were employed had a better quality of life than those who were unemployed; however, statistical analysis showed no significant effect of occupation on the quality of life of breast cancer patients. Women who are unemployed tend to experience depression more frequently, leading to a lower quality of life, whereas employed patients tend to have more social interactions. Social relationships are one of the most influential factors affecting quality of life, where women who rarely engage in social interactions or tend to be isolated are more likely to have a poorer quality of life across various functional scales [1].

## **5. Cancer Stage**

The results showed that most breast cancer patients undergoing chemotherapy were in Stage I, with a total of 35 respondents (71.4%). This finding highlights the importance of patients seeking medical examinations as early as possible, enabling them to receive better treatment and allowing cancer to be detected at an earlier stage [14]. Stages I and II are considered early stages, while Stage III is an advanced stage. Early diagnosis provides an advantage, as patients have a greater chance of recovery [4][6].

## **6. Level of Spiritual Support**

Based on the study results, most breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital had a moderate level of spiritual support, with 22 respondents (44.8%), while a smaller proportion had a low level of spiritual support, with 13 respondents (26.6%).

Spiritual support is a form of the application of spiritual intelligence in daily

life. Components of spiritual intelligence include the ability to cope with suffering, a high level of awareness, the ability to find meaning in life experiences, the ability to behave positively, and the use of spirituality to solve problems [1].

A study showed that among 42 respondents with low spirituality, the majority (57.1%) experienced very severe anxiety, while among 33 respondents with high spirituality, nearly half (48.5%) experienced mild anxiety [8].

### **7. Level of Anxiety**

The study results indicate that most breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital experienced severe anxiety, with 21 respondents (42.8%), while a smaller proportion experienced mild anxiety, with 13 respondents (26.5%).

Severe anxiety occurs because patients worry about their illness and the side effects of chemotherapy, such as hair loss, nausea, and vomiting. Patients also fear being abandoned by their partners or avoided by others due to these side effects. Anxiety can be defined as an emotional response to feelings of fear or discomfort, leading to restlessness and lack of relaxation. It also involves physical reactions, such as the release of stress hormones. Anxiety functions as a warning signal of potential threats or danger, preparing the body to respond through certain mechanisms. This signal is important for increasing alertness and encouraging individuals to take necessary actions. Anxiety is a natural response to stress and can affect a person's daily activities [13].

### **8. The Relationship Between Spiritual Support and Anxiety Levels in Breast Cancer Patients Undergoing Chemotherapy at the NTB Provincial Regional General Hospital**

Bivariate analysis using the Spearman Rank test showed a p-value of 0.003 ( $< 0.05$ ), meaning that  $H_0$  was rejected and  $H_a$  was accepted. This

indicates a significant relationship between spiritual support and anxiety levels in breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital.

Research found that a high level of severe anxiety among respondents was associated with a lack of spiritual aspects in breast cancer patients. Low levels of spiritual support are believed to directly influence the level of anxiety caused by chemotherapy side effects. Spirituality can be measured in various ways, including how individuals relate to others, perform religious practices, draw closer to God, and interact with their environment [13].

Research also found a relationship between spiritual support and anxiety levels in breast cancer patients undergoing chemotherapy. Similarly identified a significant relationship between spiritual support and anxiety in breast cancer patients at PKU Muhammadiyah Gamping Hospital, Sleman, Yogyakarta. Breast cancer patients not only experience physical pain but also psychological disturbances. They often experience psychiatric disorders such as delirium, depression, and anxiety. During chemotherapy, patients may feel dizzy upon entering the treatment room and frequently complain about their condition. They worry about their illness and whether they will still be able to spend time with their families [13].

Research by Nadiya Putri Adriyanny (2024) showed a significance value of 0.001 ( $0.001 < 0.05$ ), confirming a relationship between spiritual support and anxiety levels in breast cancer patients. The strength of the relationship was moderate (0.40–0.599) with a negative correlation, meaning that higher levels of spiritual support are associated with lower levels of anxiety.

This is supported with other research, who found a significant relationship between spirituality and anxiety levels ( $p$ -value  $0.000 < 0.05$ ). Similarly, Maulasari (2020) reported a relationship between family support, spirituality, and physical activity [12].

A study showed that bivariate analysis using the Chi-Square test yielded a  $p$ -value of  $0.000 (< 0.05)$ , indicating a significant relationship between spirituality and anxiety. Respondents with high spirituality tended to experience mild anxiety, while those with low spirituality were more likely to experience severe anxiety. These findings are consistent with previous studies, emphasizing the important role of spirituality in reducing anxiety among cancer patients. Strong spirituality helps patients accept their condition, improve coping mechanisms, and achieve inner peace, while low spirituality increases the risk of severe anxiety due to concerns about illness and treatment side effects [3].

#### 4. CONCLUSION

The study results indicate that most respondents were aged 46–65 years, were female, had a high school education, and worked as housewives. Most breast cancer patients undergoing chemotherapy were in Stage I, had a moderate level of spiritual support, and experienced severe anxiety.

Bivariate analysis using the Spearman Rank test showed a  $p$ -value of  $0.003 (< 0.05)$ , meaning that  $H_0$  was rejected and  $H_a$  was accepted. Therefore, there is a significant relationship between spiritual support and anxiety levels in breast cancer patients undergoing chemotherapy at the NTB Provincial Regional General Hospital.

These findings confirm that spiritual aspects play an important role in reducing anxiety and improving patients' quality of life. Therefore, spiritual support should be integrated into holistic nursing care for breast cancer patients.

#### 5. THANKS

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