



RELATIONSHIP OF FAMILY SUPPORT ON SELF-ESTEEM IN PATIENTS WITH BREAST CANCER WHO ARE UNDERGOING CHEMOTHERAPY

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ABSTRACT

Breast cancer is one of the most common types of cancer among women worldwide. According to the prevalence of breast cancer cases in Central Java, Klaten Regency ranks first in the incidence of breast lumps in Central Java province. In the treatment process family support is considered an important factor that can affect the psychological condition of patients, including their self-esteem. The purpose of this study was to analyse the relationship between family support and self-esteem in breast cancer patients undergoing chemotherapy at Dr. Soeradji Tirtonegoro Hospital. This research method uses a quantitative approach. The research sample was selected through purposive sampling technique, which was 78 respondents. Data were collected using a questionnaire that measured the level of family support, namely the Social Response Questionnaire with the results of the validity and reliability of the Cronbach alpha results of 0.956 for 12 valid questions and self-esteem namely the Indonesian version of the Rosenberg questionnaire with the results of the validity and reliability of the Cronbach Alpha value of 0.845 with 10 valid questions. Data analysis was conducted using Pearson statistical test to determine the relationship between the two variables. The results showed that out of 78 respondents 79.5% were in the high category and 85.9% were in the high family support category and the Pearson test results showed a significant relationship between family support and self-esteem with ($p < 0.05$) so the conclusion of this study is that there is a significant relationship in family support for breast cancer patients who are undergoing chemotherapy at Dr. Soeradji Tirtonegoro Hospital.

Keywords: breast cancer; chemotherapy; family support

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INTRODUCTION

Breast cancer is a non-communicable disease that continues to pose a global health concern. (Sukmayenti, 2023). For women, breast cancer is the most frequent type of cancer, reaching 18% of all cancers that occur in women (Prastiwi & Kusumawati, 2020). The disturbance of the cell growth mechanism within the breast tissue is the cause of breast cancer. The milk-producing sacs, fatty tissue, lymph nodes, and mammary glands make up the breast. These four areas are where abnormal cells can proliferate and gradually harm the breast. (Whakid, 2018). Based on data from the Global Burden of Cancer Study (GLOBOCAN) in 2020, at 11.7% of all cancer cases, breast cancer is the primary cause of cancer incidence worldwide, surpassing lung cancer. With 685,000 fatalities from breast cancer globally, it is one of the top five causes of mortality.. In most countries, one in four cancer cases and one in six cancer-related deaths in women are caused by breast cancer (Shidqi et al., 2022). Based on this data, it was found that one of the top five causes of death globally is breast cancer.

In Indonesia, the prevalence of cancer is high (Nomiko et al., 2023). In Indonesia, the two cancer types with the highest incidence are breast and cervical cancer (Milenia et al., 2023). In Indonesia breast cancer is the second highest incidence cancer after cervical cancer and

there is a tendency to increase from year to year. Most breast malignancies come at an advanced stage. Indonesia's breast cancer incidence rate is found to be approximately 65,858 new cases each year out of 273,523,621 population and the highest cancer incidence rate in Indonesia is recorded in the provinces of DIY (4.1%), Central Java (2.1%), and Bali (2.0%), whose incidence rate exceeds the national rate (Herawati et al., 2022). Based on Riskesdas data in 2018, the incidence of breast cancer in Indonesia was 26 per 100,000 population where the Special Region of Yogyakarta (DIY) Province had the highest prevalence of breast cancer at 2.4%, followed by East Kalimantan 1.0%, and West Sumatra 0.9%. with the proportion of chemotherapy treatment on the island of Java, namely West Java (35.8%), Central Java (26.6%) and East Java (24.9%) (Marfianti, 2021). Based on this data, it was found that the highest breast cancer cases were still occupied by DIY Province and for Central Java and Bali Provinces, there was a decrease in the incidence of breast cancer cases, but for the incidence of chemotherapy treatment, Central Java was still ranked second after West Java.

