

Socio-Cultural Transformation of Early Detection on Breast Cancer Suspect in Wahidin iSudirohusodo Hospital, Makassar Indonesia

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ABSTRACT

Early detection is one of the prevention of diseases including breast cancer. Socio-cultural transformation of breast cancer patients is strongly associated with knowledge, attitudes and behaviors of health workers. In this study posed several questions in response to the gap between what should be happening (*das sollen*) with what the ground reality (*das Sein*). The research questions were: (a) How the Process and the implementation of early detection of breast cancer in a comprehensive manner by the patient and medical personnel (b) How to Influence the life style of the increasing number of patients with breast cancer (c) How do patterns of social interaction that developed between health workers, families and communities with a form of breast cancer patients and socio - cultural changes generated (d) How to transform socio - cultural significant in the implementation of programs of early detection of breast cancer. The research method used was a qualitative phenomenological approach. Informants consisted of key informants and experts. Key informants were patients and health workers. While informants are those who are experienced experts in the field of sociology of health and breast cancer. This study uses a Theory of Social Interaction and Social Change as an analytic tool. The findings of this study found that early detection of disease is not just an issue that merely physiological factors alone.

However, early detection is a social process. The social process provides social interaction with diverse patterns of social relationships. The fact this study shows that early detection is not implemented properly by the informants who had breast cancer. Journey in the process of breast cancer treatment on self- informants are also very diverse. Many forms, among others ; getting worse , recovered and relapsed again and the process towards healing. The fact is, if viewed from a sociological point of view would assert that there are problems with social interaction with patients and medical personnel as well as with family and friends especially her husband . Government's role as a fiduciary concluded less health development program relating to the implementation of the treatment of breast cancer. Ultimately socio - cultural transformation in the form of increased awareness and vigilance of women against breast cancer cannot be realized with both.

Keywords: Socio-cultural transformation, early detection, breast cancer, life style.

1. INTRODUCTION

Cancer is the general term for more than 100 different distinct diseases that can affect every part of the body. Cancer is defined by a rapid abnormal cell growth beyond usual boundaries that can affect adjoining parts of the body including other organs. This process is referred to as metastasis which is the major cause of death from cancer.

Cancer is caused by changes in the genes responsible for cell growth and repair, driven by interaction between genetic host factors and external agents (Kirch, 2008:97). WHO and the World Bank in 2005 estimated that 12 million people worldwide suffering from cancer and 7.6 million people died every year. If it is not controlled, an estimated 26 million people will suffer from cancer and 17 million died of cancer in 2030. Ironically, this incident will happen quickly in poor and developing countries (International Union Against Cancer / UICC, 2009).

Early detection is one of the efforts to eradicate the disease, including this breast cancer. Assessment implementation of early detection is associated with knowledge, attitudes and behaviors of health workers. This is confirmed by Fauziah et.al (2011:448) when explaining the implementation of early detection of cervical cancer as follows: "In the implementation readiness assessment of cervical cancer early detection program was needed data on knowledge, attitudes, and behaviors of health workers who will run the program. This data is extremely useful as a baseline in designing training programs for the early detection of cervical cancer primary health care workers, especially doctors and midwives"

Basch and Gold in Pee and Hammond (1997:234) illustrates the importance of socialization within the school related to cancer following: "Health promotion programmes concerning testicular cancer and cervical cancer in schools have rarely been evaluated, and the effects they have on the children are not known. Even less is known about what the children themselves think of such programmes, or how acceptable and appropriate they find them. Health education research has largely ignored this "user perspective" although this omission has

been recognized". More specific Sariego (2010:1397) defined that Breast cancer is a type of cancer originating from breast tissue, most commonly from the inner lining of milk ducts or the lobules that supply the ducts with milk"

Treatment of breast cancer is not just a purely physiological but also reflect broader conditions that sociological. This is confirmed by Bulotienė, Ostapenko and Vesėliunas (2005:82) research which concluded as follows: "Our study has shown that the Patients' quality of life after mastectomy or breast conserving surgery depends on social factors: age, marital status and occupation" .Butt in El Shamaa and Hassanein (2012:34) implied that "Breast cancer is the most common cancer in females accounting for 20% of all female cancers. Every year approximately one million new cases of female breast cancer are diagnosed worldwide, most of which occurs in developed countries. Breast cancer is the leading cause of female cancer death".

