

EFFECT OF SELF COMPASSION, PERCEIVED SOCIAL SUPPORT , SELF ESTEEM TO QUALITY OF LIFE ON WOMAN AFFECTED BREAST CANCER

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ABSTRACT

Breast cancer is a chronic disease with high mortality, cancer patients can experience various problems including physical, psychological and spiritual problems, such as stress, sadness, physical fatigue and fear of the future, and all things will affect the quality of life of patients. Humans have a holistic nature that is both physical and psychological beings that influence each other, so that what happens with physical conditions will affect psychologically, to overcome this one of the factors that can be done to improve or affect the quality of life of breast cancer patients is self compassion, perceived social support, and self esteem to quality of life on woman affected breast cancer. The study participants were woman affected by breast cancer (N = 37). Data were analyzed by multiple regression analysis. The result show that there is an influence between self compassion, perceived social support, self esteem to quality of life which is very significant with a significant value of 0.000.

Keyword : Self compassion, Perceived Social Support, Self Esteem, Quality of life, Breast cancer

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INTRODUCTION

Breast cancer is a disease that affects a person's physical health condition. The existence of diseases that affect the condition of physical health is one aspect that determines the quality of life for a person because this disease makes the patient experience a decrease in

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physical and psychological conditions (Prastiwi, 2012)

The epidemiological transition situation in Indonesia is not much different from the global situation. According to (Kemenkes, 2012) there has been a 12-year epidemiological transition (1995-2007) where deaths from non-communicable diseases are increasing, while deaths from infectious diseases are declining. Based on hospital reports in 2009 and 2010 it also looks the same, namely non-communicable diseases are the main cause of death in hospitals. The proportion of deaths from non-communicable diseases in people aged less than 70 years, among others, cardiovascular disease by 39%, cancer by 27%, respiratory diseases, gastrointestinal diseases and other non-infectious diseases cause death of about 30%, and diabetes causes 4% (Kemenkes, 2012). Cancer ranks 7th (5.7%) the biggest cause of death in Indonesia after stroke, tuberculosis, hypertension, injury, perinatal, and diabetes mellitus. The national rate of cancer of 1000 per 4.3 population is attacked by cancer. The incidence rate was higher in women in which of the 1000 population 5.7 were cancerous, while men were only 2.9 per 1000 inhabitants (Kemenkes, 2013).

One form of decline in quality of life that is most experienced by patients with breast cancer is the decline in the psychological dimension. There are some psychological impacts faced by women diagnosed with breast cancer, such as fear of possible death and worry when telling the family about the illness (Umed & Verma, 2007).

According to Muhana S and Nida U (1998) this situation can lead to negative self-assessment, affect self-esteem and self-confidence of cancer patients, it is necessary efforts to improve this self-esteem, among others, with the support of family and one of them is social support obtained from peers, colleagues, neighbors and families who show that social support relationships with depression are all linear, meaning higher social support, the lower the depression level.

Self-compassion significantly improves mindfulness, enhances compassion to others, social relationships, life satisfaction, happiness, reduces depression, anxiety and stress (Neff & Germer, 2013). Some compassions mediate the relationship of mindfulness-

happiness. It supports mindfulness cultivating attitudes and compassion which in turn protects the negative effects of negative feelings such as guilt and self-criticism and well being (Walker & Colosimo, 2011).

A study found that breast cancer has a major impact on the psychological state of the patient. About 80% of breast cancer sufferers experience psychological disorders when getting a diagnosis of breast cancer and while undergoing medical treatment (Ghazalla, 2011)

According to the World Health Organization Quality of Life (WHOQOL, 1996) quality of life is an individual's perception of an individual's position in life in accordance with the cultural context and the system of values he adheres to, where individuals live and relate to expectations, goals, set standards and attention from someone. Issues that cover the quality of life are very broad and complex including physical health problems, psychological status, the degree of freedom, social relationships, and the environment in which they are located. Most women with breast cancer feel that they are in crisis period, requiring adjustments and in each patient will require different adjustments depending on their perceptions, attitudes and personal experiences regarding self-acceptance of the changes. So this condition will affect the quality of life of breast cancer patients. The dominant aspect in the formation of quality of life for cancer patients is a psychological aspect, including spirituality, social support and welfare (Pratiwi, 2012).

Quality of life can be used to evaluate the lives of individuals, as Lehman (in Basu, 2004) defines quality of life as a patient perspective of what they have done, how they do it, and how they feel about their condition. Quality of life includes the well-being of the individual. Neff (2003) also argues that self compassion should be associated with improved wellbeing as reflected in lower depression levels, lower anxiety and greater life satisfaction.