According to the prevalence of breast cancer cases in Central Java, Klaten Regency/City has the highest percentage (first place) of breast lumps in Central Java province (Central Java Provincial Health Profile, 2019). The incidence of breast cancer in adolescence ranks second in prevalence according to BKKBN (2017), in addition to age > 75 years and 5-14 years. Based on existing prevalence data, cases of breast cancer continue to increase every year. According to Retnaningsih (2021), in her book entitled Palliative Nursing, it is stated that there are several treatments for cancer treatment including surgery, radiation therapy, hormone therapy, and also chemotherapy. Due to its ability to eradicate cancer cells, chemotherapy remains one of the most successful treatments for cancer patients (Setyawan et al., 2023). Based on the increase in cases, chemotherapy is still the treatment of choice for breast cancer patients.

Chemotherapy is one of the treatment modalities in systemic cancer that is often chosen especially to overcome advanced, local or metastatic cancer (Magdalena, 2022). Chemotherapy is very important and is felt to be of great benefit because it is systemic to kill cancer cells by administering it through an infusion, and is often the choice of effective methods in overcoming cancer, especially advanced cancer. Chemotherapy is still the biggest cause of changes in the quality of life of cancer patients (Pangribowo, 2019). Chemotherapy can cause various severe side effects such as nausea, vomiting, fatigue, hair loss, and decreased immune system (Di et al., 2020). Based on this statement, hair loss due to the effects of chemotherapy treatment can make patients feel less confident so that it affects the patient's self esteem. Self-esteem is the outcome of a person's assessment of themselves (Saiful, 2020). Increasing family involvement through family support is one strategy to help cancer patients feel more confident in themselves (Fatmiwiryastini, 2021). In poor psychological conditions due to physical conditions, breast cancer patients need support from loved ones, such as family. The patient's closest relative is their family, providing peace and comfort in dealing with various diseases faced by the patient (Mahayani, 2020). Family support is very influential on the patient's self esteem and is very necessary in the patient's treatment process because when the patient experiences physical changes, a decrease in his self-esteem and mental changes then there is a family who accepts and loves the patient sincerely can help the patient feel valued and valuable, despite physical changes or limitations due to the disease and treatment (Rakasiwi & Asnindari, 2022).

Based on a preliminary study conducted by the researcher, it was found that Klaten was ranked first in breast lump cases in Central Java and Dr. Soeradji Tirtonegoro Hospital was the only hospital that was used as a referral by other hospitals in Klaten for breast lump cases.

In Klaten, there is only one hospital that has chemotherapy services for cancer patients, namely dr Soeradji Tirtonegoro Hospital. According to the researcher's topic, which is the relationship between family support and self-esteem in breast cancer patients receiving chemotherapy at Dr. Soeradji Tirtonegoro Hospital, this is appropriate. The aim of the research was to ascertain how family support and self-esteem relate to each other in patients with breast cancer undergoing chemotherapy.

METHOD

The type of research used in this study was cross sectional. This study was conducted in the chemotherapy room of Dr Soeradji Tirtonegoro Hospital for three months, from April to June 2024. With the calculation of the Slovin formula, the sample size was 78 respondents selected using purposive sampling. The researcher distributed the questionnaire offline and then all answers received were selected based on the criteria. Responses from respondents that did not fit the inclusion requirements were excluded. The independent variable of this study is family support as measured by a social response questionnaire adopted from the Nursalam questionnaire in 2005 and modified by Kurniawan (2016) in research (Hidayanti, 2022). The twelve statements that make up the social support questionnaire include three different areas: instrumental support, emotional support, and self-esteem. Each statement item on the SWBS questionnaire has a value between 0 and 5 on a Linkert scale. The dependent variable of this study is using the Indonesian version of the Rosenberg questionnaire which consists of 10 question items measured by the Linkert Scale. Instrument measurement consists of 10 questions with 5 answer choices that have a value, score 1 = strongly disagree, 2 = disagree, 3 = undecided, 4 = agree and 5 = strongly agree. Every questionnaire question is valid. Researchers retested the validity and reliability of the Family Support Instrument and found that 12 valid questions had a Cronbach alpha of 0.956 and 10 valid questions with a Cronbach alpha value of 0.845 for the self-esteem variable. Family support is categorised into 3 levels: low, medium and high and for self-esteem is categorised into 4 levels: low, medium, high, very high. Data were analysed using Descriptive statistics which included demographics and characteristics of respondents, namely age, employment status, marital status, education, cancer stage, Estrogen receptor (ER) / Progesterone receptor (PR) results, breastfeeding history and length of suffering. Then for bivariate analysis, researchers used the Pearson test to determine the relationship between the two variables.