Health promotion applies to living conditions of human beings. The point is to activate biological, mental, and social resistibility and safety factors as well as to set up living conditions that allow positive thoughts and feelings and which permit an optimal amount of physical strain and relief (Badura in Kirch (2008: 1131). South Sulawesi Health Office explained that breast cancer patients seviks and the largest in the city of Makassar, Gowa regency, Wajo, Bone, and North Luwu. Cases of breast cancer were recorded for 203 cases in hospitals, health centers and 316 in. Then 109 cases of cervical cancer in the hospital, and 275 cases in the clinic. Whereas in 2009 the number of breast cancer cases in 252 hospitals and 600 health centers in. While 97 cases of cervical cancer in the hospital and 177 in the clinic. Health Department to seek a second control this chronic disease with early detection program. Ie with Visual

Infection Acetic Acid to detect cervical cancer. In addition, the provision of early breast cancer detection equipment from the Department of Health specifically provided in General Hospital of Sheikh Yusuf Gowa as a pilot project.

2. MATERIALS AND METHODS

2.1 Sampling Location and Design

This study took place at the Hospital Wahidin Sudirohusodo Makasar, Indonesia. The focus of this research is the process and the implementation of early detection of breast cancer in a comprehensive approach that includes medical, sociological and cultural with preventive, promotive and advocacy by health workers in the realization process of socio - cultural changes that are expected to both patients and society in general. The method used in this study is qualitative phenomenology. Qualitative research by Ruyter and Capital

sosial holl in DeRosia and Christensen (2009) describes that qualitative research is always used to observe the phenomenon is still relatively little known. In this context, the purpose of qualitative research in this context, the purpose of a qualitative study is to formulate theories and / or hypotheses. Phenomenology is essentially a move from case studies of individual or group to understand the social reality.

According to the Kuswarno heglof and Sacks (2009) that: "In phenomenological research, the task of the researcher is to record social conditions, making it possible to demonstrate the ways that made informant. At this point the researchers make interpretations about the meaning of their actions and thoughts will be the structure of the state. Analysis of these informants is a technique that is often used to describe the phenomenology of how people think about themselves through conversation.

