

DEVELOP EMPOWERMENT WHATSAPP GROUP TO INCREASE OPTIMISM OF BREAST CANCER SURVIVORS

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ABSTRACT

Breast cancer patients must undergo a series of therapies that take a long time with painful side effects. Fellow breast cancer sufferers are people who can provide psychological support to patients. Cancer patients need to get support from others to always motivate, encourage, motivate, control and assist cancer patients. Objective: This study aims to develop a model of empowerment of WhatsApp Group to Increase Optimism of Breast Cancer Survivors in Medan. Method: The type of research used is action research with 72 sample. There are 2 types of instruments for data collection, the focus group discussion (FGD) question guide and the Revised Life Orientation Test (LOT-R) instrument with cronbach alpha 0.95. The increase in optimism can be seen from the average score of optimism before and after research. Results: This research in the formation of the Whatsapps Group HFCC Community Group for posting positive things in the group. The results of the optimism assessment showed that 83% of participants had positive optimism after the webinar activity on tips and tricks "Successful controlling emotions with Optimism". This study has a significant positive impact on optimism before and after WhatsApp Group empowerment. Conclusions: Sharing positive experiences and information is very important to improve the optimization of fellow breast cancer patients in the WA Group that has been formed. In addition, family support is needed to continue to provide support in tasks and economic functions.

Keywords: breast cancer survivors; empowerment; optimism; whatsapp group

INTRODUCTION

A person who is diagnosed with cancer, from the moment it is diagnosed and tries to continue living is called a cancer survivor. Breast cancer diagnosis and treatment challenges a woman and raises physical, psychosocial, behavioral, and spiritual concerns (Jafari et al., 2013). A person will experience fear and uncertainty when diagnosed with cancer. (Lubis and Elysabet (2017) stated that 62.2 percent of breast cancer patients who experienced moderate anxiety due to chemotherapy treatment at Dr. Pirngadi Hospital Medan. Their lives are suddenly turned upside down as they struggle to understand the world of cancer treatment, how to enter that world, and how to emerge from it as fully human beings. Worry can lead to feelings of isolation so that people with breast cancer desperately need other people (Hermann, 2014).

Breast cancer ranks first of all cancers in women with a prevalence rate of 56.5 per 100,000 women in the world (Parkin et al., 1999). Globocan also stated that the prevalence of breast cancer varies, in Western Europe 177.5 per 100,000 women, East Asia 38.7 percent per 100,000 women, East Africa 26.4 percent per 100,000 women, and Japan 92.3 percent per 100,000 women. Data from the Global Cancer Observatory shows that the most common cancer cases in Indonesia are breast cancer, which is 58,256 cases or 16.7 percent of the total 348,809 cancer

cases.(WHO, 2019). The Indonesian Ministry of Health (2019) stated that the breast cancer rate in Indonesia reached 42.1 people per 100,000 population. The average death rate from this cancer is 17 people per 100,000 population.

The form of suffering experienced by cancer patients, one of the significant experience problems is the fear of inevitable death (Bibi & Khalid, 2019). The diagnosis and treatment of breast cancer has a considerable psychological impact on women. After the diagnosis of breast cancer, the fear of death, hopelessness and fear related to the expected life changes, together with the impaired quality of life due to treatment can lead to negative perceptions in the patient.(İzci et al., 2018). Patients are expected to have a positive attitude towards healing (Lilis Novitarum et al., 2019).

Efforts to prevent the occurrence of psychological problems in breast cancer patients, one of which is to increase the aspect of optimism towards the patient's recovery. Optimism is proven to have an effect on the well-being of cancer patients (Carver, 2001). However, there is not much information about optimism for healing in breast cancer patients in Medan City. Carver et al (2010) conducted a study on liver cancer patients and found that those who have high optimism want to reduce their difficulties or life pressures by training themselves to control the impact of treatment while patients who have low levels of optimism tend to be less able to withstand the side effects of treatment and are more prone to anxiety and depression (Sucala & Tatar, 2010).

Optimism towards recovery from breast cancer is influenced by several factors, including ethnocentric factors consisting of family, socioeconomic, gender and egocentric factors, namely self-esteem. Supported by the Social Issue Research Center (2009), that optimism for healing in cancer patients is influenced by social support 71 percent, stress 36 percent, coping 20 percent and self-efficacy 51 percent (Karademas, Karvelis & Agylopoulou, 2007; Mosim, Zietsch, Shekar , Wright & Martin, 2000). According to Wardiyah, Afiyanti and Budiati (2014), the social support obtained by breast cancer patients provides benefits for them to overcome psychological problems, adapt to stress, so that there is social support.

