

A Families Functional Support for Breast Cancer Survivor at Haji Adam Malik Hospital, Medan 2020

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Abstract

Purpose: The purpose of this study was to identify family function support for breast cancer survivors at Haji Adam Malik Hospital Medan.

Methodology: This study used a descriptive method with a sample size of 40 people. This study used consecutive sampling technique. The sample in this study were breast cancer patients who were undergoing a series of therapies at the Haji Adam Malik Hospital Medan. Variable family support was measured by a questionnaire distributed to breast cancer patients. The questionnaire consisted of 40 questions covering support for religious, love, economic and protection functions. Family support assessments use positive and negative criteria. Positive criteria show that the family supports breast cancer sufferers in carrying out the therapy. The negative criteria show that the family is less supportive of breast cancer sufferers in carrying out the therapy.

Results: The results showed that 82.5% positive family function support (82.5%) and 17.25% negative family function support. Family function support is generally positive. Families functional support from the highest to the lowest functions is the religious function (85%), the love function (82.50%), the economic function (82.50%) and the protection function (77.50%).

Applications / Originality / Value: It is hoped that the family can increase family support in the protection function by providing a sense of security and feeling protected.

Introduction

Families Functional Support

Breast cancer is the second leading cause of death in the world. The number of new cases and deaths due to cancer worldwide based on WHO (2015), from 2008 to 2030 is estimated to reach 17 million deaths and 26 million people in the category of morbidity. Globocan also stated that breast cancer ranks first of all cancers in women with a prevalence rate of 56.5 per 100,000 women in the world (IARC., 2012). Riskesdas (2018) showed cancer prevalence increased from 1.4% to 1.8%.

Based on a preliminary survey conducted by researchers at Haji Adam Malik Hospital Medan, there was an increase in cancer patients from 466 in 2017 to 516 people in 2019. Interviews conducted with cancer patients undergoing chemotherapy said that he felt he could not do anything else, he could only surrender, not enthusiastic about living his life, also feel ashamed because of his physical condition and the illness he suffered. Chemotherapy side effects can cause a decrease in self-concept. Low self-concept can affect the anxiety of breast cancer patients undergoing chemotherapy at Dr. Pirngadi Hospital (Lubis & Elysabet, 2017).

Social support is adequate support from family members, friends, and neighbors (Yan et al., 2016). The form of family support will have an impact on increasing a sense of self-confidence in facing the treatment process carried out by cancer patients. So that he feels loved and can overcome the problems he faces, and express his feelings openly towards his family and can help deal with the problems that are being experienced (Susilawati, 2015). The role of family members and people around them by providing life support for cancer sufferers will have a big impact on it (Nurhidayati & Rahayu, 2017). Adequate family assistance, makes patients feel calmer and more comfortable in undergoing treatment (Pristiwati, Aniroh, Wakhid, Nursing, & Ngudi, 2018). Husni, Romadoni, & Rukiyati (2012) stated that 75% of the respondents in Dr. Mohammad Hoesin Palembang acknowledged the lack of family assistance for them. Families can give them strength in dealing with problems about the symptoms and complaints they experience (Putri, 2017).

Medical care is very important for breast cancer, social support can increase the effectiveness of the treatment because it helps women to have a positive perspective about their health condition and to better manage their disease (Dumrongpanapakorn & Liamputtong, 2017). Social support must be modified to meet the individual needs of women. The healthcare profession is an important source of social support for women with breast cancer. Having an understanding and sensitivity to these women's experiences and challenges means that health care professionals can provide more individual support and care for women during their vulnerable life periods (Dumrongpanapakorn & Liamputtong, 2017).

Support from family and relatives is one of the best motivations for patients undergoing chemotherapy. It is proven that no patient comes alone during chemotherapy, so the patient waits more for their family to carry out chemotherapy and this can be related to the results of the study, the number of respondents 57 people (87.7 percent) made chemotherapy re-visits more than once and 100 percent accompanied by their family during chemotherapy. (Halimatussakdiah & Junardi, 2017). This shows that the patient's family support is very good, so that the patient is motivated to run chemotherapy even though the chemotherapy schedule changes 1-3 days from the initial schedule.

According to Husni, Romadoni, and Rukiyati (2012) also show that there is a significant relationship between family support and the quality of life of breast cancer patients in the Surgical Inpatient Installation of Dr. Mohammad Hoesin Palembang in 2012 with a p value of 0.013. This research is supported by Lubis and Hasnida (2016) that social support interventions significantly influence cancer patients to increase self-esteem and reduce levels of depression. Social support has a significant effect on cancer sufferers, social support interventions are much more effective in reducing depression levels than by increasing participants' self-esteem (Lubis & Hasnida, 2016).