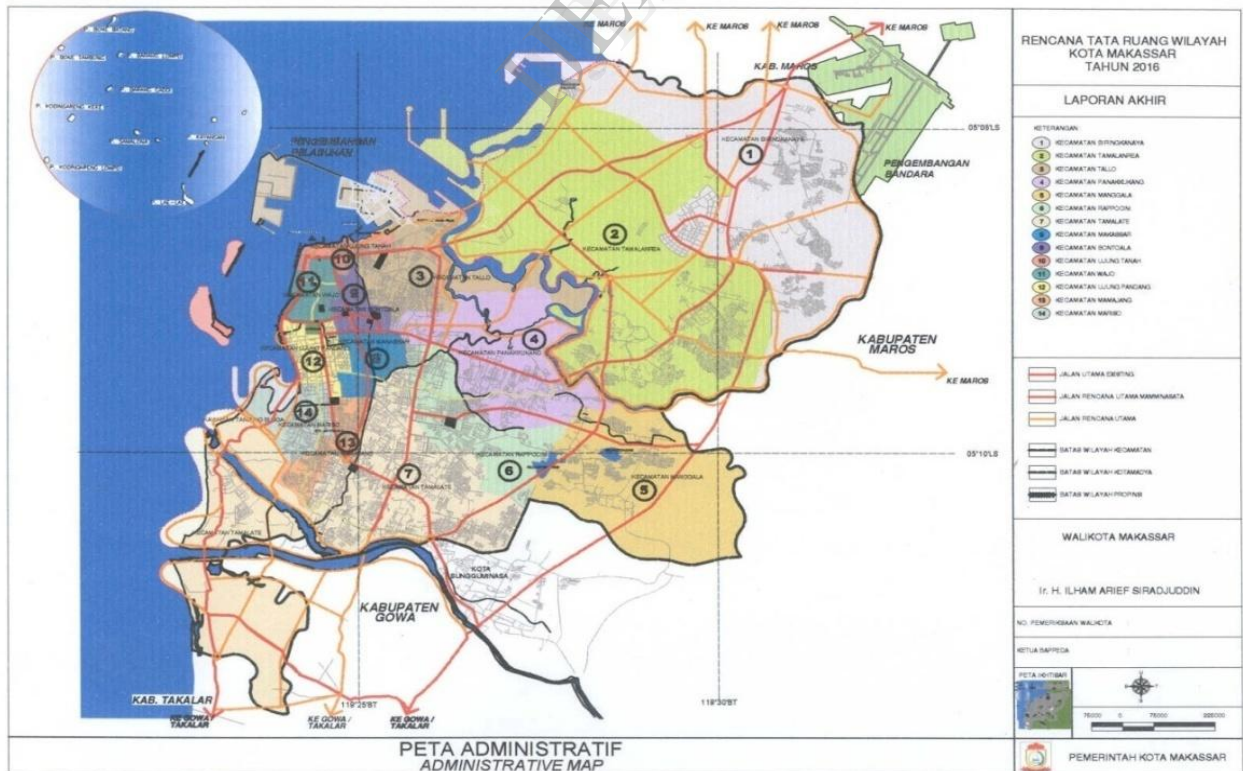


Figure 1. Map of Makassar administrative

2.2 Informant and Data Collection

An informant in phenomenological qualitative research are those related or directly involved within the events that we want to study, and those who really represent and in deeply know the detail of the event. In addition, those respondents are willing to be interviewed in depth in a considerable period of time. Technically sampling or informants include informants who have been affected by breast cancer and informants who have not been affected by breast cancer. Both informants acquired in the hospital or outside the hospital.

The technique used in this phenomenological qualitative research is purposive sampling that determination techniques with particular consideration. Consideration include:

- a. They know and understand something through the process of enculturation that something is not just known but also lived.
- b. They are still classified as being engaged or involved in the activities being investigated
- c. Those who have adequate time for questioning.

Surely informants will be selected are those are the voters to do segmentation. Segmentation of voters needed to narrow the decision informants deemed appropriate in this study. As for the data collection Sugiyono (2011) states the retrieval of data obtained from the sample by means of in-depth interview technique. Tools used were recording equipment, cameras and so on.

2.3 Stages of Research Phenomenology

Phenomenological study has several important stages. Kuswarno (2009) describes the stages of phenomenological research as follows: 1) Research Planning Phase include: a. Make a list of questions, b. Explain the research background. The

background of this study revealed also in the formulation of research questions, c. Selecting informants and d. Document review. 2) Data Collection. This stage according to Creswell include: a. In-depth interviews, b. self-reflection, c. Picture of reality outside the context of research 3) Data Analysis Phase. Creswell in his book entitled "Qualitative Inquiry and Research Design; Choosing Among Five Tradition" suggests techniques of data analysis and representation of phenomenological research are: 4) Making Conclusions, and the useful of research.

3. RESULTS AND DISCUSSION

Results of in-depth interviews will then be elaborated into the formulation of the problem points that have been determined as follow:

a. Process and implementation of early detection of breast cancer in a comprehensive manner by the patient and medical personnel

Results of in-depth interviews showed that none patients (informant) implement early detection of breast cancer. Individuals handling the breast health of the patients only after they convicted of breast cancer with different stages. This is largely attributable to the lack of knowledge of the factors about health risk of breast cancer disease. Since early detection techniques are not implemented. Breast self-examination to health informant later after experiencing breast problems such as breast discharge or blood. Delays due to lack of knowledge also caused less than the maximum role of government is to treatment of breast cancer early detection program in particular breast cancer. Expert informants said that the issue of political will that is so lacking in continuing program that essentially first has been programmed. Cessation program is

certainly also due to the lack of budget allocation over the program early detection of breast cancer.

Breast health conditions of people (informants) become more severe due to lack of trust in the medical treatment that they take the alternative treatments that cause breast cancer informant conditions get worse. The belief that the treatment will be effective healer treating breast cancer are factors that trigger breast cancer worsening conditions suffered by the informant. Lack of knowledge, belief that shamans or alternative treatment and political will in government socialization danger of developing breast cancer into the causes of the increase in the quantity of breast cancer despite a decrease in patients who have check when the cancer has reached stage 4. Jan Reed and Jill Turner (2005) research entitled "Appreciating change in cancer services - an evaluation of service development strategies" This research finding strategies and abilities than participants built with the aim to support and facilitate the change in service. In other words, the conclusions in this study stated that the AI has proven to be a successful approach to evaluate changes in cancer care.

