HUSBAND SUPPORT AND COPING MECHANISM ON PATIENT OF REPRODUCTIVE SYSTEM CYST

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Abstract

The reproductive health problems can result in impaired function of the reproductive organs in the form of decreased fertility, even difficulty getting the pregnancy process can occur, causing psychological impacts on women. Husband’s support can help the healing process because it refers to a comfort, concern, self-esteem or help for reproductive system cysts. The purpose of this study was to determine the relationship between husband’s support and coping mechanisms of reproductive system cysts. This type of correlational analytic research with cross sectional approach. The population of this study were all patients with reproductive system cysts who were treated at Tidar Hospital, Magelang City during March-May 2020, using accidental sampling technique as many as 15 respondents. Data analysis used the Spearman rank test. The results showed that there was a relationship between husband’s support and coping mechanisms in patients with reproductive system cysts in Tidar Hospital, Magelang City (p value=0.002 ≤α=0.05), with moderate closeness (r=0.591). Husband are expected to take full responsibility for their wives, both healthy and sick, and midwives are more sensitive to the patient’s psychological condition, including coping mechanisms.

Keywords: husband support; coping mechanism; reproductive system cyst

1. Introduction

The problem of women's reproductive health problems had become an international agenda. This category includes feminine and gynecological diseases. Health problems that often occur in the female reproductive system were cervical cancer, breast cancer, cysts of the reproductive organs, menstrual disorders, and uterine myoma (Manuaba, Manuaba, & Manuaba, 2012). Reproductive system disorders according to (Sarwono, 2014) include ovarian cysts, Bartolini cysts, endometriosis cysts, corpus luteum cysts, Polycistic Ovarian Disease cysts, follicular cysts and breast cysts.

The incidence of ovarian cysts in 2015 was found to be the highest in developed countries with an average of 10/100,000 (World Health Organization (WHO), 2015), while Bartholini’s cyst cases occurred in 2-3% of women worldwide (Saeed & Al-Jufairi, 2013). The incidence of adenomyosis varies between 8-40% on hysterectomy specimens. The incidence of endometriosis ranged from 13.6 to 69.5% in the infertility group. As many as 25% of infertile couples are caused by endometriosis, whereas in cases of idiopathic infertility this disease was found to be 80%, while the incidence of breast cysts was recorded at 1% of all women in the world (Sarwono, 2014).

Reproductive health problems will result in impaired function of the reproductive organs in the form of decreased fertility, and even difficulties in getting a pregnancy can occur. This will hinder the realization of the family's hopes of having children. This problem would cause stress for the family, especially women from mild stress levels to severe stress. People who
experience stress try to carry out coping mechanisms which can be in the form of adaptive coping or adaptive malnutrition depending on internal and external factors. The coping mechanism was a process of managing external and internal demands that are considered a burden by someone as a problem solving process. A person used a coping mechanism if they experience stress (Stuart, 2013).

Each person, in facing the same problem, will have different coping mechanisms. The strategies used are not the same. The coping mechanism was a method used by a person to solve a problem, overcome a change, and a threatening situation, both cognitive and behavioral. The better a person's coping mechanism, the less likely a person was to experience stress, but on the other hand, the worse a person's coping mechanism was the more likely a person was to become stressed and may even become depressed. The coping mechanism of a person varies according to the person characteristics of men, women, young and old (Lavari, Erianti, & Rasyid, 2019). The coping mechanism also depends on social support from the closest people such as family, friends and the environment (Cumayunaro, 2018). This can affect a person's psychological adaptation which will affect the person in dealing with problems.

The problems faced by reproductive system cyst patients who were undergoing treatment can cause psychological problems for the patient and the family. Patients need family support, namely when making treatment decisions and when developing self-concepts. Strong family bonds were very helpful when someone was facing problems. Family was the person closest to someone and this support will be created if the interpersonal relationship was in good condition (Hidayati & Subriah, 2017).

Social support was something that is provided by other people or the social environment. Social support can have a positive or negative impact on a person's life and health, both physically, psychologically and socially. The contribution of social support can have a positive impact on reducing anxiety. The positive impact of social support can be felt if the support provided is in accordance with the needs of the recipient so that it can have a positive impact (Aktan, 2011).

One of the supports that can be expected by patients with reproductive system cysts was support from their husband. Husband’s support can help in the healing process because according to Cobb (Sarafino & Smith, 2011), social support refers to a comfort, care, self-esteem or help that individuals get from other individuals and from their environment. Social support also shows a behavior that is considered supportive because it has characteristics that help or entertain, or behavior that gives rise to an individual's belief that he is loved or appreciated.