Social support according to Sarafino (2011) is an action that is actually carried out by other people or receives support and also refers to a person's feelings or perceptions that comfort, attention, and help are available, namely perceived support. Social support includes emotional support, appreciation support, instrumental support and informative support. Anggina, Hamzah, and Pandhit (2010) stated that adequate social support has been shown to reduce mortality, recover more easily from illness, improve cognitive function, physical and emotional health. Social support that can be empowered in breast cancer follow-up care is a fellow breast cancer fellow or self-help group(Hempstead, Green, Briant, Thompson, & Molina, 2018; Shin & Park, 2017; Van Den Berg, Van Amstel, Ottevanger, Gielissen, & Prins, 2013). The purpose of this study was to develop a Self Help Group Support (SHGS) empowerment model to increase the optimism of breast cancer survivors in the city of Medan.

METHOD

The type of research used is action research (AR). The research was conducted at Hope Family Cancer Care (HFCC) in July 2021 – October 2021. The population in this study were all cancer patients who were members of the HFCC with a total of 110 people. The sample in this study is called the participant. The selection of participants was limited to breast cancer patients who

joined the HFCC. This study uses two types of samples, namely samples for qualitative studies and samples for quantitative studies. The qualitative sample is 6 breast cancer survivors. Quantitative sample is 72 people. This action research research uses 4 stages of research, according to Coghlan and Brannick (2005), covering the stages of Diagnosing, planning action, taking action and evaluating action. Analysis of data in qualitative studies using interview recordings which were transcribed word for word in verbatim form. Data analysis in quantitative studies was carried out through univariate analysis and comparing the average scores before and after the activity. Univariate analysis was conducted to obtain a descriptive description of the results of the frequency distribution of respondents. This analysis is used to obtain an overview of each variable, such as SHGS and optimism. The increase in optimism was analyzed by comparing the average score before and after the activity.

RESULTS

Data collection was carried out for 4 months in the Hope Families Cancer Care (HFCC) community. The HFCC community consists of a collection of cancer patients who live in the city of Medan and its surroundings. This community was founded on the initiative of the owner of the Hope Clinic or Harapanku Clinic which is located in Jl. Stadium, Medan City Bar Example. Hope Clinic has outpatient services, anatomical pathology laboratory, chemotherapy, emergency department and home care. Patients who seek treatment at Hope Clinic have a medical diagnosis of benign and malignant neoplasms.

Diagnosics. At this stage using in-depth interview techniques to breast cancer survivors. In depth interview aims to dig up in-depth information about the experiences of breast cancer survivors and the obstacles faced in carry out a series of therapies and series of medical procedures. Researchers conducted in-depth interviews with Mrs. ES for 55 minutes.

Experiences of breast cancer survivors. Participants revealed that they had a bitter experience when they were sentenced to breast cancer. participants 7 years ago was sentenced to grade IIA breast cancer. At the time of being diagnosed with breast cancer, participants checked themselves alone without being accompanied by their families, participants felt weak and dazed so they took the wrong public transportation. At that time, participants did not have mobile phones and online transportation did not exist as it is now.

“...when the doctor said I had breast cancer.... I feel weak and like I don't have a spine. I was confused and dazed to the point that I took the wrong public transportation...”

Participants underwent surgery and chemotherapy. Participants felt that information at that time could not be obtained as easily as it is now, because mobile phones were not as sophisticated as Android. Participants seek information from doctors and nurses who treat them.

“...I used to be very active asking the doctors and nurses who treated me about anything I didn't understand. In fact, I was called a protester by the hospital staff. Hehehehe.... That's because we can't search as easily as now. Now, if we want information, we just need to take our cellphone and look for the information we need.”

Obstacles encountered. Participants revealed that the support from the family is not felt because the husband often works outside the city and the children are still small. So that the participants stated that they had to be independent in dealing with the breast cancer they suffered,

“...when I was sick, I had to be independent and be a strong housewife. My husband could not accompany me continuously in undergoing a series of breast cancer therapies starting from surgery to chemotherapy and outpatient treatment. One night my head hurt so bad that I couldn't move from the bed, there was only my son who was still in elementary school and they could only make sweet tea.”

Participants also revealed that there were obstacles from health workers that some health workers did not provide clear information to patients.

“...I was treated by several doctors at the hospital. But there is a doctor who curtly answered my question. But there are two doctors who are friendly and always patiently answer my questions until I understand correctly. So that until now when I have a complaint I always call him even in the middle of the night...”

Hope. Participants revealed that they need support from fellow breast cancer patients to share information and experiences with each other in carrying out breast cancer treatment therapy. at this time it is easier to share information because there are many social media and applications to be able to share in cyberspace.

“.. I hope that we fellow cancer patients can share information with each other so that we can strengthen our friends who have just been diagnosed with cancer...”

