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**THE RELATIONSHIP OF FAMILY SUPPORT TO MOTIVATION (INTENTION) FOR MEDICAL TREATMENT IN PATIENTS WITH CERVICAL CANCER IN LIGAR MEDIKA CLINIC, WEST JAVA – INDONESIA**

**Aulia Ridla Fauzi<sup>1,2,3,\*</sup>, Sri Yuniarti<sup>3</sup>**

<sup>1</sup> Universitas 'Aisyiyah Yogyakarta, Yogyakarta, Indonesia (55292)

<sup>2</sup> Sekolah Tinggi Ilmu Kesehatan Muhammadiyah Ciamis, West Java, Indonesia (46211)

<sup>3</sup> Sekolah Tinggi Ilmu Kesehatan Jenderal Achmad Yani Cimahi, West Java, Indonesia (40531)

\*Corresponding author's email: [auliaridlafauzi@gmail.com](mailto:auliaridlafauzi@gmail.com)

**ABSTRACT**

**Background:** Cervical cancer is a gynecologic disease with high malignancy rate and becomes the second leading cause of death among women worldwide after breast cancer. In the Ligar Medika Clinic, from 129 cases have been identified, 8 patients died. High mortality rate in patients with cervical cancer was caused more by the delay in treatment due to lack of knowledge and physical side effects of treatment of patients and psychological disorders such as their rejection reactions.

**Aims:** The purpose of this paper is to know the relationship of family support to the motivation or intention for medical treatment in patients with cervical cancer

**Methods:** The research method used was an analytic study with cross-sectional design. There were 30 patients with cervical disease invited to fill the questionnaire. Data was obtained directly using a Likert scale questionnaire further run in univariate and bivariate analysis with Chi-Square.

**Results:** The result indicates most of the respondents were lack of family support. This present study found a significant correlation between family's supports to the motivation (intention) medical treatment of cervical cancer patients ( $p$  value  $< 0.001$ )

**Conclusion:** The findings alarm a need to encourage family of patients to provide support to them during medication. It is to provide complete information about cervical cancer that can induce the family's attention in ongoing treatment in patients and provide the patients the motivation.

**Keywords:** Family support, motivation, cervical cancer.

**INTRODUCTION**

Cervical cancer or carcinoma of the uterine cervix is a gynecologic disease with high malignancy rate and becomes the second most cause of death among women worldwide after breast cancer. (1) According to data, 83% of cervical cancer cases are in developing countries. 510.000 women are diagnosed with cervical cancer increase and 280.000 people died. These are because a patient comes in an advantages stage (2).

Data from the Ministry of Health (3) showed that patient with cervical cancer worldwide are estimated to occur approximately 500.000 new cases, 270.000 of them die every year and 80% occur in developing countries, including Indonesia. There are an estimated 40.000 new cases of cervical cancer each year in Indonesia. Cervical cancer is second most cancer found in women in the world. Cervical cancer malignancy is developed from pre-cancer to invasive cancer, and its process are gradually and take years (4).

The data obtained from the visit reports in Poly Obstetrics Dr. Hasan Sadikin Hospital which is a referral hospital in West Java Province of cervical cancer, there were about 2046 (twenty thousands and forty six) cases of patients who have cervical cancer, and in 2013 increased to 3101 (three thousand and one hundred one) cases of patients with a diagnosis of cervical cancer. Ligar Medika Clinic Bandung recorded, there were 119 (one hundred and nineteen) cases of cervical cancer patients, 6 (six) of them died, while in 2013 there were 129 (one hundred and twenty nine) cases of cervical cancer patients and 8 (eight) of them died.

The high mortality rate of cervical cancer caused more by the delay in treatment. The problem is the lack of knowledge of each regarding cervical cancer until they came to the hospital is already at an advanced stage,(5) coupled with the cost of treatment, which certainly is quite expensive. According to,(6) the high cost of therapy is one of reason not to take the disease seriously.

Not only a matter of medical expenses are a problem for patients with cervical cancer, but also the perceived impact of the treatment, such as regarding patient physical and psychological disorders such as mood problem, the rejection they have had cervical cancer. Sometimes people are panic and enforce things which are meaningless and futile. After passing all of things, in the end they will realize and accept the fact that their life are have been changed. Some patients have been thinking and feeling more realistic and entrusted entirely to the doctor for continued treatment.(7)

Hence in the process of therapy, the patient should have the motivation to be able to carry out the treatment process. Cervical cancer patients who have high motivation will strive against the disease although the hope for a recovery of 100% is thin. Therefore, the motivation for treatment is something that encourages and reinforces the behavior and guides people in stressful situations which it can survive without the desire to live and no willingness for people to continue living as well.(8)