The results of the study (Marlinda Marlinda, Nur Fadhillah, 2019) showed that family support increases the motivation of breast cancer patients to undergo chemotherapy. Based on this, efforts are needed to develop health services for breast cancer patients with chemotherapy in improving the quality of service, especially providing support to motivate patients undergoing chemotherapy with the various side effects they face. Likewise in patients with reproductive system cysts. Reproductive system disorders experienced can have an impact on infertility so that it was quite disruptive to psychological conditions. This condition requires family support, especially the husband as the closest person.

Data on the number of patients in care with reproductive health problems at Tidar Hospital, Magelang City in 2018 were 516 with details of 109 (21.12%) of them with ovarian cyst problems and 25 (4.8%) with other reproductive system cyst problems. The results of observations carried out on 3 reproductive system cyst patients who were undergoing treatment at the hospital showed 2 patients were accompanied by their husband during illness and assisted with their daily needs during illness, while 1 patient was only accompanied by their mother because their husband was on duty outside the city.

2. Method

This type of correlational analytic research with a cross-sectional approach. The population of this study were all patients with reproductive system cysts from March to May 2020. Sampling used the accidental sampling method based on the criteria set by the researcher. The inclusion criteria in this study were patients who underwent hospital care accompanied by their husband, the patient's education was at least junior high school, family income was more than the regional minimum wage standard (UMR), lived with the nuclear family and were willing to be respondents. Meanwhile, the exclusion criteria in this study were patients with
decreased consciousness. Based on these criteria, a sample of 15 respondents was obtained. The data collection technique in this study was to fill out a questionnaire that had been tested for validity used expert judgment. Research data analysis was carried out by means of univariate analysis with frequency distribution, bivariate analysis was carried out by using the Rank Spearman test (Dahlan, 2019).

3. Result and Discussion

Table 1. Frequency Distribution Husband Support on Patient of Reproductive System Cyst

<table>
<thead>
<tr>
<th>Husband Support</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supportive</td>
<td>8</td>
<td>53.3</td>
</tr>
<tr>
<td>Less Supportive</td>
<td>7</td>
<td>46.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>15</strong></td>
<td><strong>100</strong></td>
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The results showed as many as 8 respondents (53.3%) stated that the patient’s husband provided support during treatment. Husband’s support according to (Sarafino & Smith, 2011) can be in the form of instrumental, informational, emotional, and assessment support. The results of the study (Nurhidayati & Rahayu, 2018) state that various supports are provided by husband to couples who are undergoing chemotherapy in the form of emotional support by giving encouragement and praise during chemotherapy, encouragement, comfort and motivation to undergo treatment; assessment support can be realized by caring about treatment and providing confidence about the chemotherapy process; Instrumental support in the form of enduring examinations, providing assistance during activities, delivering chemotherapy, providing entertainment facilities, as well as meeting food and drinking needs, and information support by providing book facilities, searching the internet, actively asking doctors.

The husband’s instrumental support for reproductive system cyst patients in this study was good enough. This is indicated by the results of the questionnaire, a number of 14 respondents (93.3%) stated that their husband provided reserve funds for medical expenses even though the patients used the financing facilities from health insurance. Other support provided by the husband based on the respondents’ answers, namely 11 respondents (73.3%) stated that the husband provides a means of transportation to take his wife every time he has a health check. Instrumental support according to (Sarafino & Smith, 2011) includes the provision of physical support such as services, financial assistance by providing funds for medical expenses, and materials in the form of real assistance. Instrumental support was a condition of objects or services that will help solve critical problems, including direct assistance such as when someone helps with daily work, provides information and facilities, looks after and cares for when sick and can help solve problems.

Support can also be provided in the form of informational support, in the form of support in the form of communication networks and shared responsibility, including providing solutions to problems faced by patients, providing advice, direction, suggestions, or feedback about what someone was doing. Families can provide information by suggesting places, doctors, and therapies that were good for themselves and specific actions for individuals to fight stressors. As a form of information support, families can act as information collectors and information givers (Nurhidayati & Rahayu, 2018). The results of this study indicate that the informational support provided by the husband was not good because all respondents stated that the husband had never read information about cysts from both online and print media and the husband did not know the needs of his wife during illness and during the treatment period. As many as 8 respondents (53.3%) stated that the husband played a role in informational support only by actively asking health workers about what the doctor would do for his wife.

Another support that can be given is in the form of emotional support. According to (Harlinawati, 2013) emotional support was a form of support in the form of expressions of empathy, care and concern for the person concerned. Emotional support was an expression of affection, trust, attention, and feelings of being heard. Willingness to hear someone's complaints will have a positive impact as a means of releasing emotions, reducing anxiety, making individuals feel comfortable, at ease, cared for, and loved when facing various pressures in their lives. The results of the respondents ‘answers showed that as many as 12 respondents (80%) stated that their husband asked their wives not to be too tired doing work and to help ease their wives’ work at home. However, as many as 8 respondents (53.3%) felt that they did not get support, this was in accordance with the respondent's answer that the husband did not accompany his wife every time he did a health check, the husband just waited outside the room when the wife did the examination. The respondent's answer indicated that the husband
was less concerned with the psychological condition of his wife when he listened to the doctor’s explanation about health developments after the examination.

