Review

Correlation Between Family Support and Emotional Regulation with The Resilience of Breast Cancer Patients in The City of Surabaya: A Literature Review

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ABSTRACT

Introduction: Breast cancer incidence has increased recently. Breast cancer patients usually feel inconvenience, psychological impact, and unstable emotions. The purpose of this study is to review the literature on the relationship between family support and emotional regulation with the resilience of breast cancer patients.


Results: 4,434 journals then identified for titles obtained as much as 2,142 and filtered according to abstract obtained 98 remaining journals, then review the complete full-text publication of a fully detailed 46 journal The final article that was in accordance with the inclusion criteria was 19 journals (articles).There is a significant relationship between family support and emotional regulation to the resilience of breast cancer patients.

Conclusion: Family support can affect the health conditions felt by breast cancer patients; good emotional regulation is needed so that the patient can survive. On the articles that have been reviewed, Family support and hope given to people suffering from chronic diseases can be mediators of the emergence of resilient characters With good emotional regulation Individuals can control emotions by monitoring, evaluating and modifying emotional reactions, thus acquired adaptive emotions and organized behavior, then forming good self-acceptance and the individual feeling confident in him, able to live a life of positive, optimistic, and confident.


1. INTRODUCTION

The incidence of breast cancer every year has increased, especially in developing countries (Kementerian Kesehatan RI, 2018; Luzzati, Parenti and Rughi, 2018). In general, people living with breast cancer experience unpleasant events and impacts in their lives.
Psychological effects that are often felt by breast cancer patients are helplessness, anxiety, stress, unstable emotions, and depression (Oetami et al., 2014). Unstable emotions in breast cancer patients are associated with the ability to adapt to the disease (Vaziri et al., 2017). Emotion regulation is the process of controlling emotions during or after experiences of threatening events and also stress (Garnefski, Kraaij and Spinhoven, 2007). By providing emotional regulation interventions in cancer, patients can manage negative emotions that are modified into self-motivation as well as express perceived emotions (Vaziri et al., 2017).

While family support can affect the health conditions felt by breast cancer patients, at present, family support for people living with breast cancer is not good (Husni, Romadoni and Rukiyati, 2012). Support from family members can influence stress in women with gynecological cancer. Cancer patients who have the support of the family feel loved and cared for (Kirana, 2016). Resilience is one’s ability to adapt to problems, survive, improve themselves, and grow in the face of crises and challenges (Connor and Davidson, 2003). At present, many people with breast cancer are less able to adapt to the disease process they are experiencing so that they experience a personal burden (Habersack and Luschin, 2013). In Indonesia, the number of studies that explain in detail the relationship of family support and emotional regulation to resilience in breast cancer patients is still limited.

According to Globocan (2018b), the incidence of new cases of breast cancer in women increased from 1.7 million in 2012 to 2.1 million in 2018. Breast cancer is most commonly experienced by women in 140 countries out of a total of 184 countries worldwide, with numbers of death reached 522,000 (Union for Internasional Cancer Control, 2016). Breast cancer ranks first in new cases at 43.3% and deaths at 12.9% (International Agency for Research on Cancer (IARC), 2012). In Indonesia, breast cancer is the most prevalent cancer (WHO, 2019). The highest incidence of breast cancer in women in Indonesia is 61,682 cases (Penelitian and Pengembangan, 2013). Breast cancer occupies the highest level in East Java. In 2016, there were 3600 breast cancer clients (Kemenkes RI, 2016). The purpose of this study is to review the literature on the relationship between family support and emotional regulation with the resilience of breast cancer patients.

2. METHOD

A literature study is a method used to collect data or sources related to the topic raised in writing. Literature studies can be obtained from various sources, both journals, books, documentation, the internet, and literature. The method of literature study is a series of activities that are pleased with the method of collecting library data, reading and recording, and managing writing material (Nursalam, 2017). The methods in this review literature use a comprehensive strategy, such as article search in a research journal database, search through the internet, review articles. The search databases are used covering Google Scholar, Sinta, Ners, and Scopus journals with the keywords "Family Support, Emotion Regulation, Resilience, Breast Cancer, Patient" in the last ten years 2009-2019. Then identified titles, abstracts and criteria of inclusion, Inclusion criteria used are articles with breast cancer patients with chemotherapy, Publication years post 2009, English language, Study design: Quantitative study, Observational, Systematic/literature review, Non-experiment study.