*b. How to influence life style to the growing number of breast cancer patients
Life style or lifestyle also plays a role for the emergence of breast cancer.*

The people (informants) generally have diet and unhealthy lifestyle . Diet and unhealthy lifestyle caused by lack of knowledge that caused it all could have an impact on the health of the body. Lifestyle changes due to the changing cultural patterns. Changing cultural make diet changing society. Communities now frequently consume preservatives, dyes, fast food and instant. This is due to modern life is full of challenges makes people more likely to eat fast food for the sake of efficiency. Other

lifestyle is regular exercise does not even do it at all. Yet sport is an essential element to the vitality of the body.

Although it is debatable whether the lifestyle is sure to be a determinant for a person suffering from breast cancer, but that certainly is a lifestyle factors that can reduce a person's health condition. The average patient, especially at higher informers economic level of the work is so time-consuming and labor will bring instant busy lifestyles and work pressures make it stress. As for poor suffer from the difficult economy forced him to consume unhealthy foods. Lifestyle is not an absolute determinant for the formation of breast cancer. It is scientifically expressed by one informant who was also a doctor. Although life is not that style has no effect. Lifestyle followed by employment pressures can cause a person to create chances of developing certain diseases, including breast cancer. Eating culture with lots of foods that contain harmful substances will be the trigger for a person with cancer.

Lack of sports is also an important factor because of lack of exercise can lead to obesity. The patients were interviewed in depth entirely not exercise properly. Surely this also triggers a person exposed to deadly diseases including breast cancer.

Study conducted Kirsten Bell, entitled "Cancer survivorship, morality and lifestyle discourses on cancer prevention. The findings in this study point to the fact that one informant menganaskan that it reaches stage 4 breast cancer new treatment to the hospital during which the informant go to traditional healers. Incorrect understanding of breast cancer treatment will be based course will be very less knowledge of the medical aspects of breast cancer. While the pattern of interaction between people with medical personnel also increased with increasing stage breast cancer patients.

c. How patterns of social interaction that developed between health workers, families and communities with breast cancer.

Breast cancer patients would have to have a handle in the form of great support from the people around him both families, especially husbands and relatives and friends. This support is very important for people in an attempt to fight the cancer that eats away at his body. The people (informants) have diverse patterns of social interaction. Openness to the people closest to them are needed. Husband's support to strengthen the psychological condition of the patient is key to how a patient's successful fight against breast cancer who received breast cancer. Differences in economic and educational levels determine the interaction patterns of breast cancer patients. Breast cancer patients (informant) with a good economic background and education tend to be more open with their husbands and families. While breast cancer patients (informant) with a background in economics and low education tend to cover it, especially on her husband's illness.

As a result of breast cancer treatment is also likely to be different. In this study it was found that people who are not open to the family especially her husband will not get psycho - social support sufficient to have an impact on improving the status of breast cancer up to stage 4. Lack of support will cause psychological stress on patients. While the maximum support will make people get a great psychological support to capital for people to get through their struggle with cancer. Another interesting phenomenon that the handling of a method of treating many patients are influenced by social interactions with others be it family or friends. Choosing alternative medicine / shaman is also influenced by relatives or friends of patients so that all informants choose either alternative medicine combined with medical treatment or not. Even in this

study found a certain fear to deal with their breast cancer doctor.

The findings in this study point to the fact that one informant worse suffered that it reaches stage 4 breast cancer new treatment to the hospital during which the informant go to traditional healers. Incorrect understanding of breast cancer treatment will be based course will be very less knowledge of the medical aspects of breast cancer. While the pattern of interaction between people with medical personnel also increased with increasing stage breast cancer patients. Despite this social interaction with medical personnel who handle (doctor) especially up and down. Option to make alternative medicine / shaman as a reliable method to indicate that the patient experienced a crisis of confidence to the medical personnel who specializes in breast cancer . But the facts are revealed in the study patients (informant) Tertiary -educated tend to manifest belief in medical personnel than informants with low education. Presence or absence of good social interaction of patients to medical personnel cause breast cancer condition to reach the final stage.