According to (Sudarji, 2011) there was a significant negative relationship between social support provided by husband and stress levels in breast cancer patients at the Department of Surgery of the Cipto Mangunkusumo Hospital, Central Jakarta. The negative direction of the relationship shows that the higher the social support provided by the husband, the lower the stress level of women with a diagnosis of breast cancer, or vice versa. Husband’s support will have a positive impact on the recovery of wives who suffer from reproductive system cysts. The main need a woman is expected from her husband was more attention. Husband’s support can be in the form of attention, communication and emotional relationships that were intimate and warm with all family members.

Husband can also provide other support in the form of assessment support. The results of the respondents’ answers showed that as many as 12 respondents (80%) stated that their husband felt happy if the results of the health checks indicated that the health conditions of their wives were getting better. However, all respondents answered that the husband paid less attention to the effects of the treatment the wife had during illness and as many as 11 respondents (73.7%) stated that the husband had never given any gift to his wife during illness.

Appraisal support according to (Sarafino & Smith, 2011) was support that occurs when there was a positive assessment of the individual. Patients have someone to talk to about their problems, able to give positive expressions of appreciation, encouragement, approval of the patient’s ideas or feelings. This family support can help improve patient coping mechanisms based on experiences that focus on positive aspects. Family support in this case the husband can help the patient overcome the problem and redefine the situation as a minor threat. The family acts as a mentor by providing feedback and was able to build patient self-esteem. Lack of appraisal of husband’s support, such as giving gifts to his wife during illness, may be caused by the husband paying more attention to his wife’s other needs, such as helping with housework or providing support to his wife.

Reproductive system cyst patients generally need support from their families, especially their husband. According to (Hidayati & Subriah, 2017) the presence of family support really helps increase confidence about his ability to take self-care measures. Cancer patients who were in a family environment and are cared for by their family members will be able to create a feeling of comfort and safety so that they feel that they are getting attention. According to researchers, the feeling of comfort that arises in individuals will arise because of the good emotional support, appreciation, instrumental and information from the family. Thus family support will greatly assist the coping mechanism of reproductive system cyst patients.

**Table 2. Frequency Distribution Coping Mechanism on Patient of Reproductive System Cyst**

<table>
<thead>
<tr>
<th>Coping Mechanism</th>
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<th>Percentage (%)</th>
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<tbody>
<tr>
<td>Good</td>
<td>8</td>
<td>53.3</td>
</tr>
<tr>
<td>Not Good</td>
<td>7</td>
<td>46.7</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>100</td>
</tr>
</tbody>
</table>

The coping mechanism in patients with reproductive system cysts in this study were in the good category as many as 8 respondents (53.3%). This suggests that most reproductive system cyst patients have adaptive coping mechanisms. According to (Stuart, 2013) the adaptive coping mechanism was a coping mechanism that supports the functions of integration, growth, learning and achieving goals. The categories include talking to other people, solving problems effectively, relaxation techniques, balanced exercises and constructive activities.

The coping mechanism of 14 respondents (93.3%) stated that patients with reproductive system cysts did not try to avoid associating with other people or society and did not feel angry and upset with their current conditions. Reproductive system cyst patients do not feel worse and worse every day. As many as 13 respondents (86.7%) discussed their health conditions with their husband and as many as 12 respondents (80%) asked nurses or doctors about their health developments. This shows that the respondent as a cyst patient can accept his condition and does not close himself off from social interactions. Based on these answers, the coping mechanism of reproductive system cyst patients tends to be adaptive coping mechanism. However, there were still 8 respondents (53.3%) who did not believe that this condition could happen to other people. This shows that adaptive coping mechanism still occurs in respondents.

The coping mechanism according to (Stuart,
2013) was a process of managing external and internal demands which are considered as a burden to a person which was a problem solving process. A person uses a coping mechanism when experiencing stress. Research (S, Sutriningsih, & W, 2015) states that there is a relationship between family coping mechanisms and the level of family anxiety stroke in the adult inpatient room of Panti Waluwa Sawahnan Hospital Malang. The less the family coping mechanism, the heavier the level of anxiety in the stroke family. Someone who has a good family coping mechanism will reduce the level of anxiety that is felt. This also applies to this research. Reproductive system cyst patients who have an adaptive mal coping mechanism will have an impact on the level of anxiety that arises.