When cervical cancer patients are experiencing adversity with all its problems regarding both physical and emotional reactions to face the illness, the social supports are required by patients to reassure and comfort them. The most dominant social supports are given to the family. The support may include the information, individual behavior, or a material that can make them feel being loved, cared and valued.(9)

Based on research conducted by Mutmainah(10) in RSUD Kraton Pekalongan District in 2013 showed that there is strong relationship between family supports for motivation to recover in cancer patients undergoing chemotherapy. It was evidenced by the Spearman Rank test in getting  $p\text{-value} = 0.001 < \alpha (0.05)$  so that  $H_0$  rejected by the Spearman Rank correlation coefficient ( $r = 0.730$ ) shows that there is a strong relationship between the variables of family support with variable motivation to recover in cancer patients undergoing chemotherapy and towards positive correlation means higher family support the greater motivation to improve in cancer patients undergoing chemotherapy in Kraton Pekalongan Hospital.

From the preliminary study on March, which was carried out at Ligar Medika Clinic, there is a decrease in cervical cancer patient visits. After interviewing 10 (ten) patients, there was a drop of motivation in treatment including 6 (six) patients who feel desperate to treatment of radiation and chemotherapy, 2 (two) patients stated that they could not bear the pain which he underwent during therapy performed in the absence of accompanying family, 2 (two) another patients said they were less of confident in the treatment carried out by doctors and chose alternative therapies. According to literature, research and previous preliminary study, researcher intend to know relationship of family support to motivation (intention) for medical treatment in patients with cervical cancer.

## **METHODS**

This research method using the analytical method of correlation which is study design to look at the relationship between 2 (two) variables, family support and motivation (intention) for medical treatment. The study design used a cross-sectional approach that researchers find the relation between risk factors (family support) with effect factors (motivation/intention for medical treatment) by measuring the dependent variable (motivation/intention for medical treatment) and independent variables (family support) at a time. The sample in this study were all women with cervical cancer in Ligar Medika Clinic totaling 30 (thirty) people. Sampling technique is total sampling according to Arikunto(11).

In this study, the dependent variable is the motivation of cervical cancer patients undergoing treatment. Motivation for treatment is encouragement from the inside and from the outside that arises in cervical cancer patients in treatment (chemo-radiation). Scale used in this variable is the Likert scale, in which the question was positives with: scores strongly agree (SS) = 4, agree (S) = 3, disagree (TS) = 2, strongly disagree (STS) = 1. Negative questions with: scores strongly agree (SS) = 1, agree (S) = 2, disagree (TS) = 3, strongly disagree (STS) = 4.(12)

Independent variable in this study is the family support that help provided by the family consisting of costs (instrumental support), information, and acceptance of physical changes after radiation and chemotherapy (support ratings), and taking into account the condition of the patient under any circumstances (emotional support).

Scale used in this variable is the Likert scale, in which question positive with a score strongly agree (SS) = 4, agree (S) = 3, disagree (TS) = 2, strongly disagree (STS) = 1. The negative questions with a score strongly agree (SS) = 1, agree (S) = 2, disagree (TS) = 3, strongly disagree (STS) = 4.(11)

Data was taken from primary data obtained directly from respondents through questionnaires concerning family support and motivation (intention for medical treatment) of cervical cancer patients. At the time of the study, respondents previously briefed in advance about the intent and purpose of the study, the researchers propose further informed consent (consent form) to the respondent. At the time of data collection, the researchers do when respondents were outpatient and inpatient clinics to facilitate researchers distributed questionnaires on family support and motivation to undergo treatment. Deployment questionnaire was conducted for approximately 6 days until the questionnaires collected and filled everything.

Validity test carried out before the questionnaires distributed, it was done for each question of each variable. A question is said to be valid if the variable score was significantly correlated with the total score. This questionnaire test instrument using the formula "Product Moment Correlation".(13)

Validity test results obtained valid values on the questionnaire support the family, while the motivation questionnaire undergoing treatment values obtained are invalid 4, namely the question item number 6 (six), 11 (eleven), 13 (thirteen), and 17 (seventeen) because the count  $r < r$  table (0.444), four questions were discarded because the other questions because it covers the whole substance.

In this study, the results of the test have a value of Cronbach's Alpha (0.954) that is greater than the constant value of 0.6, then the statement that has been declared valid reliable. As Riyanto(12) said that reliable if  $r$  alpha > constants (0.6).

## RESULTS

The research had been done to 45-55 years old 30 (thirty) female respondents with educational background maximum is senior high school. In this section, detail of results are briefly shown below:

### *Family support*

Table 1. Depiction of family support

<b>Family Support</b>	<b>Frequency (F)</b>	<b>Percentage (%)</b>
<b>Lack of Well</b>	20	66,7
<b>Well</b>	10	33,3
<b>Total</b>	30	100

Based on Table 1, it can be seen that the majority of respondents stated that family support is still lacking in the treatment of 20 people (66.7%).