Measurement of optimism. After conducting in-depth interviews, breast cancer survivors were asked to fill out a questionnaire measuring life optimism using the Revised Life Orientation Test (LOT-R) instrument. (Finck et al., 2018). Respondents who filled out a number of 72 people with the following results:

Table 1.
 Frequency distribution Characteristics of respondents (n=72)

Characteristics of Respondents	f	%
Age		
31-40 years old	5	7
41-50 years old	30	42
Over 51 years	37	51
Duration of Diagnosis		
1-3 years	31	42
4-5 years	27	38
More than 5 years	14	19.4

Table 2.
 Frequency distribution of Respondent Optimism before the webinar (n=72)

Optimism	f	%
Positive	14	19
Negative	58	81

Action planning. The second stage in this study, the researchers used an online discussion method in the HFCC WA Group, which aims to discuss the action plans that will be taken to maximize the optimism of breast cancer patients. It is at this stage that breast cancer survivors and survivors agree that they need some topics. On July 1, 2021, the chairman of the HFCC stated

that they needed a topic on how to control emotions and anxieties, how to control fear and sadness. After an online discussion, it was finally agreed that the topic they had chosen was “Success in controlling emotions with optimism”. They suggested that the activity should be done via zoom, because of the current pandemic situation. They asked for resource persons who were experts in the field of psychology. The activity was agreed to be carried out on Saturday 10 July 2021 at 19.00 WIB.

Taking action. On July 10, 2021 at 19.00-21.00 WIB, a Webinar activity "Success in Controlling Emotions with Optimism" will be held with Mrs. Namora Lumongga Lubis, M.SC.,PhD as the resource person. The number of participants who participated in the webinar was 72 people consisting of breast cancer survivors and breast cancer patients who were completing a series of breast cancer treatment therapies. Based on the results of the webinar, participants asked for tips and tricks to increase positive expectations in their lives. The resource person answered by playing videos that could increase optimism. Participants seemed enthusiastic and always gave a positive response when the speakers gave material.

Evaluation action. The last stage in this study measures the optimism of breast cancer survivors using the LOT-R questionnaire and explores the experiences of breast cancer survivors with the support of the SHGS that has been carried out.

Table 3.

Frequency distribution of Respondent Optimism after the webinar (n=72)		
Optimism	f	%
Positive	60	83
Negative	12	17

Based on the results of discussions with survivors, they revealed that the WA group is now active in providing information sharing on activities to increase the optimism of breast cancer sufferers. After the survivors participated in the webinar, there was a significant increase in optimism.

DISCUSSION

Action research research requires the active involvement of participants so that jointly developed programs can be implemented according to the abilities of participants. The agreed social media activation is whatsapp group. Participants who were newly diagnosed with breast cancer revealed that sometimes they did not answer incoming chats because they felt they were worthless and felt inferior. They said that the pain would not go away and they felt that their friends who had undergone a series of treatment therapies were just showing off and thought their illness was more severe. This shows that psychological conditions require motivation to get up and feel confident.

Unpleasant feelings of cancer can be overcome by having a positive attitude towards healing. An optimistic attitude helps a person cope with life's stresses, reduces the risk of falling ill (Taylor, 2009), increases self-acceptance to be more positive (Chang, 2009), has a better ability to rise from adversity (Carver, Scheier, & Segerstrom, 2010), allows behavior change, increasing persistence in carrying out treatment (Rajandram, et al, 2011). Someone who has a positive outlook and has hope for the future will be said to be optimistic (C. Carver et al., 1993).

Patients with advanced breast cancer face uncertainty about their cure (Saniatuzzulfa & Retnowati, 2015). The majority of respondents only surrendered to God and underwent treatment according to their abilities. A woman who is diagnosed with breast cancer will go through a stage of acceptance of the loss. Breast cancer treatment takes a long time and one of them is the surgical process. The breast is one of the crowns of a woman, if the breast must be removed it will cause a loss response. This condition causes a woman diagnosed with breast cancer to experience that her life is meaningless and even loses life hope. Feelings of meaninglessness and helplessness if left unchecked can hinder treatment and even patients can stop treatment. Based on the results of interviews and discussions with breast cancer patients, there are several topics that need to be considered, namely experiences when diagnosing breast cancer, obstacles in carrying out treatment therapy, hopes and levels of optimism of breast cancer patients.