The coping mechanism used by each individual is different. Coping can also be described as something related to problems and situations, or to deal with them successfully (Kozier, Erb, Berman, & Snyder, 2014). The coping mechanism itself can be interpreted as a way by which individuals solve problems, adjust to change, and respond to threatening situations (Keliat, Panjaitan, & Helena, 2016).

Reproductive system cyst patients who receive support from their husband have a good coping mechanism, while reproductive system cyst patients who do not get support from their husband have a poor coping mechanism. This shows that the support of the husband has a role in creating a coping mechanism in patients with reproductive system cysts. This statement was in accordance with research (Indotang, 2015) that there was a relationship between family support and coping mechanisms in breast cancer at the Semampir District Health Center in Surabaya and research (Cumayunaro, 2018), namely that there was a relationship between family support and coping mechanisms for chronic kidney failure undergoing hemodialysis, with a p value of 0.010.

| Table 3. Husband Support and Coping Mechanism on Patient of Reproductive System Cyst |
|-----------------------------------|-----------------------------------|------------------|------------------|
| Husband Support                   | Good Mechanism                    | Not Good Mechanism | Total            |
| Supportive                        | 7                                 | 8                 | 100              |
| Less Supportive                   | 1                                 | 6                 | 100              |
| p value = 0.002                   | Contingency Coefficient = 0.591   |                  |                  |

The results of data analysis using the Rank Spearman test showed a p value of 0.002 (p < 0.05), which means that there was a relationship between husband’s support and coping mechanisms for reproductive system cyst patients at Tidar Hospital, Magelang City, with a close relationship based on the Contingency Coefficient test = 0.591 which means moderate relationship. The results of this study are the same as the results of research (Mundung, Kairupan, & Kundre, 2019) which show that there was a significant relationship between husband's support and wife's coping mechanisms with the diagnosis of ovarian cysts with p=0.016 at 95% CI. A total of 24 ovarian cyst patients received sufficient support from their husband, it turned out that 23 people were able to carry out an adaptive coping mechanism and only 1 person was still doing the adaptive mal coping mechanism. Meanwhile, out of 10 wives of ovarian cyst patients who received less support from their husband, it turned out that 6 of them performed adaptive mal coping mechanisms.

The study (Sudarji, 2011) entitled The Relationship of Family Support to the Coping Mechanism in Cervical Cancer Patients who underwent chemotherapy showed that there was a relationship between family support and coping mechanisms for cervical cancer patients undergoing chemotherapy, and the results of the study (Indotang, 2015) showed a relationship between family support with the coping mechanism in breast cancer. If family support was lacking, it can have an impact on the coping mechanism of the breastfeeding patient so that they have adaptive mal coping.

The results of the study (Triyanto, 2010) also showed that there was a significant relationship between husband's support and the coping mechanism of the wife of ovarian cyst patients with p value = 0.016 at 95% CI. This was because the family must provide positive support so that family members who are experiencing stress can do adaptive coping. If stress conditions can be controlled through adaptive coping, then the immune system modulation will be better. Long and prolonged stress will have an impact on the decline in the immune system and accelerate the progression of reproductive system cyst disease. There was a link between stress conditions and disease progression, the more stressed the ovarian cyst patient is, the more stressful the ovarian cyst will be. Therefore, it was necessary to create a conducive environment, and according to Cobb (Sarafino & Smith, 2011) social support refers to a comfort, care, self-esteem or help that individuals get from other individuals.
and from their environment. Social support also showed a behavior that was considered supportive because it has characteristics that help or entertain, or behavior that directs an individual’s belief that he is loved or appreciated.

The success of establishing an adaptive coping mechanism for reproductive system cyst patients apart from the support of their husband can also be assisted by progressive muscle relaxation therapy and the classic music therapy (Agni, Sarwono, & Suyanta, 2020). Like the level of anxiety, adaptive coping mechanisms will be formed if the patient feels calm and comfortable. Relaxation therapy because of the relaxing effect has a calming sensation of the body, feels light and warmth that spread throughout the body (Lindquist, Snyder and Tracy, 2013). Physiologically relaxation can lower blood pressure, respiration and heart rate. Make a person relaxed and can control the condition that soothe in the effectiveness of therapy classical music with progressive muscle relaxation therapy.

4. Conclusion and Suggestion

Half of the patients with reproductive system cysts get support from their husband in the good category and have an adaptive coping mechanism. There was a relationship between husband's support and coping mechanisms in patients with reproductive system cysts at Tidar Hospital, Magelang City with moderate closeness. Husband is expected to increase the provision of support for patients with reproductive system cysts so that it can help establish a positive coping mechanism. Midwives and health workers to encourage husband and families to provide support for patients with reproductive system cysts.

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6. References


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