3. RESULT

International literature sought using the Google Scholar database, Sprott, Nurse Journal and Scopus with the keywords "Family Support, Emotion Regulation, Resilience, Breast Cancer, Patient" in the last ten years 2009-2019 obtained 4,434 journals then identified for titles obtained as much as 2,142 and filtered according to abstract obtained Sebanayk 98 remaining journals, then review the complete full-text publication of a fully detailed 46 journal The final article that was in accordance with the inclusion criteria was 19 journals (articles) (See Table 1).
4. DISCUSSION

Stressful situations and conditions, such as those experienced by people with breast cancer, have the potential to cause negative emotions (Burgess, 2006). Emotional reactions that are not appropriate, extreme, or uncontrolled will disrupt individual functions, so it is necessary to regulate emotions every time (Gross, 2014). Emotional regulation is important for someone to be able to control his emotions in the face of pressure; being able to express the
Table 1. Article Synthesis

<table>
<thead>
<tr>
<th>Title</th>
<th>Methods</th>
<th>Results</th>
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<tbody>
<tr>
<td>Social support and resilience in breast cancer patients (Case study of breast cancer patients undergoing chemotherapy) (Kirana, 2016)</td>
<td><strong>Design:</strong> Qualitative</td>
<td>The results showed all four subjects received support from family and friends so they felt loved and cared for. This resistance is influenced by the subject's ability to arise and survive breast cancer.</td>
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<tr>
<td><strong>Sample:</strong> Purposive sampling</td>
<td><strong>Variables:</strong> Social support and resilience</td>
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<td><strong>Instrument:</strong> Observation and indepth interview</td>
<td><strong>Analysis:</strong> Interactive model data analysis</td>
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<td>Picture of endurance in women with breast cancer (Saputri, et al., 2018)</td>
<td><strong>Design:</strong> Phenomenology Study</td>
<td>The results showed that all four respondents showed a good picture of resilience. Emotional regulation, being able to control pressure, having hopes for the future, and being able to identify problems were the most instrumental aspects in forming resilience.</td>
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<td><strong>Sample:</strong> Four women over the age of 40 who have been diagnosed with breast cancer over one year and are undergoing medical treatment before</td>
<td><strong>Dependent variable:</strong> Women with breast cancer</td>
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<td><strong>Independent variable:</strong> Resilience picture</td>
<td><strong>Instrument:</strong> Interview and observation</td>
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<td><strong>Analysis:</strong> The Stevick-Colaizzi-Keen Method</td>
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<tr>
<td>Ways of Coping With Stress and Perceived Social Support in Gynecologic Cancer Patients (Sema D et al., 2015)</td>
<td><strong>Design:</strong> Cross sectional</td>
<td>Social support from family members is a mainstay for dealing with stress in women with gynecological cancer</td>
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<td><strong>Sample:</strong> Purposive sampling</td>
<td><strong>Dependent variable:</strong> Women with gynecological cancer</td>
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<td><strong>Independent variable:</strong> Sosial support</td>
<td><strong>Instrument:</strong> Questionnaire</td>
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<td><strong>Analysis:</strong> Correlational</td>
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<td>Cognitive emotion regulation: characteristics and effect on quality of life in women with breast cancer (Ziongzhau et al., 2015)</td>
<td><strong>Design:</strong> Questionnaire</td>
<td>Compared with control subjects, patients reported less use self-blame, rumination, positive refocusing, refocusing on planning, positive reappraisal, and blaming others, and more often using acceptance and disaster</td>
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<td><strong>Sample:</strong> 665 women with breast cancer 662 healthy women</td>
<td><strong>Dependent variable:</strong> Women with breast cancer</td>
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<tr>
<td><strong>Independent variable:</strong> Regulation of cognitive emotions; characteristics and effects on quality of life</td>
<td><strong>Instrument:</strong> Questionnaire CERQ and QOL</td>
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<td><strong>Analysis:</strong> Descriptive analyses, t-tests,</td>
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<td>The Effect of Self-Efficacy, Family Support, and Socio-Economic Factors on the Quality of Life of Patients with Breast Cancer at Dr. Moewardi Hospital, Surakarta (Lusiatun, 2016)</td>
<td><strong>Design:</strong> Cross Sectional</td>
<td>Self-effectiveness, family support, education, and family income have a positive and significant effect on global health status</td>
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<td><strong>Sample:</strong> Purposive Sampling</td>
<td><strong>Dependent variable:</strong> Quality of life</td>
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<td><strong>Independent variable:</strong> Self-acceptance, family support, socio-economic factors</td>
