Level of Depression and Frustration among Breast Cancer Survivors: An Empirical Study

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Abstract

Breast cancer is one of the deadliest diseases and second most common cancer among women, which affects their life adversely. Breast cancer is a type of cancer in which the cells of the breast grows in uncontrolled manner and form a tumor is of two type: - Benign (not harmful to health) or malignant (has the potential to be dangerous) because benign tumor can be cured by removal of the tumor but malignant can reoccurs even after removal of the tumor, and sometimes cause death of the patients. The present research is framed as Prevalence of depression and frustration among breast cancer survivors. Depression is a mental disorder in which patients feels persisted depressed mood or loss of interest in daily activities resulting significant impairment in patients daily life whereas frustration is an emotional response to resistance associated with irritation, aggression etc. It arises when a person can’t get what he wants. This study examines the prevalence of depression and frustration among breast cancer survivors and how severity of disease can play a major role in their depression and frustration level. For this purpose 80 females were personally interviewed belonging to the age group of 30 – 55 years old from the different cancer hospitals, clinics, home etc of Patna city through incidental sampling technique. Beck Depression Inventory (BDI), Reaction to frustration (RFS) and Personal Data Sheet were used for the collection of data. The findings on the whole indicated that the breast cancer survivors are highly frustrated and depressed and depression and frustration are positively correlated. The findings of the present research reveal that severity of the disease plays an important role in determining their depression and frustration level.

Key words: - Cancer, Breast cancer, Depression, Frustration

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Introduction

In this present era, this is a very relevant and important topic because this is the reason behind 20% of all the deaths in women means breast cancer accounts for approximately one fifth of all deaths in women. Breast cancer is the second most common cancer throughout the world, surpassing lung cancer for the first time in 2020 and the most common cancer in American women. It is estimated that 23% of women are diagnosed with breast cancer among all cancer type cases in every year. Breast cancer survivors face many challenges and psychological difficulties in their life. They may feel anxiety, stress, depression, frustration, chronic pain, anger, disturbed sleep, reduced support resources, marital conflict guilt and suicidal ideation etc. The Depression and frustration are also prevalent psychological disorder in breast cancer patients which affects their mental and physical health adversely and that is why it is important to understand their causes and associated factors for the betterment of patients who suffering from this deadliest disease.

Cancer

Cancer may be defined as a disease which involves growth of human cell at abnormal rate with the capacity to attack or spread to different parts of the body. It is also known as a malignant tumor or malignant neoplasm, is a group of diseases involving abnormal cell growth with the potential to invade or spread to other parts of the body.

Studies show that most prevailing cancer in women is the breast cancer worldwide. As per indexed rated in United state of America out of every one woman in every eight women is affected by breast cancer and in India, every four minutes, one woman diagnosed with breast cancer and morality rate is that in every 13 minutes. So it may conclude that, it is the most prevalent among Indian women.

Breast cancer

Breast cancer is a type of cancer that develops from breast tissue. In breast cancer, cells of the breast grows in uncontrolled manner and form tumor which can be seen on X-ray or can be feel as a lump. Symptoms of breast cancer includes- lump in the breast, change in size and color of nipple, shape, dimpling of the skin, liquid or bloody discharge from the nipple, lumps in underarms or a red scaly patch of skin. In those with distant spread of the disease, there may be bone pain, swollen lymph nodes, shortness of breath, or yellow skin.

Depression & frustration

Depression is a psychological disorder, in which a person feel loneliness, sadness, worthlessness, anger, irritated mood, weakness, loss of interest in daily activities, loss of appetite, sleep and sexual desire,
nervousness, withdrawal from others and social situation etc. Depression is associated with other psychological and mental condition also. For example: A person may depress about his career, his personal life or given situation.

Now a day’s depression is very common disorder. In our country 56 million Indians are suffering from depression and 300 million in worldwide.

Apart from depression, frustration is also common word in our life. It is a complex emotional state arises when a person face an obstacle in between his goals. In this state he may feel anger, worthlessness, disappointment, annoyance etc. It starts from a feeling of discomfort and exist when our wants, wishes and desires get interrupted. For example: when our level of achievement is lower than our level of aspiration, we will likely to feel frustration.