Experiences of breast cancer patients. Based on the results of the interview, the patient when diagnosed with breast cancer felt lost and very sad. At this stage, it is very important to assist the family to accompany the patient to check his health. According to Friedman (2013), the family functions as a support system for its members. Family members suffering from breast cancer must always be supportive, always ready to provide help and assistance if needed. There are four dimensions of family support, namely emotional support, informational support, instrumental support, and reward support. Families can provide emotional support in the form of attention, love and affection, empathy and always provide warmth in communication and interpersonal relationships. Families can provide advice and discuss ways to reduce psychological stress in breast cancer patients. families can also facilitate breast cancer patients to contact health workers who are deemed necessary for consultation about breast cancer and patient psychology. The domain of instrumental support provided by the family can be in the form of fulfilling medical expenses, providing a decent place to live, and providing assistance in carrying out daily activities. Families also need to give positive rewards in the form of praising breast cancer patients who have completed the stage of treatment therapy or in completing daily activities independently provide adequate housing, and provide assistance in carrying out daily activities (L Novitarum et al., 2021). Families also need to give positive rewards in the form of praising breast cancer patients who have completed the stage of treatment therapy or in completing daily activities independently provide adequate housing, and provide assistance in carrying out daily activities. Families also need to give positive rewards in the form of praising breast cancer patients who have completed the stage of treatment therapy or in completing daily activities independently (Lubis et al., 2020).

Constraint. Based on the results of interviews with breast cancer patients, they felt that health workers did not provide clear information about their disease. They realized that health workers had many other jobs. Health workers seem to briefly answer questions from breast cancer patients, so they feel less satisfied with the answers. Health workers should have free time to provide information to breast cancer patients about their disease. Knowledge of breast cancer patients will form a pattern of thinking and related behavior to a healthy lifestyle.

Hope. In addition to support from family and health workers, breast cancer patients need support from fellow breast cancer patients. Support for fellow breast cancer patients is made in a whatsapp group. In the WA group, they agreed to send mutually reinforcing messages and share experiences in carrying out breast cancer treatment therapy. The WA group of fellow breast

cancer patients has been created by the community administrator. They make rules for sharing information that is allowed in WA groups is positive information, do not provide information on alternative medicine, do not provide information related to death, and do not provide information that distinguishes ethnicity and religion. After mutual agreement, they discuss the topics needed to increase their life expectancy to be better and happier. The results of the discussion agreed that the chosen topic was "Success in controlling emotions with optimism". This activity was carried out via zoom on Saturday, July 10, 2021 at 19.00-21.00 WIB with resource person Mrs. Namora Lumongga Lubis, M.Sc., PhD. Participants were enthusiastic and always gave a positive response when the speakers gave material. In the webinar, the resource persons provided reinforcement for breast cancer patients to always think positively about anything. If breast cancer sufferers are dissatisfied with their present life, then they should not and should not blame others. What needs to be seen is what seeds or causes have been sown in the past. When the mind is filled with images,

Many people are calculating in doing something. In fact, we often count that we have done many good things and sacrificed for others. Often we judge that other people are doing bad things and doing bad things. "But why did God give me this cancer???" so that we will think: "How miserable my life is, I am not lucky, I am not useful to others" and finally we say: "God does not love me ...". These phrases should be avoided in

The most dangerous beliefs, which are more dangerous than cancer, are self-limiting beliefs or beliefs that weaken us. Self-limiting beliefs are beliefs based on doubt and fear. This belief contains negative thoughts about yourself that say that you are incompetent, not creative, you look bad, you have no strengths, you are stupid, and have no energy. The more often you repeat a bad behavior, the result of a false belief, the stronger the negative belief will be. Positive and optimistic feelings about yourself will emit a wave that will attract people, events, situations, resources, customers, or anything that falls on that frequency. And vice versa. When the dominant thought is negative, it will attract all the negative things into our lives.

Optimism level. Breast cancer survivors revealed that they felt calm and had greater enthusiasm before activities. Webinars teach breast cancer sufferers to think positively. Because the subconscious will control our thoughts. So if our thoughts are positive then positive things will come. After the webinar activity "Success in controlling emotions with optimism" there was an increase in the average score of optimism. Before the activity the average score of optimism was 15.972 and after the activity the average score increased to 20.944.

Prior to the webinar, breast cancer patients had low scores for each statement item. Item statements about the need for busyness and hope for the good for breast cancer patients are neutral with an average score of 3.125. This statement item gets the highest score because busyness in carrying out daily activities can distract breast cancer patients. The attention of breast cancer patients is diverted to carry out daily activities, so they forget for a moment their disease and think positive things and increase expectations. A breast cancer patient who does not always think about the best things in his life will make him think bad things will happen to him. They will depend on others and do not have the initiative to solve the problem.

After the webinar activity, there was an increase in the optimism of breast cancer patients. they have thought of good things and are optimistic about healing. However, there are statement items about being afraid of bad things happening, needing the help of others and rarely counting good things. This happens because of many factors, one of which is family support and peer support (fellow breast cancer).

CONCLUSION

Breast cancer friends are needed to motivate each other and share experiences in dealing with breast cancer treatment and ways to prevent complications or metastases. The role of fellow breast cancer patients is now very easy to do with the Whatsapp group social media

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