<td><strong>Instrument:</strong> Questionnaire</td>
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<td><strong>Analysis:</strong> Multiple Logistic Regression</td>
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<td>Phenomenology Study:</td>
<td><strong>Design:</strong> Qualitative Descriptive</td>
<td>This information is very influential on the success of care and treatment of the client, so</td>
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<td><strong>Sample:</strong> Purposive Sampling</td>
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| Expectations of breast cancer clients who received chemotherapy about family support in Jakarta’s Dhramais Cancer Hospital (Kardiyudiani 2012) | **Variable:** Expectations of breast cancer clients  
**Instrument:** Interview and observation  
**Analysis:** Colaizzi | that various forms of family support that the client hopes can be used as a basis for further research in the form of qualitative and quantitative research |
| The Role of Family Support and Coping of Patients with Cancer Against Chemotherapy Treatment at the RBI Central Haji Adam Malik Hospital Medan (Saragih, 2010) | **Design:** Descriptive  
**Sample:** Purposive sampling  
**Dependent variable:** Chemotherapy treatment  
**Independent variable:** Family support  
**Instrument:** Questionnaire  
**Analysis:** Chi square test | Family support for patients undergoing emotional based chemotherapy is not good and only good spiritual diverts pain |
| Relationship Between Family Support and Coping Mechanisms for CA Mammæ Patients in the District Health Center of Semampir District, Surabaya (Fitriana, 2015) | **Design:** Cross sectional  
**Sample:** Purposive sampling  
**Dependent variable:** Coping mechanism for CA Mammæ patients  
**Independent variable:** Family support  
**Instrument:** Questionnaire  
**Analysis:** Rank Test Spearman Test | Spearmen rank test results obtained $p = 0.00 <0.05$ so that $H_0$ is rejected $H_1$ is accepted, which means there is a relationship |
| Implicit loneliness, emotion regulation, and depressive symptoms in breast cancer survivors (Marroquin et al., 2016) | **Design:** Descriptive analytic  
**Sample:** 390 women  
**Dependent variable:** Loneliness, emotion regulation, signs and symptoms of depression  
**Independent variable:** Survivor breast cancer  
**Instrument:** Questionnaire  
**Analysis:** Descriptive statistics, Multivariate logistic regression  
**Design:** Correlative descriptive  
**Sample:** Purposive sampling  
**Dependent variable:** Motivation of cured cancer patients  
**Independent variable:** Family support  
**Instrument:** Questionnaire with a check list  
**Analysis:** Uji Spearman Rank Test  
**Analysis:** Pearson Rho’s Correlation Test | The results show that explicit and implicit breast cancer-related emotion regulation has a different relationship with depressive symptoms, and implied loneliness moderates the effects of an implicit emotional approach.  
| Correlation between Family Support Against Cure Motivation in Patients with Cancer Undergoing Chemotherapy at Keraton District Hospital in Pekalongan Regency (Muthmainah et al., 2010) | **Design:** Study of literature | There is a relationship between the two variables with a correlation coefficient $= 0.730$ which means the combination is strong |
| Relationship of Family Support to Motivation of Breast Cancer Patients in Undergo Chemotherapy in Cendrawasih Hospital in Arifin Achmad Regional Hospital in Riau Province (Mahwita, et al., 2012) | **Design:** Cross sectional  
**Sample:** Purposive sampling  
**Dependent variable:** Motivation to undergo chemotherapy  
**Independent variable:** Family Support  
**Instrument:** Questionnaire  
**Analysis:** Pearson Rho’s Correlation Test | $P$ value $= 0.008$ ($p$ value $<0.05$) with OR $= 9,000$ ($95\%$ CI $= 1,958-41,364$), meaning that $H_0$ is rejected. So it can be concluded that there is a significant relationship between support for the motivation of breast cancer patients in undergoing chemotherapy |
<p>| Emotional regulation in the treatment of cancer patients a literature review (Seprian &amp; Warith, 2019) | <strong>Design:</strong> Study of literature | The results of the 10 journals, 7 journals found that there is psychological pressure on cancer patients include helplessness, negative emotions, denial, adjustment, anxiety, |</p>
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<td>Relationship of Family Support with Quality of Life of Cancer Patients Undergoing Chemotherapy at Keraton District Hospital in Pekalongan Regency (Hakim et al., 2011)</td>
<td>Design: Correlative descriptive sample: Purposive sampling independent variable: Family support dependent variable: Quality of life of cancer patients instrument: Questionnaire analysis: Chi square test</td>
<td>The results showed that in the regulation scores of positive and negative cognitive emotions, the average score of the MS group was significantly more than the cancer group. In lifestyle, the average score of the brain tumor group is significantly more than the other two groups. In the adjustment and dimensions of personal, social, work, and family, the cancer group scores significantly more than the other two groups. Most of the family’s knowledge belongs to the category of sufficient knowledge and sufficient family support in providing support to Ca Mammae’s clients who are undergoing chemotherapy and most of the compliance levels of clients who are undergoing chemotherapy in the compliant category.</td>