Quality of life is the degree to which a person enjoys satisfaction in his life. To achieve the quality of life then one must be able to maintain the health of body, mind and soul, so

that one can perform all activities without any disturbance (Ventegodt, 2003). Based on aspects of physical health, psychological health, and environment, the quality of life in early adult women with breast cancer is in the low category, while in the aspect of social relations are in the high category, this is because they get social support from their closest family and friends (Ade, 2014)

One of the studies conducted by Stefaniak (2012), explained that cancer patients who are socially isolated have a higher vulnerability to illness and feel higher pain. Social support is also a very important component for patients with advanced disease, especially in patients who are near death because it can reduce death anxiety of patients with advanced disease (Khawar, Aslam, & Aamir, 2013).

Social support received by the patient can have a positive or negative impact. A problem arises if social support should help the patient, it will have a negative impact on it. The impact of social support depends on how the sufferers interpret the social support it receives or what it is called perceived social support. Perceived social support important to know because the success of a social support depends on how recipients of social support interpret the process of how the support has a positive impact on their welfare, Terry (in Chrishianie, 2014). The definition of perceived social support by Duffy & Wong (2003) is the process by which individuals evaluate and interpret the available dimensions of social support and whether it is adequate for it when individuals need it.

Patients suffering from breast cancer experience many changes. These changes are not just physical changes but also risk experiencing changes to their self-esteem (Hartati, 2008). Self esteem is the result of an individual's judgment of himself. This assessment states an attitude of acceptance or rejection and shows how much the individual believes that he is capable, meaningful, successful, and valuable (Lubis, 2009).

According to Sarafino (2011), psychological health aspects have a very significant role in determining the quality of life. When the individual psychologist is low then the threat to his quality of life is a serious emotional stress, which is largely contained in the form of

depression and anxiety, whereas in the physical and social aspects of the environment can affect adjustment to chronic health problems.

Self-esteem is the result of individual research on himself. This assessment states an attitude of acceptance or rejection and shows how much the individual believes that he is capable, meaningful, successful, and valuable. Many breast cancer patients express themselves helpless, feel imperfect, feel embarrassed with breast forms, unhappiness, feel unattractive, feeling less accepted by others, feeling isolated and despairing (Hawari, 2004).

Factors affecting one's self-esteem are, sex, age, physical state (illness, surgery), work and family support (Perry, 2005). According to Susanto (2009) gender is a very influencing factor because some studies show that woman tend to have lower self-esteem and confidence than men.

This study aims to determine self-compassion, social support, and self-esteem towards the quality of life of breast cancer patients. Based on the above description, this study proposes a hypothesis: there is the influence of self-compassion, perceived social support and self esteem to quality of life on woman affected breast cancer.

RESEARCH METHODS

The method used in this research is using survey method by using questionnaire. Research participants are women affected by breast cancer amounted to 37 people aged 25 to 40 years.

Researchers use four scales, On the scale self compassion use scale short form (SCS-SF) owned by Neff (2011) which consists of 12 items by using likert scale. An item example of this scale is "when I fail, I feel unable" Reliability test and item discrimination get Cronbach's Alfa value is 0.859. With the range of validity values 0.306 - 0.755.

Perceived social support owned by Trifilia (2013) which consist of 9 item by using likert scale. An item example of this scale is "There is someone special who is there when I need". Reliability test and item discrimination get Cronbach's Alfa value is 0.871. With a

validity range of 0.357 - 0.637.

Self esteem scale use scale Coopersmith self esteem inventory form B which consist of 17 item by using likert scale. An item example of this scale is “I was able to accept myself as I am”. Reliability test and item discrimination get Cronbach's Alfa value is 0.883. With a validity range of 0.362-0.746.

Quality of life use scale WHOQOL-BREF which consist of 16 item by using likert scale. An item example of this scale is “how do you think your quality of life”. Reliability test and item discrimination get Cronbach's Alfa value is 0.887. With a validity range of 0.340-0.795. Data analysis in this study uses multiple regression analysis using SPSS statistical program for Windows version 21.