RESULT

Table 1 displays the study's findings, which based on the age of the respondents at Dr Soeradji Tirtonegoro Hospital, the most age is the Old Adult category with 50 respondents (64.1%). Based on the occupation of the respondents, the most work is the Labour category with 39 respondents (50%). Based on marital status, the most respondents were married with 65 respondents (83.3%). Based on the level of education, the most respondents were elementary and high school graduates with 30 respondents each (38.5%). Based on the stage, the most respondents were stage II with 35 respondents (44.9%) and stage III with 33 respondents (42.3%). Based on the results of Esterogen receptor, the most respondents were with negative results, namely 47 respondents (60.3%). Based on the results of Progesterone receptor, the most respondents were with negative results, namely 53 respondents (67.9%). Based on the range of length of illness, the most respondents were sick for less than one year, namely 46 respondents (59%). Based on breastfeeding history, 33 respondents (42.3%) breastfed all their children. Based on the Family Support Category, the most respondents were in the High Family Support category, namely 67 respondents (85.9%). Based on the Self esteem category, the most respondents were in the High Self esteem category, namely 62 respondents (79.5%).

Table 1.
Univariate Respondent characteristics (n=78)

Respondent characteristics	f	%
Age		
Mature	24	30,8
Older Adults	50	64,1
Elderly	4	5,1
Jobs		
Laborer	39	50,0
Civil servants	2	2,6
Doesn't Work	22	28,2
Self-employed	15	19,2
Marital status		
Not married yet	3	3,8
Marry	65	83,3
Divorced	10	12,8
Education		
No School	2	2,6
Elementary School	30	38,3
Junior High School	13	16,7
Senior High School	30	38,5
College	3	3,8
Stadiums		
I	10	12,8
II	35	44,9
III	33	42,3
<i>Esterogen receptor</i>		
Negative	47	60,3
Positive	31	39,7
<i>Progesterone receptor</i>		
Negative	53	67,9
Positive	25	32,1
Sickness Range		
Less than 1 year	46	59,0
Over 1 year under 2 years	21	26,9
Over 2 years under 3 years	9	11,5
Over 3 years under 4 years	2	2,6
Breastfeeding History		
Complete Breastfeeding	33	42,3
Less Breastfeeding	18	23,1
Not breastfeeding	27	34,6
Family Support		
Low	0	0
High	67	85,9
Medium	11	14,1
<i>Self Esteem</i>		
Low	1	1,3
Medium	14	17,9
High	62	79,5
Very High	1	1,3

Table 2 of this study demonstrates a p-value of 0.005 (p value <0.05) there a relationship between family support and breast cancer patients receiving chemotherapy at Dr. Soeradji Tirtonegoro Hospital.

Table 2.
Bivariate Relationship between Family Support and Self Esteem (n=78)

Family Support	Self esteem				Total	p value
	Low	Medium	High	Very High		
Medium	1 (9.1%)	4 (36.4%)	6 (54.5%)	0 (0.0%)	11 (100.0%)	0.005
High	0 (0.0%)	10 (14.9%)	56 (83.6%)	1 (1.5%)	67 (100.0%)	
Total	1 (1.3%)	14 (17.9%)	62 (79.5%)	1 (1.3%)	78 (100.0%)	

DISCUSSION

From the analysis test used, namely the Pearson correlation test, the Sig value was obtained. 0.005 where the p value is <0.05 so that in breast cancer patients receiving chemotherapy, there is a strong correlation between self-esteem and family support at Dr. Soeradji Tirtonegoro Hospital, with the majority of patients aged 46-65 years (old adult category), followed by the adult category (age 26-45 years). Of the 78 respondents, 67 (85.9%) had high family support, while 11 respondents (14.1%) had moderate family support.

Family support is a very important aspect, especially for people with breast cancer (Ayuni, 2020). Table 1 indicates which 78 of the patients with breast cancer are receiving chemotherapy, the most are with high family support as many as 67 respondents (85.9%). The findings of this investigation are consistent with that of (NI Jayanti, 2022) based on family support that most were in the good category as many as 49 respondents with a percentage of 48.6%. When it comes to marital status, the majority of respondents (65 respondents) were married, and this indicates that family support is strongly correlated with the patient receiving motivation and attention from her spouse or family. The results of this study are supported by (Kamariyah, 2020) which argues that family plays a very important role in family care with breast cancer during chemotherapy. One type of interpersonal interaction that shields a person from the negative consequences of stress is family support. Family is the most important source of support in undergoing treatment compliance (Fahamsya, 2022). Family support might take the shape of emotional, instrumental, informational, or evaluation support, but it can also take the form of a family's acceptance of its members (Ajis, 2022). Strong and consistent family support can have a significant impact on the psychological well-being of patients (Amalia & Rahmatika, 2020). So, it is clear from all of the aforementioned claims that family support is extremely important for breast cancer patients, particularly when it comes to coping with the chemo process and shielding them from the harmful effects of stress.

