

## DESCRIPTION OF RESILIENCE IN CHILDREN WITH SUFFERING LEUKEMIA CANCER

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### Abstract

Children suffering from leukemia often have to face quite difficult developmental tasks, as well as having to overcome the impact of the disease they suffer from, therefore it is important to look at the child's resilience during the treatment period. This research aims to find out how the process of building resilience in children suffering from leukemia cancer, as well as the strengthening and encouragement that the subject receives during the treatment period, thus forming a resilient individual. The method used in this research is a qualitative research method with an intrinsic case study approach. Data was collected through interviews with three respondents who were children suffering from leukemia and four other significant others. The results of the research show that children who experience leukemia must have three components of resilience to achieve resilience. The first component is I have, where the respondent realizes that he or she has received support from other individuals around him, after that, I am, which is the belief and strength within the individual, and I can, which is the effort made by the individual in the process of solving the problems faced.

**Keywords:** Children, Leukemia Cancer, Resilience.

### INTRODUCTION

From GLOBOCAN data released by WHO, it is also stated that cancer is the second leading cause of death globally, accounting for around 9.6 million deaths in 2018. Then, in 2020 the estimated number of deaths caused by cancer will reach 9.9 million cases, which means the number death cases rose 0.3%.

Cancer can attack adults and is very vulnerable in children. Cancer in children is estimated to reach 1% of the total number of cancers. Official statistical data from the International Agency for Research on Cancer (IARC) states that 1 in 600 children will suffer from cancer before the age of 16 years. According to GLOBOCAN data released by WHO in 2020, it is stated that the cancer that most often attacks children is leukemia.

Nasution (2021) stated that leukemia is a malignant disease of blood cells originating from the bone marrow. Symptoms of leukemia include paleness, weakness, a

fussy child, decreased appetite, fever for no apparent reason, enlargement of the liver, spleen, lymph nodes, seizures until loss of consciousness, skin bleeding and/or spontaneous bleeding, bone pain which is often characterized by the child not wants to stand and walk, and is more comfortable being carried and enlarges the testicles with firm consistency (source: P2PTM Ministry of Health of the Republic of Indonesia, 2020).

Leukemia (2018) The type of leukemia that is often found in children is acute lymphocytic leukemia (ALL), which is cancer of immature lymphoid cells. This type of leukemia often occurs in children and is the most common leukemia suffered by children. Another type of leukemia is known as acute myelogenous leukemia (AML), which is cancer of immature myeloid blood cells. This type is the most common type of leukemia in adults and can occur in children. The growth rate of these cancer cells is usually rapid and affects the production of normal blood cells initially. Patients will usually experience symptoms of low blood cell count (e.g. anemia, infections due to low white blood cell count, abnormal bleeding due to low platelet count).

Based on data from the Makassar branch of the Indonesian Love for Children Cancer Foundation, there are 31 children suffering from cancer, 10 children are currently at the foundation waiting for treatment schedules, 15 children are under loose supervision by hospitals and foundations, 2 children are being treated at the hospital and 4 children are being monitored in hospital. GLOBOCAN data released by WHO also shows that one of the cancers that children are susceptible to is leukemia. Kulsum, Mediani and Bangun (2017) stated that leukemia is a disease that often attacks children. Kulsum, Mediani and Bangun (2017) stated that leukemia is a disease that attacks blood cells, resulting in white blood cells that grow abnormally.

WHO data shows that data regarding leukemia in children aged 0 to 14 years in 2020 throughout the world amounted to 67,008 cases. Furthermore, there were 8,143 cases of leukemia in Southeast Asia, while in Indonesia there were 3,282 cases of leukemia. Based on this data, it can be seen that leukemia is one of the diseases with a high percentage that attacks children. The impact of leukemia in children is that it can cause physical weakness, decreased ability to carry out physical activities, demands that always need to be fulfilled, and children are susceptible to bleeding. In addition, the impact of leukemia can affect blood cells, hair root cells, and cells lining the respiratory tract caused by the use of cancer drugs.