Social support includes support from external resources and covers all sectors of society consisting of family, friends, colleagues / colleagues, and other organizations. Family support has a significantly greater positive impact on patients than friends and other supports. Family support may be linked to culture and traditions in China that dictate that family members have an obligation to provide emotional and economic support to patients. Social support, especially family support, plays a buffering role in reducing mental stress and improving the quality of life in cancer patients (Wen, 2017).

Family support aims to provide better conditions for people who are in a social environment. Family support can take the form of carrying out family functions. In general, family functions include religious functions, loving functions, protection functions, and economic functions (UU No. 10, 1992). Assistance by family makes breast cancer sufferers no longer feel left out from their group, feel cared for by the people around them (family), do not feel isolated from the environment, feel that someone is a place to share feelings and experiences, and no longer feel they have to be alone without being around. attention from others. These things will foster feelings of empowerment, confidence, feeling valued and also feeling needed (Widyakusuma, 2013).

Social support can be considered to reduce the effect and directly improve the mental health of individuals or families, social support is an important strategy that must exist in times of stress for families (Friedman, 2013). Social support can also serve as a preventive strategy to reduce stress due to its negative effects (Roth, 1996). This family support system of task-oriented help is often provided by extended family, friends, and neighbors. Assistance from extended families is also provided in the form of direct assistance, including ongoing and intermittent financial assistance, shopping, child care, physical care for the elderly, performing household tasks, and practical assistance during times of crisis (Friedman, 2013). According to Friedman (2013), the family functions as a support system for its members. Family members suffering from breast cancer are that people who are supportive, always ready to provide help and assistance if needed. There are four dimensions of family support, namely emotional support, information support, instrumental support, and reward support.

Assistance is part of family, friends, volunteers, as well as nurses and medical personnel who help in the patient's healing process. The immediate family automatically acts as the main companion and life support for cancer patients. Making many decisions, doing everything that is needed by patients, and taking care of everything related to hospital administration, insurance, medicines, and what is needed by patients is also the duty of a family in terms of assisting cancer patients (Nahdya, 2017).

Based on this background, the researchers are interested in researching « Families Functional Support for Breast Cancer Survivor at Haji Adam Malik Hospital, Medan 2020». The purpose of this study is to identify functional support families for breast cancer survivor in Haji Adam Malik Hospital, Medan 2020.

Methodology

Sampel

This study used a descriptive method with a sample size of 40 people. The sample in this study were breast cancer survivors who ran a series of therapy in Haji Adam Malik Hospital, Medan.

Material

The family function support questionnaire prepared by the researcher consisted of 40 statements with 4 answer choices: never, rarely, often, and always. In the choice of never with a score of 1, rarely given a score of 2, often given a score of 3, and always given a score of 4. The total score will be classified into 2 categories, namely Negative (score 40-100) and Positive (101-160).

Instrument

The family function support is identified by providing a questionnaire via google form to breast cancer survivors who are undergoing a series of therapies at Haji Adam Malik Hospital Medan in 2020. Variable family support was measured by a questionnaire distributed to breast cancer patients. The questionnaire consisted of 40 questions covering support for religious, love, economic and protection functions. Family support assessments use positive and negative criteria. Positive criteria show that the family supports breast cancer sufferers in carrying out the therapy. The negative criteria show that the family is less supportive of breast cancer sufferers in carrying out the therapy.

Analysis

Respondents' answers collected from google form were analysed with descriptive statistics and presented in a frequency distribution table.

Results

Based on the results of research from 40 respondents, data on the demographic characteristics of respondents were obtained based on the highest age of breast cancer survivors in the age range of 46-46 years (47.50%), 2 years of diagnosis (32.50%), Stage IIA (27.50%), Batak tribe (50 %), Work as a housewife (55%), and high school education (55%). Details can be seen in table 1.

Table 1. Frequency Distribution of Demographic Characteristics of Breast cancer survivors who are undergoing a series of treatments at Haji Adam Malik Hospital Medan in 2020

Demographic Characteristics	Frequency	Percentage (%)
Age		
24-34	2	5.00
35-45	13	32.50
46-56	19	47.50
57-68	6	15.00
Total	40	100.00
Length of Diagnosis		
1 year	9	22.50
2 year	13	32.50
3 year	10	25.00
4 year	1	2.50

Demographic Characteristics	Frequency	Percentage (%)
5 year	6	15.00
6 year	1	2.50
Total	40	100.00
Stadium		
I	1	2.50
IIA	11	27.50
IIB	8	20.00
IIIA	9	22.50
IIIB	10	25.00
IV	1	2.50
Total	40	100.00
Ethnic		
Batak	20	50.00
Karo	7	17.50
Jawa	10	25.00
Melayu	1	2.50
Mandailing	1	2.50
Minang	1	2.50
Total	40	100.00
Profession		
Farmer	2	5.00
Entrepreneurship	6	15.00
Government employees	7	17.50
Pension	1	2.50
Housewife	22	55.00
Honorary	1	2.50
College student	1	2.50
Total	40	100.00
Education		
SD	2	5.00
SMP	1	2.50
SMA	22	55.00
Diploma 3	2	5.00
Bachelor	13	32.50
Total	40	100.00

The results showed 82.5% support for positive family functions support (82.5%) and 17.25% support for negative family functions support. In detail can be seen in table 2.