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<td>A comparison of cognitive emotion regulation, lifestyle, and dimensions of adjustment in 3 groups of patients with multiple sclerosis, patients with cancer under chemotherapy and patients relieved from brain tumor (Jahan Miri et al., 2018)</td>
<td>Design: Causal-comparativ sample: Convenience sampling method, 72 patients dependent variable: Regulation of cognitive emotions, lifestyle independent variable: Cancer patients with multiple sclerosis instrument: Questionnaire analysis: Multivariate analysis</td>
<td>The results showed that the value of p = 0.00 and r = 0.86. This indicates a strong and significant relationship between family support and anxiety in breast cancer patients.</td>
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<td>Relationship of Family Knowledge and Support with Chemotherapy Compliance with Clients with CA Mammae (Hartini, 2017)</td>
<td>Design: Cross sectional sample: Purposive sampling independent variable: Knowledge, family support dependent variable: Chemotherapy compliance in patients CA Mammae instrument: Questionnaire analysis: Spearman Rho analysis test</td>
<td>The results showed that PMS was associated with changes in the emotional regulation process, as assessed both explicitly and at an implicit level. Further research on the etiology of PMS should focus more on cognitive-emotional processes and their interactions with biological changes related to the menstrual cycle.</td>
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<tr>
<td>Correlation between family support with anxiety in breast cancer patients in Pacar Keling Surabaya Health Center (Rizky, 2015)</td>
<td>Design: Cross sectional sample: Purposive sampling independent variable: Anxiety in breast cancer patients instrument: Questionnaire &amp; observation analysis: Non-parametric correlation</td>
<td>The results showed that PMS was associated with changes in the emotional regulation process, as assessed both explicitly and at an implicit level. Further research on the etiology of PMS should focus more on cognitive-emotional processes and their interactions with biological changes related to the menstrual cycle.</td>
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<td>Regulation in women with premenstrual syndrome (PMS) explicit and implicit assessments (Eggert et al., 2016)</td>
<td>Design: Case control study sample: 54 women with PMS cases and 52 women who have not PMS variable: PMS women’s emotional regulation instrument: Questionnaire, SAP analysis: T test, ANOVA</td>
<td>The results showed that PMS was associated with changes in the emotional regulation process, as assessed both explicitly and at an implicit level. Further research on the etiology of PMS should focus more on cognitive-emotional processes and their interactions with biological changes related to the menstrual cycle.</td>
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right feelings will help foster resilience in a person (Nasution, 2011). Research on emotion regulation states that the ability to manage emotions can help someone in controlling themselves, especially when faced with pressure so that the ability to control oneself well can help someone direct their behavior (Mawardah and Adiyanti, 2014). In patients with breast cancer, good emotional regulation is needed so that the patient is able to survive, overcome stress so that it can be said as a patient who has resilience (Connor and Davidson, 2003). (Horton and Wallander, 2001). The support given by the family to sufferers in the form of motivation, information, moral support in the form of enthusiasm can increase the ability of resilience in patients characterized by the emergence of the patient's enthusiasm for recovery (Shally and Prasetyaningrum, 2017). Patients with good resilience can help patients to reduce the negative impact of the treatment process they are undergoing and tend to be able to deal with the disease appropriately and maintain a balance of mental, psychological conditions (Molina et al., 2014).

Based on previous research, in increasing the resilience of breast cancer patients, religious cognitive intervention/therapy is carried out (Alifia, 2018). Based on the resilience theory model developed by (Deshields et al., 2016). Based on the resilience theory model developed by (Deshields et al., 2016), resilience has basic attributes in the form of personal and environmental aspects. The basic attribute can be protective or can be a dangerous factor. Internal protective factors can be found in aspects of personality, cognitive components, previous life experiences, intelligent individuals, able to express themselves emotionally, or who have better self-control. Environmental factors are factors outside one's personal, including this aspect; for example, social support, some of these factors can increase resilience in people with breast cancer.

5. CONCLUSION

Emotional regulation is important for a person to be able to control his emotions in the face of pressure, in patients with breast cancer good emotional regulation is needed so that the patient is able to survive, overcome stress so that it can be said as a patient who has resilience. Family support can also affect the health conditions felt by breast cancer patients. Support provided by the family to sufferers in the form of motivation, information, moral support in the form of enthusiasm can increase the ability of
resilience in patients characterized by the emergence of the patient's enthusiasm for recovery.

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