While social interaction with people with medical personnel kemandagan it shows . Lack of political will of the government lead to socialization relative hazard of breast cancer was never again performed. Lack of support in the form of funding that medical personnel are obliged to make the role of civic socialization become obstructed. In the context of this kind takes the role of civil society non-governmental organizations (NGOs) to urge stakeholders through advocacy programs to be more active in promoting awareness program of breast cancer early detection . Community organizing is needed in order tingkat awareness of the dangers of breast cancer can be increased . This is where networking is needed among medical

personnel , government and NGOs as well as the general public especially people with breast cancer. Victoria Armstrong and Norma Morris (2010) in their study, entitled Boundary setting in breast cancer research:Discovery we found that when the volunteers factor management have considerable experience of the diagnosis of breast cancer is that they get medical illness and medical procedures which act as a comparison is the dominant factor that significantly affects the reaction of the volunteers studied.

d. How the socio - cultural transformation in the implementation of significant programs of early detection of breast cancer.

Overall informants who are breast cancer survivors experiencing socio - cultural changes are very significant. Changes in lifestyle and social interaction of people changed. Lifestyle such as diet, physical activity and a healthy lifestyle enough to change as the desire of patients to be cured of her breast cancer. Likewise, changes occur in the pattern of patient interaction with the surrounding environment and patient relationship with the doctor.

Growing his cancer illness, the stronger the determination of the informant to conduct a meaningful transformation in their socio-cultural life. Changes in the social level can be seen in the social interaction of people (informants) with family especially her husband, friends and medical personnel who deal with their breast cancer. Failure in alternative medicine / shaman to change the perception of people that by interacting intensively with medical personnel will give effect to the handling of her breast cancer.

Other social change lies in medical personnel , especially those who are leading socialization underlined the dangers of breast cancer . Lack of political will and

financial support for the program to make early detection of medical personnel at the level of socialization no longer paying attention to this program . Unlike the medical personnel that play a direct role in the treatment of breast cancer are increasingly close relationship with the patient , especially if the patient is already on a high stage.

Other socio - cultural change is the formation of network communities breast cancer care that will be formed to be the government's partner in pyudara cancer treatment program in an integrated society. Cuyper, Hee dan Sterckx (2003:588) in their study implied that “The population of women with breast cancer in the Antwerp Stuienberg area is generally older, and socioeconomically more disadvantaged than the overall Belgian population. Tumours are diagnosed at a later stage. This implies that treatment had to be more aggressive or could not be given at all because of age or general health conditions of the patients. Consequently, an important role for a preventive way of dealing with breast cancer is necessary. Optimization of prevention is only realistic when the socio-economical status and the age distribution of the target population are taken into consideration, together with epidemiology and behaviour of specific tumours, as well as ethical aspects of prevention schemes”.

Research conducted by Sarah Lewis, Craig A. White and Liam Dorris method used in this study is a quantitative method found that the breast cancer care team efforts psychosocial services even though they do not get a lot of training to support their work. They are judged on how far they are aware of the importance of psychosocial interventions and identify learning needs related to their.

Research conducted by Tracy Williams, Valerie A. Clarke, Sally Savage in his essay titled "Women's perceptions of

familial aspects of breast cancer" that was published in Health Education 2002 volume 102 (2) pp. 50-59. This research concerns the family aspect that must be understood in relation to women with cancer. The study consisted of two studies. The first study consisted of 4 FGDs (focus group discussions) is that women are selected from all community.

The second study consisted of 10 women were interviewed in person by conducting interviews face-to - face with a history of breast cancer in their family. This study concluded that the combination of women who have a record of cancer in their family will have a high level of vigilance against the risk of breast cancer. However there are major differences between those who do not have a family history of breast cancer with those who have a history in the family they are suffering from breast cancer. Groups that do not have a history of breast cancer in their families will tend to be more open compared to those who have a history trail that they ever existed in the family with breast cancer.

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CONCLUSION

1. Adequate knowledge about breast cancer early detection of breast cancer in particular would give to people to identify risk factors (diet and life style) breast health condition worsens. Then, the impact on behavior in dealing with breast cancer. Lack of knowledge impact on patient delay in dealing with his illness.
2. The importance of early detection of breast cancer to the community so that the quality of women's health in Indonesia increased. The role of the government is not caused by a lack of political will. Until breast cancer disease management program nationally obstacles.
3. Community organizations must carry out advocacy organization that is able to see the real issue and urged the government to play an active role in reducing the high breast cancer patients. Likewise, Role from government and community organizations will have an impact on the expansion of consciousness which means socio-cultur transformation successfully.

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