Tabel 2. Frequency Distribution Families Functional Support of breast cancer survivors who are undergoing a series of treatments at Haji Adam Malik Hospital Medan in 2020

No.	Families Functional Support	Score Range	Total	Percentage (%)
1	Positive	101-160	33	82.5
2	Negative	40-100	7	17.5
	Total		40	100

Families function supports is generally positive. Families functions support from the highest to the lowest functions is the religious function (85%), the love function (82.50%), the economic function (82.50%) and the protection function (77.50%). The details can be seen in table 3.

Tabel 3. Frequency Distribution Domain Families Functional Support for breast cancer survivors who are currently undergoing a series of treatments at Haji Adam Malik Hospital Medan in 2020

No	Families Functional Support	Positive	Percentage (%)	Negative	Percentage (%)
1	Religious	34	85.00	6	15.00
2	Love	33	82.50	7	17.50
3	Protection	31	77.50	9	12.50
4	Economy	33	82.50	7	17.50
	Total			40	100

Discussion and Conclusion

Discussion

Families are caregivers who always motivate, control, schedule and accompany and remind breast cancer patients in undergoing a series of treatments. Family support for survivors undergoing chemotherapy makes survivors no longer feel left out from their group, feels cared for by those around them (family), does not feel isolated from the environment, feels that there are still people who are a place to share feelings and experiences, and no longer feel obliged to alone without any attention from others. These things will foster feelings of empowerment, confidence, feeling valued and also feeling needed (Widyakusuma, 2013).

This is in line with Susilawati's (2015) study of family support which has an impact on increasing self-confidence in facing the treatment process carried out by cancer patients. Family assistance will make it easier for cancer patients to carry out their activities. So that she feels loved and can overcome the problems she faces, and expresses her feelings openly to her family and can help deal with the problems she is experiencing. Support from the closest family is needed by patients undergoing chemotherapy, especially support from family, friends around. Every time chemotherapy patients come for treatment, they are always accompanied by their families according to a predetermined schedule. Before chemotherapy, the patient first checks a normal blood, otherwise eating normally will not be followed by chemotherapy. The family always reminds the patient of eating patterns and provides healthy food, and during illness, friends or neighbors often visit to see the patient's condition and always provide encouragement during treatment.

Nurjayanti (2019) showed that family support is the best influence on individuals, because this support is what it is. Effective self care will be able to improve the quality of life of cancer patients. To do self-care both independently and with assistance still requires family support so that the quality of life and perspective of cancer patients on life are better. Family support is highly expected by breast cancer patients with emotional support which includes empathy (feeling what other individuals feel), appreciation, love and care (providing time to listen and be heard). Patients who undergo chemotherapy always get support from family, friends around and health care services, motivation to heal themselves while undergoing chemotherapy. Patients are always accompanied by their family during chemotherapy, before chemotherapy, blood checks are always carried out if it is normal then chemotherapy is carried out and if it is not normal then it is not done, always remind chemotherapy patients to avoid cigarette smoke, always be accompanied by family if they do activities / exercise, maintain diet and eating healthy food, and can mengrilekskan mind or tell / share experiences with friends. Since chemotherapy, patients are always visited by their friends or neighbors and always encourage them to undergo treatment.

Support from family, friends and provision of health services is valuable for patients undergoing chemotherapy (Kolin, 2016). The better family support, the better the quality of life of cancer patients, cancer patients who receive support from their closest family will have an influence on sexuality, quality of life and health function (Eda, 2016). Yan et al (2016) also said that social support is adequate support from family members, friends, and neighbors. Higher family income, health insurance plans with lower loans, and the treatment used,

namely traditional Chinese medicine for breast cancer, lead to a better quality of life. Meanwhile, patients who receive or are currently undergoing chemotherapy have a much lower quality of life. The scale of social support and mentoring is related to improving the quality of life of cancer patients.

Social support is needed by patients undergoing chemotherapy, especially support from family and friends around them. Every time a chemotherapy patient comes for treatment, a chemotherapy patient is always accompanied by his family according to a predetermined schedule. Before chemotherapy, the patient first checks a normal blood, otherwise eating normally will not be followed by chemotherapy. The family always reminds the patient of eating patterns and provides healthy food, and during illness, friends or neighbors often visit to see the patient's condition and always provide encouragement during treatment.

Conclusion

Family functions support from the highest to the lowest functions are religious functions, loving functions, economic functions and protection functions. Families need to apply assistance in carrying out family functions in terms of supporting cancer patients in implementing treatment to prevent cancer metastases and increasing the life expectancy of breast cancer survivors. It is hoped that the family can increase family support in the protection function by providing a sense of security and feeling protected.

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