Apart from these data, researchers also conducted interviews with 3 subjects, namely RT, SK and AS. The three subjects were children who had leukemia and are still undergoing treatment to this day.

From the results of interviews conducted by researchers with the three subjects, it can be concluded that the three subjects felt the same thing, namely meeting friends who

had the same conditions as themselves and getting full support from their parents could make them happy. Apart from that, they are also more optimistic about carrying out their daily lives and are more enthusiastic about undergoing treatment. However, all three subjects complained about the same thing, namely that their bodies tired more easily when they were active.

On the other hand, researchers also conducted interviews with the parents of the three subjects to obtain additional information regarding the subjects' current conditions. Based on the results of interviews with the subject's parents, researchers found that children's emotions before and after being diagnosed with cancer were very different. After being diagnosed with cancer, children become more grumpy than before and if they have requests, parents are asked to fulfill them immediately. From these results, researchers can see that children's psychological conditions are also considered to be very important to pay attention to in order to balance their physical health.

The subjects in this study were aged 6 – 12 years. Children aged 6 – 12 years are the final childhood period. Late childhood starts from age 6 to approximately age 12 years or until the time comes when the individual becomes sexually mature. During the last year or two of childhood there are marked physical changes and these can also result in changes in attitudes, values and behavior. Towards the end of this period, children prepare themselves physically and psychologically to enter adolescence.

Nasution (2021) revealed that when children experience cancer there will be major changes in their lives, namely that children cannot play freely with their friends, study and carry out school activities.

Previous research conducted by Brown's, et.al (1992) and Ishibasi (2003) revealed that some children who have cancer can overcome developmental tasks and obstacles in their lives well because they have high resilience. Reivich and Shatte (2002) stated that resilience is the ability to respond healthily and productively when faced with a bad situation or trauma and is used to process the stresses of daily life. Rosalinda, Maulana and Fitriah (2012) stated that individuals who have good resilience will also produce good optimism. Optimism itself is seen as the belief that everything that happens at the moment or current conditions can change for the better than the previous condition. This optimism helps individuals believe that hopes and the future are real and this makes individuals more confident in being able to control all situations that occur in their lives.

Based on the explanation and data above, researchers are interested in examining how the resilience of a child suffering from leukemia develops during the treatment period.

## **RESEARCH METHODS**

This research uses a qualitative method with an intrinsic case study design. Sugiyono (2022) stated that qualitative is a research method that can be carried out in natural object conditions. In this research method, the researcher has a role as a key instrument and the research results have the characteristics of exploring meaning, recognizing uniqueness, constructing phenomena, and obtaining hypotheses. Hamza (2020).

## **RESULTS AND DISCUSSION**

### **Description of Research Respondents**

The respondent with the initials RT, a 10 year old female, is an only child who currently lives alone with her father. RT suffered from leukemia, so RT and his father lived and joined the Makassar City Cancer Foundation along with other children with cancer. RT has dreams of becoming a doctor and his hobby is drawing. RT is a child who is quite and introverted and finds it difficult to adapt to new environments and people. RT's mother died when RT was still small. RT comes from a family with a moderate economy, his father has his own business workshop in his hometown which is located in Polewali Mandar Regency.

The respondent admitted that he was very close to his father, especially since his mother died, and this closeness has increased with the current conditions he is experiencing. RT currently has an elementary school (SD) education and is in grade 5. RT has lived in the Makassar cancer foundation house for 2 years and while at the foundation RT said that at first it was quite difficult to join other children, including the foundation administrators, However, in the end the RT was able to adapt to the children living at the foundation as well as the foundation management, although this took quite a long time. While living at the cancer foundation in Makassar, RT continued his education at the foundation guided by the foundation's teachers by adapting the lesson material and curriculum he had learned from the school in his hometown.