### *Motivation (intention for medical treatment)*

Table 2. Depiction of Motivation (intention for medical treatment)

<b>Motivation (Intention) for medical treatment</b>	<b>Frequency (F)</b>	<b>Percentage (%)</b>
<b>Lack of High</b>	16	53,3
<b>High</b>	14	46,7
<b>Total</b>	30	100

Based on Table 2, can note that most respondents have low motivation in undergoing treatment that is as much as 16 (53,3%).

Table 3. The Relationship of Family Support to Intention for Medical Treatment in Cervical Cancer Patients.

<b>Family support</b>	<b>Motivation (intention) for medical treatment</b>				<b>Total</b>		<b>P value</b>	<b>OR CI 95%</b>
	<b>Lack of</b>		<b>High</b>		<b>N</b>	<b>%</b>		
	<b>n</b>	<b>%</b>	<b>n</b>	<b>%</b>				
<b>Lack of Well</b>	15	75	5	25	20	100	0,001	27 (2,705- 269,460)
<b>Well</b>	1	10	9	90	10	100		
<b>Total</b>	<b>16</b>	<b>53,3</b>	<b>14</b>	<b>46,7</b>	<b>30</b>	<b>100</b>		

Based on Table 3, it can be seen that of the 20 (twenty) respondents were less support from family, nearly all have lack of motivation to treatment as many as 15 (fifteen) people (75%), whereas 10 (ten) of respondents who support the family almost all patients have a high motivation as many as 9 (nine) people (90%). Statistical test results obtained P-value = 0.001 <  $\alpha$  (0.05), meaning that H0 rejected, and the HA accepted. It means, there is a relationship between family support for motivation in patients with cervical cancer for treatment. Value OR (odds ratio) = 2.7. That is the significant level of 95%, and it is known that patients who received the support of the family have the opportunity for their motivation (intention) is high compared with patients who received lack of family support.

Table 4. Strength Elements The Family Support to Intention for Medical Treatment in Cervical Cancer Patients.

<b>Family Support</b>	<b>Contingency Coefficient Value</b>
Informational support	0,39
Emotional support	0,47
Appraisal support	0,56
Instrumental Support	0,59

Based on Table 4, shows that there is a relatively high correlation between the instrumental support with motivation (intention) in cervical cancer patients treatment, with contingency coefficient value of 0.59 when compared to the three other elements of family support. Refer to table above, there is a relatively high correlation between instrumental support and motivation of cervical cancer patients undergoing treatment, with contingency coefficient value of 0.59 when was compared to three other elements of family support.

## **DISCUSSION**

Based on this research, it can be seen that among the four elements of family support are examined, it turns out that having a quite strong relationship is instrumental support. The support is the provision of material that can provide direct assistance such as lending money, provision of goods, food and services. The support can reduce anxiety because people can immediately solve the problem associated with the material [14].

Instrumental support is indispensable in addressing the issues that are considered to control. In this case, where the process of chemotherapy require financial support which is relatively expensive, so if this support was obtained, it will ease the burden on the patient and directly motivating patients to recover because it was able to finance their treatment [15].

This support is shown as families accompanying patients undergoing chemotherapy, the family set up a vehicle to drive, prepare the food and drink during chemotherapy, so the patients feel the family is always there for them.

The patients who have received support from families still highly motivated, this may be caused by other factors such as: the need, where the person doing the activity due to factors the needs of both biological and psychological. Foreexample, patients undergoing chemotherapy because parents want healthy fast, then expectation is a person motivated by experiencing success and their expectations of success are the satisfaction of a person, success and self-esteem increased and moved a person toward achieving the goal, then the environment is the place in where one lives [16,17].

Environment can affect a person as well as being motivated to do something, mass media in the era of globalization share the information both print and electronic (TV, radio, computer / the internet). Hence the media target can increase knowledge eventually and expected to change their behavior in a positive direction towards health [18].

The latter is the facility (infrastructure, availability of facilities that support the patient's recovery is available, easily affordable motivates patients to recover. Included in the services are the availability of cost sufficient to cure the patient and medical devices that support the patient's recovery [19,20].

## CONCLUSION

There are relationship between family support and intention for medical treatment of cervical cancer patients. The patients who receive good support from family, having motivation (intention for medical treatment) 27 (twenty seven) times higher than clients who do not receive family support. It is recommended that families of cervical cancer are more encouraging and taking part in their treatment, for example, providing assistance in the form of donations to further ease the burden and increase their motivation (intention for medical treatment), then provide provision of food and beverages. Hence the patients feel the family is really there when they needed and increase the motivation of the patients.

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