RESULTS AND DISCUSSION

The results of this study were obtained based on data collection in breast cancer patients using questionnaires. The results of the research are as follows:

Table 1. Demographic Data of Breast Cancer Patients

No	Demographic data	f	%
1	Age :		
	25-30 years	7	18,9%
	31-35 years	13	35,2%
	36-40 years	17	45,9%
2	Occupation :		
	Entrepreneur	6	16,2%
	Housewife	11	29,7%
	Private employees	13	35,2%
	Unemployment	15	13,5%
	Others	2	5,4%
3	Marital status:		
	Single	12	32,4%
	Married	25	67,6%
4	Length of Pain:		
	1-2 years	12	32,4%
	3-4 years	19	51,4%
	5-6 years	6	16,2%

Table 2 Effective Contribution to Dependent Variables

Independent Variables	Dependent Variables	Coefficient of Determination (R^2)	Effective contribution (%)
Self Compassion	Quality of life	0,97	97%
Perceived social support		0,07	7%
Self esteem		0,95	95%

According to Sari (2017) a variety of physical and psychological symptoms experienced by people with breast cancer can affect health and quality of life. While physical and psychological symptoms that have a negative impact on health and quality of life in people with breast cancer, then this is where the role of self compassion in breast cancer. This study is in line with research by Kearney (2017) which states that there is a good relationship between self-compassion and quality of life where self-compassion is a good strategy for managing the emotions of sufferers so that it will have a good impact on the quality of life they have.

Taylor in Hartati (2008) suggests the reactions commonly shown by those diagnosed with breast cancer are shocked, denied, anxious, fearful and depressed because everything suddenly becomes changed and the future becomes unclear. For a woman who has breast cancer, the feeling of devastation she experiences has more value than that, if a person has breast cancer, he is at risk of losing breast, for a woman the breast has its own value, the breast is a female organ that makes them more special than men, many patients are overwhelmed by the fear of something that can change the quality of life.

According to Pratiwi (2012) the quality of life is the individual's perception of his condition on the physical, psychological, social and environmental aspects to achieve satisfaction in his life, goodness in all aspects of life and one's satisfaction will lead him to a quality life, achieve a quality life, quality of life is closely related to one's physical and

mental health, physical and mental well-being will lead to self-acceptance, good body image, positive feelings, appreciation for oneself and others, happiness, good spirituality, well being and interpersonal relationships positive.

The poor quality of life in patients who value social support is not supportive or less due to the patient's negative perception of social support that makes the patient feel neglected and isolated. In patients with good quality of life due to attention, empathy and social support for breast cancer patients so that patients feel more valued and feel the involvement of sources of support for the patient's healing process which then affects his behavior and quality of life. In breast cancer patients the need for social support is very high, the support according to Keliat (1998) including spouses, parents, children, relatives, friends, health teams, superiors, counselors and so on.

The results of this study in line with research conducted by Prastiwi (2012) also mentioned indicators that affect the quality of life of cancer patients one of them is social support, support from the closest people is very important and affect the healing of a cancer patient in reducing stress and depression. Taylor in Prastiwi (2012) also mentions that social support from people around the subject provides great motivation and enthusiasm for the subject to heal and to live. The sense of love, sense of security and comfort that the subjects get ultimately provides for the well being that also determines the quality of life of cancer survivors.

Self esteem is one of the important parts in self-concept, where self-concept will affect the self esteem. Self esteem is the result of an individual's judgment of himself, expressed by an attitude of acceptance or rejection and showing how much the individual believes that self is capable, bearti, successful, and valuable. Decreasing self esteem is caused by changes in self-concept in which sufferers feel abnormal compared to others who are healthy (Chast & Burke, 2002).

A person suffering from breast cancer may experience a decrease in self-esteem that can be described as a negative feeling towards himself, loss of self-confidence, a feeling of

failure in achieving desire, pessimism, feeling more labor than others, and blaming himself for what he experienced (Hartati, 2008). Each organ body has its own meaning (body image) for someone. It is therefore understandable that women who have cancer abnormalities in their breasts, are a mental blow to their soul. For women breast is not only a breastfeeding organ, but is an organ attractiveness (attractiveness) for men. So that every organ has its own psychological significance for each woman. Therefore an act of treatment resulting in the loss or deformity of the body, has a psychological value and inevitably also occur changes to self concept and self esteem (Hawari, 2004).

This corresponds to Weiss (in Khera, 2002) who says that the function of social support is also very influential in increasing individual self esteem. In addition, with the support obtained by individuals, the individual will increase his self confidence and motivate the sufferer to be better, because individuals who have high social support tend to appreciate their life experiences as something positive, have high self confidence and more viewing his life optimistically compared to individuals with low social support. Furthermore, according to Handayani and Wahyuni (2012) more specifically, the existence of adequate support has been shown to be associated with reduced mortality, easier to recover from illness.

CONCLUSION

Based on the results that have been obtained it can be concluded that there is an influence between self compassion, perceived social support, self esteem to quality of life on woman affected breast cancer

SUGGESTION

For respondents expected to improve the quality of life it has to support the healing process.

For the next researcher can develop this research to be thorough covering physical dimension, psychological dimension, dimension of social relation and environmental dimension in patient of breast cancer by using descriptive qualitative method because qualitative method can reveal hidden things not yet known by society in general.

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