Respondents said that while they were at the foundation, even though they had friends with children with cancer, RT still spent more time with his father when there were no school hours from the foundation. RT's father said that his son had become more withdrawn since his mother died and only spent more time with her. RT interacts with the children at the foundation, but this interaction is only necessary, most of the time is spent in the room or with their father. Despite this, RT said that she still felt happy living at the foundation, this was because RT had new friends to study and play with besides her father.

The respondent said that he knew about the illness he was currently experiencing. RT knows what will happen if RT does not carry out chemotherapy and takes the medication given by the doctor. Therefore, RT's father said that when his son has a request, he must grant it. RT knew what would happen from seeing several children who had the same disease as him and had died, so RT felt that his request needed to be granted. However, RT can understand that not all requests can be granted right away when RT wants something, so RT can still be patient to wait if RT needs to do something.

The second respondent is a 12 year old male SK. SK has leukemia. SK is the child with cancer who has lived the longest at the Makassar City Cancer Foundation. SK is the only child of his parents who have now separated. SK currently lives and is cared for by his aunt, who is SK's father's sister. SK has dreams of becoming an E-Sport player because he has a hobby of playing games. SK comes from a family with a sufficient economy. SK is one of the quiet children who lives at the foundation.

SK is currently receiving junior high school (SMP) education and while he is at the foundation his education continues at the foundation following the curriculum and lesson materials from the school in his hometown. SK said that it took quite a long time to adapt to his friends at the foundation, as well as the teachers at the foundation. SK's aunt said that at the foundation SK interacted with her more when she was at the foundation, but over time SK was finally able to join in with the other children. SK's aunt said that since experiencing this illness, SK has become more frequent in demanding that all his needs be met and sometimes SK gets angry if these wishes are not granted immediately or is asked to wait a long time. SK said that when he wanted something, SK felt that the request needed to be fulfilled immediately because SK felt that not everything could not be obtained with the current conditions.

The US respondent was a 10 year old male. AS is the first of two children. AS is a child who has leukemia and has lived at the foundation for 2 years. AS comes from a family that has a sufficient economy. AS is an active and cheerful child who easily gets along with the people around him. AS has dreams of becoming a doctor and has a hobby of playing games. AS lived with his mother and father while joining the Makassar Cancer Foundation.

US respondents said that AS was close to the children and teachers at the foundation. AS revealed that he was happy to be at the foundation because he had lots of friends to play with. AS is also close to his mother and father, he tells his parents everything. AS also revealed that AS knew about the disease he was experiencing so he was enthusiastic about taking chemotherapy and taking medication. AS's parents said that since their illness, their child has become more spoiled and when their wishes cannot

be fulfilled, AS will protest and sometimes even cry. However, the US can still be given understanding regarding certain conditions when its wishes cannot be fulfilled.

### **Data Analysis Results**

The respondents involved in this research consisted of three people, namely, RT aged 10 years, SK aged 12 years, and AS aged 10 years. The three respondents suffered from the same type of leukemia, namely ALL (acute lymphocytic leukemia). Maharani (2012) stated that acute lymphocytic leukemia (acute lymphocytic leukemia) this type of leukemia generally attacks young children to adults. This type of cancer often occurs in children and is the most common type of leukemia suffered by children. The disease conditions experienced by the three respondents influenced the respondents' attitudes in responding to the situation. In psychology, there is a theory called resilience, which is an individual's attitude in responding to the difficult situation they are facing. This attitude influences the individual's decision-making process and the way the individual adapts and survives in the conditions they are facing.

Respondents involved in this research had different descriptions of resilience. Resilience is the strength possessed by individuals to control themselves in situations of adversity or trauma experienced in a healthy and beneficial way. Grotberg (2001) groups three main components of resilience, namely I have, I am, and I can. Grotberg (2001) suggests that the I have component is a component of resilience which is related to the social support that individuals receive from the environment. This component consists of five indicators, the first indicator is related to the confidence of other individuals around them, the three respondents RT, SK, and AS received support from individuals in the environment around them, so that the three respondents had a sense of confidence in themselves because of the positive response they received. obtained from the environment.