Prevalence of Depression and Frustration among Breast Cancer Survivors:

When we talk about feminine identity, breast is an important part of any female’s body, which plays an important role in a pride feeling called “motherhood”. Therefore, the thought of breast cancer and its treatment procedure can induce an intense stress or many emotional disorders. These includes depression, frustration, guilt, occasional ideas of suicide, anxiety etc. Many studies indicated that depression and frustration are most prevalent disorder among breast cancer survivors because everyone knows that it is a lethal disease and it can be end with a painful long procedure, body disfigurement, or even death of the patient.

Review of literature

In a study, Yen, et al., (2006) examine the relationship between “Quality of life, depression, and stress in breast cancer women outpatients receiving active therapy in Taiwan.” In their study they compared quality of life, depression and stress between malignant breast cancer and benign breast tumors patients. 97 patients were participated in their study and they also examined the factors related to Quality of life among patients who were receiving active treatment. They found that malignant breast cancer patients have poorer Quality of life and higher life stress. Depression was significantly associated with Quality of life in both the groups. They also conclude that it is necessary to develop a strategy to provide effective screening and intervention for depression to diminish the negative impact on their Quality of life.

Sette (2016) investigate the depressive symptoms in patients with cancer. They conducted a survey research on 68 cancer patients, ages between 25 – 83 years old with the symptoms of depression and differences based on Quality of life and social support. On the basis of their study they concluded that depressive symptoms were mostly presented in female patients with worse mental health condition and in those patients who is less
satisfied with the social support. In another study, Tung et al., (2018) conducted a cross sectional design study on 220 women with female specific cancer in Taiwan to find the association among symptoms of Physical Distress, Posttraumatic Stress Symptoms and Depression in patients with female - specific cancer. This study reveals a high prevalence of depression and confirms the relationship between Posttraumatic Stress Symptoms, Depression and Physical distress.

Sachdeva (2016) also measure the level of stress and frustration level of 51 breast cancer patients with the help of stress questionnaire and reaction to frustration scale in kolkata. She reported that breast cancer survivors feels body aches, pain, hot flushes, fatigue, tension, irritability, anxiety, mood swings, depression etc due to cancer diagnosis and treatment. Her study indicates that the patients of breast cancer have average level of stress but very high level of frustration.

Zainal, et al., (2013) systematically reviewed the prevalence of depression in breast cancer survivors with the help of 32 studies in which most of the studies were cross sectional designed and 10,826 breast cancer survivors were participated in those studies. On the basis of the studies they said that breast cancer survivors are at risk of depression, so it is very necessary to detect associated factor for betterment of the patients.

Objectives:-

- To identify the level of depression among breast cancer survivors.
- To identify the level of frustration among breast cancer survivors.
- To examine the correlation between depression and frustration level among breast cancer survivors.
- To suggest some strategies to cope with depression and frustration.

Hypotheses:-

- There would be a high level of depression among breast cancer survivors.
- There would be a high level of frustration among breast cancer survivors.
- Depression and frustration would be positively correlated among breast cancer survivors.

Methodology

Sample:- The sample comprised of 80 breast cancer survivors belonging to the age group of 30 – 55 years old. Samples were collected from the Cancer hospitals (Mahavir cancer sansthan and research centre, PMCH, NMCH etc) of Patna Dist. using incidental sampling technique.
Tools:

Following scales were used to measure the level and correlation of depression and frustration among breast cancer survivors:

1. Beck Depression Inventory (BDI),
2. Reaction to frustration scale (RFS),
3. Personal data sheet.

**Beck Depression Inventory (BDI):** Hindi adaptation of BDI has been done by Sinha & Kapoor. It has been used for measuring the level of depression. The inventory contained twenty – one items. Each item has four alternative and to be scored as 0, 1, 2 & 3 respectively. One can earn a maximum score of 63 and a minimum score of zero on BDI. The test retest reliability is 0.86 and the split half reliability is 0.66 which were significantly at .01 levels. The validity of test was 0.364. It was concurrent validity which was significant at .05 levels.

