



Journey of a Woman With Terminal Cervical Cancer

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When a cervical cancer diagnosis is made during a terminal stage, a woman is faced with many challenges. Although a terminal illness has many negative effects, such as physical pain, scarring, fear, and sexual dysfunction (Gotay, Farley, Kawamoto, & Mearig, 2008), women may experience a positive impact on their life, such as improved well-being (Gotay et al., 2008) and a greater appreciation of daily life (Skeath et al., 2013). The individual experience can lead to personal revelations. Sometimes, the diagnosis can even be seen as a blessing (Bahti, 2010). Understanding a personal experience in a real-life context of the terminal stages of disease is important. This story shares the day-to-day journey of a woman living with a terminal illness of cervical cancer. We will call her Tina.

Shortly after giving birth to her son, Tina was diagnosed with terminal cervical cancer. During an in-depth interview, Tina shared her experiences, insights, and hopes for those around her. Her journey included accepting the mixed blessings of her diagnosis, the hopes she had for each day, her views about the impact of the disease on her body, and the legacy she hoped to leave for her family and other women.

The Journey

Acceptance of Mixed Blessings

During her illness trajectory, Tina acknowledged changes in her new role as mother and wife. These changes within a family frequently occur during the terminal stages of a disease (Zeng, Ching, & Loke, 2011).

I wanted to be woken and . . . awakened, and I wanted to feed [my

son]. I wanted them to carry him down for every diaper change, and I wanted to get back to knowing my son again.

Tina also experienced the mixed blessings of learning about her diagnosis.

Apparently, I had my tumor for at least two years, so had my obstetrician discovered it earlier, I wouldn't have been able to have children. . . . We're really, in a sense, glad that it wasn't diagnosed earlier.

This view that the diagnosis can even be a blessing helps to manage the diagnosis in a positive way (Bahti, 2010; Clemmens, Knafl, Lev, & McCorkle, 2008).

Tina also had to accept support from others. Being dependent on healthcare providers (HCPs) was particularly difficult.

[HCPs] made it possible for me to live as long as . . . as long as I'm blessed with living. These people . . . without them . . . I couldn't have fought as hard . . . as I fought.

Even though dependence can undermine a sense of meaning (Khan et al., 2010), support from HCPs is essential along the journey (Reeve, Lynch, Lloyd-Williams, & Payne, 2012). Tina came to realize this dependence.

Mission of Hope for Each Day

Tina had a strong desire to control daily events, and she worked to make daily situations more manageable, whether they were insignificant actions or more consequential. "I was a bit of a control freak. . . . I thought that I would still be super-mom, super-wife, nothing was gonna change."

Tina didn't want HCPs, her family, or even friends to do things for her or know how she may not be able to control what was happening.

I would write everything down, and then I would come home and do everything. . . . I would purposefully go to some of my doctors' offices and make sure that I was made up . . . so I wouldn't become an inpatient because I was too dehydrated or whatnot.

A desire exists to tackle as much of the illness as possible to maintain daily control (Reeve et al., 2012). Tina maintained this desire to fight and control the battle as long as she could, in essence, until she had no further hope.

In her home, Tina created a "wall of love" to surround her physical living space and give her hope. This wall of love included cards sent to her from her husband, son, and family. "I started

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