In the context of chemotherapy, which is often accompanied by severe physical and emotional side effects, family support can help patients feel more accepted and supported. This support can take the form of practical assistance, such as accompanying the patient to treatment sessions or helping to fulfil daily needs, as well as emotional support, such as providing encouragement, understanding the patient's feelings, and being a good listener. Therefore, with family support, patients will be more motivated to be consistent in treatment, not feel alone, and will feel that someone is paying attention to their condition so that a positive self esteem is built. In addition, family support can also function as a social safety net that helps patients feel less isolated and more connected to the outside world (Ibda, 2023). This is important because breast cancer patients undergoing chemotherapy often face social isolation, either because of their declining physical condition or because of the stigma that may be associated with this disease resulting in negative self-acceptance (Roma, 2019).

Based on the results of the study, it shows that of the 78 respondents who were in the high self esteem category, 62 respondents (79.5%) then with a moderate category of 14 respondents (17.9%) then a very high self esteem category of 1 respondent (1.3%) and a low self esteem category of 1 respondent (1.3%), it can be seen that of the 78 respondents, 62 respondents (79.5%) were in the high category. This happens because patients have good acceptance of themselves. Self-esteem is strongly influenced by the patient's age (Anggraini et al., 2019). In this study, it was found that most breast cancer patients who were undergoing chemotherapy at Dr Soeradji Tirtonegoro Hospital were in the old adult age category, namely 50 respondents (64.1%). Self-esteem is an individual's perception of self-worth, playing an important role in the quality of life and mental health of patients while facing severe illnesses such as breast cancer (Sari et al., 2023). Self-esteem associated with subjective self-evaluation often leads to depression and suicidal behaviour due to feelings of shame and helplessness (Risnawati et al., 2021). Individuals who have low self-esteem will also have feelings of worthlessness (Hapsari et al., 2019).

Consequently, because self-esteem is a component of a person's existence and an evaluative indication that summarizes their cognitive, affective, and behavioral traits, it is regarded as being extremely significant in life (Ibrahim, 2022). Since a person's inherent qualities are strengths that should be recognized and developed into something significant, self-esteem can also be seen as a person's appreciation of themselves (Utami et al., 2022). Higher self-esteem in patients with strong family support can contribute to their ability to cope with stress and anxiety associated with treatment (Nasrah et al., 2024). Patients with good self-esteem tend to have a more positive view of themselves and their future, which can strengthen their motivation to undergo treatment and face challenges that arise during the process (Mahayani, 2020). Patients who have a positive view of themselves tend to be better able to deal with emotional challenges that arise during treatment (Lestari et al., 2020).

The relationship between family support and self-esteem in breast cancer patients at the oncology surgery polyclinic of Sanglah Hospital, Denpasar, Bali, was investigated in a study by Luh Putu Mahayani (2020) on 188 respondents who were undergoing chemotherapy. The results yielded a p value of 0.000 ($p < 0.05$), indicating that there is a relationship between self-esteem and family support in breast cancer patients. Based on the results of this study, it is true that family support can improve breast cancer patients who are undergoing chemotherapy. Patients will feel accepted, feel that they are not different from others both in the hospital environment and outside the hospital. Patients with breast cancer who are undergoing chemotherapy can also still do their daily activities.

CONCLUSION

The Pearson test analysis of the association between family support and self esteem of breast cancer patients produced a p value of 0.005 ($p < 0.05$), indicating that there is a relationship between family support and self esteem at breast cancer patients receiving chemotherapy. The results showed that respondents had an average old adult age category with an age range of 46 to 65 years, most of them worked as labourers, most of the respondents were married, most of the respondents were elementary and high school graduates, most of the respondents were at stage II with mostly negative ER results and mostly negative PR results, most of the respondents had breast cancer for less than one year and most of the respondents breastfed all their children.

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