**Reaction to frustration scale (RFS):** This scale was developed by Dixit and Srivastava (1997) and consisted of 40 items related to frustration and covers four reactions, namely, Aggression, Resignation, Fixation and Regression. The test has sufficient degree of reliability. The test retest reliability of the test ranges from 0.62 to 0.82 and the internal consistency reliability ranges from 0.61 to 0.78. The validity against different criteria ranged from 0.42 to 0.80.

**Personal data sheet:** The Personal data sheet was used in this research. It consisted of fundamental information about the subject such as: name, age, type of breast cancer, stage and duration of the disease etc.

**Result and Discussion**

This chapter is devoted to the result and discussion for the verification of the hypotheses formulated. After collection of data it was necessary to draw some conclusion from it. For this purpose some statistical analysis like central tendency, deviation and correlation were computed and the obtained result is explained on the basis of these statistical analysis.

**Table 1**

Descriptive summary of Depression and Frustration among Breast Cancer Patients

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>Minimum (m)</th>
<th>Maximum (m)</th>
<th>Mean</th>
<th>Std. Deviation</th>
</tr>
</thead>
</table>

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The sample of this study consists of 80 breast cancer patients. The range of Depression from 20 to 58 with a mean of 43.45 and SD of 8.96 and range of Frustration from 40 to 78 with a mean of 61.012 and SD of 8.51.

The obtained mean scores on depression (43.45) and frustration (61.01) show that the frustration level is higher than the depression level. So, it can be concluded that frustration is more prevalent than depression.

### Table 2

**Level of depression in different stages among breast cancer survivors**

<table>
<thead>
<tr>
<th>Stages of breast cancer survivors</th>
<th>Total no. of Breast Cancer Survivors</th>
<th>Total scores on Beck Depression Inventory</th>
<th>Mean</th>
<th>Level of Depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage – I</td>
<td>20</td>
<td>36</td>
<td>36.0</td>
<td>Severe</td>
</tr>
<tr>
<td>Stage – II</td>
<td>28</td>
<td>41.97</td>
<td>41.97</td>
<td>Severe</td>
</tr>
<tr>
<td>Stage – III</td>
<td>20</td>
<td>47.6</td>
<td>47.6</td>
<td>Severe</td>
</tr>
<tr>
<td>Stage – iv</td>
<td>12</td>
<td>51.42</td>
<td>51.42</td>
<td>Severe</td>
</tr>
</tbody>
</table>
Table 1 show that the total number of breast cancer survivors, total scores obtained on Beck Depression Inventory and the level of depression among different stages of Breast Cancer Survivors. 20 Breast Cancer Survivors of stage-1& III obtained 36 (m – 36.0) & 47.6 (m - 47.6) scores respectively, 28 of stage- II obtained 41.97 (m - 41.97) scores and 12 Breast Cancer Survivors of stage-IV scored 51.42 (m – 51.42) on BDI. It shows the severe level of depression among all stages of Breast Cancer Survivors but by seeing the scores it is clear that stage-IV patients are more depressed than rest of the stages. Similarly stage-III patients are more depressed than stage-II and stage-II patients are more depressed than stage-I patients.

Thus, from the above table it is clear that stage-IV patients are highly depressed in comparison to other patients. Hence, it can be said that the level of depression among breast cancer survivors is influenced by the severity or stages of disease.

Table 2

<table>
<thead>
<tr>
<th>Stages of breast cancer survivors</th>
<th>Total no. of Breast Cancer Survivors</th>
<th>Total scores on Reaction to Frustration Scale</th>
<th>Mean</th>
<th>Level of Frustration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage – I</td>
<td>20</td>
<td>55.15</td>
<td>55.15</td>
<td>High</td>
</tr>
<tr>
<td>Stage –II</td>
<td>28</td>
<td>61.93</td>
<td>61.93</td>
<td>High</td>
</tr>
<tr>
<td>Stage – III</td>
<td>20</td>
<td>63.3</td>
<td>63.30</td>
<td>High</td>
</tr>
<tr>
<td>Stage – IV</td>
<td>12</td>
<td>64.84</td>
<td>64.84</td>
<td>High</td>
</tr>
</tbody>
</table>

Table 2 reveals the high level of frustration among all stages of breast cancer survivors. Stage-1 patients scored 55.15 (m- 55.15), stage-II patients scored 61.93 (61.93), stage-III scored 63.3 (m – 63.3) and stage-iv patient scored 64.84 (64.84) on reaction o frustration scale. An overview of these scores shows that the level of frustration is very high among the stage-iv. At the stage-I, patients showed least level of frustration. Thus, it can be concluded that level of frustration is affected by the severity of the disease. At the initial stage or stage-I, level of frustration is very low as compared to the last stage or stage- IV patients. Thus, the first hypothesis framed by the researcher is accepted.
Table showing Central Tendency, Variability and Correlation of the scores on Depression and Frustration scales among Breast Cancer Survivors

<table>
<thead>
<tr>
<th></th>
<th>Depression</th>
<th>Frustration</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Depression</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pearson Correlation</td>
<td>1</td>
<td>.743**</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>80</td>
<td>80</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Frustration</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pearson Correlation</td>
<td>.743**</td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>80</td>
<td>80</td>
</tr>
</tbody>
</table>

** p<.01

Pearson r was calculated for the verification of the hypotheses. An inspection of table 3 shows that Pearson r computed on the scores of breast cancer survivors on depression and frustration scales (Pearson r = 0.76, df = 78) is significant at 0.01 level of confidence. Thus, it can be concluded that there is a positive correlation between frustration and depression. As the level of frustration increases, the level of depression increases also. Hence, the hypothesis framed that Depression and frustration will be positively correlated among Breast Cancer Survivors is accepted.

So, on the basis of the results it can be said that breast cancer survivors are highly depressed and frustrated due to their severity of the disease and depression and frustration is positively correlated. In the light of present finding, it can be said that last stage patients or stage-IV patients are the most depressed as well as frustrated in comparison to other stages. Thus, the severity of the disease can be explained as one of the important factors of depression and frustration.

**Limitations**

The present research has some Limitations related to sample size and method, data collection and generalizations etc. Firstly this research is based on a small sample size and non-stratified sampling technique, which can be responsible for inaccurate generalization. Secondly, in this study the data were collected from hospitals through personal interview method which was very time taking and lengthy process and due to the conditions of the patients they were unable to pay attention on each and every questions. These things can be responsible for inaccurate response which can affect the result of this study.

**Conclusion**

In the light of finding of the present study following conclusion were drawn:-
The mean value of the scores on depression and frustration scales of breast cancer survivors reveals that level of depression among breast cancer survivors is influenced by the severity or stages of disease. And also the level of frustration is affected by the severity of the disease. Hence it supports the first and second hypotheses.

There is a internal consistency in the subject’s response because SD (standard deviation) value is less compared to two mean value of obtained scores on both the scales by the breast cancer survivors.

On the basis of Pearson r value it can be said that there is a positive correlation between frustration and depression among breast cancer survivors. As the level of frustration increases, the level of depression increases also.

The correlation between both means is real and obtained Pearson r value was significant at 0.01 levels. Hence it supports the third hypothesis.

On the basis of findings of this research it can be concluded that breast cancer survivors are highly depressed and frustrated because when a woman diagnosed with cancer her life changes completely. They feel depress about the uncertainty of painful cancer treatment and after treatment effect. They feel frustrated about long treatment procedure and related issues. These things affect their individual personality, personal and social life, thought process, quality of life and even shorten the patient’s life.

Therefore, it is necessary to give them effective psychological services in addition to medical treatment and establish supportive and palliative care services for every patient with breast cancer.

Implications - Depression and Frustration are fatal but treatable psychological complications of breast cancer survivors. It affects patients’ quality of life as well as treatment process also. The result of the present study indicates that breast cancer increase the risk of depression and frustration among breast cancer survivors. So it’s important to plan some effective services for the betterment of survivors to cope with their psychological issues. For this purpose we need accurate estimates of its prevalence. Therefore the result of this study can be helpful for future studies to prevent and treat these psychological disorders in order to promote mental health and quality of life of breast cancer survivors.

Recommendations for future research

These suggestions can be a base study for future research. This study can be done on a large sample size with the help of stratified sampling technique and pretest- posttest research design, which will be more helpful in the terms of results and generalizations. This study can be done on the basis of different other important variables.
like Age, Education, Economic status, family support etc. This can make it more elaborative, comprehensive and valuable for making strategies for the betterment of cancer patients.

References