The second indicator relates to the rules applied which originate from the family and social environment. The three respondents, namely RT, SK and AS also received the same rules. The three respondents were given rules that bound them due to the respondent's health condition. This was also expressed by the family and foundation managers as a significant other in this research. That there are rules set for respondents as a form of monitoring the respondent's health condition. The third indicator relates to efforts to provide an example of doing something correctly. Of the three respondents, they got this from the family environment, be it parents or other relatives. Apart from that, the social environment such as schools and foundations have a role in providing examples of how to do things to the three respondents.

The fourth indicator relates to support received from other individuals related to aspects of health, education and services for security and welfare. These indicators were met by the three respondents, where the respondents received support from the school to fulfill educational and health aspects from the foundation and hospital. The fifth indicator of the I have aspect, namely support for doing things independently, was fulfilled by the three respondents. The families of respondents RT, SK, and AS provide support so that each child can do things independently and not depend on other people. Apart from the school, the foundation is also involved in this matter.

Grotberg (2001) suggests that I am is a component of resilience which is related to the strength possessed by individuals from within themselves. In the first indicator, namely individuals' assessment of themselves that they are liked and loved by other individuals in their environment, the three respondents, namely RT, SK, and AS are included in this indicator category. Respondents realized that they were valuable and loved by other individuals around them, so they managed to survive.

The second indicator relates to empathy, caring and compassion for other people in their environment. This indicator was also met by the three respondents, where RT, SK, and AS showed a sense of empathy and care for the people in their environment. As stated by Revich and Shatte (2002) regarding empathy, namely an individual's ability to understand signs of the emotional and psychological conditions of other people. RT, SK, and AS show this by providing assistance when they can, as well as understanding the condition of the people around them.

The third indicator is related to respecting oneself and others. The three respondents are also included in this indicator. RT, SK, and AS expressed appreciation for themselves when they succeeded in doing something that was initially quite difficult for them to do and this success gave rise to a sense of pride in themselves because they were able to get through the situation they were facing. Revich and Shatte (2002) revealed that self-efficacy is the belief in an individual that he or she is able to solve the problems they are experiencing and achieve success. The fourth indicator relates to a sense of responsibility for something that has been done. Respondents RT, SK, and AS met these indicators, because they understand when they do something wrong and know what they should do when they make a mistake.

The fifth indicator relates to the individual's optimistic nature and self-confidence for the future. Revich and Shatte (2002) stated that optimism is a condition when individuals believe in themselves that they have the ability to overcome adversity that may occur in the future. RT, SK, and AS have motivation and aspirations for the future.

Grotberg (2001) suggests that I can is a component of resilience which is related to the efforts made by individuals to solve the problems they face with their own strength.

In the first indicator, respondents RT, SK and AS are related to individual efforts in finding ways to solve the problems they are facing, RT and SK fulfill this aspect because the two respondents are making efforts in the process of solving the problems they are facing, while AS is not yet included in that category. This is because the US has not been able to find a solution to the problem it is facing.

The second indicator relates to individual efforts to control themselves when they want to do something that is wrong or dangerous. The three respondents fulfilled this indicator, this is because RT, SK and AS understand themselves to exercise self-control when they want to do something. Revich and Shatte (2002) stated that impulse control is an individual's ability to control desires, urges, preferences and pressures that arise from within him. The third indicator relates to an individual's decision to take action and interact with other individuals. Of the three RT and SK respondents, they understand the conditions for asking for help from other people, while for AS respondents, before doing something, they must first ask the people around them. This shows that US respondents have not been able to make decisions about when to ask for help from other people and when to do something based on their own decisions.

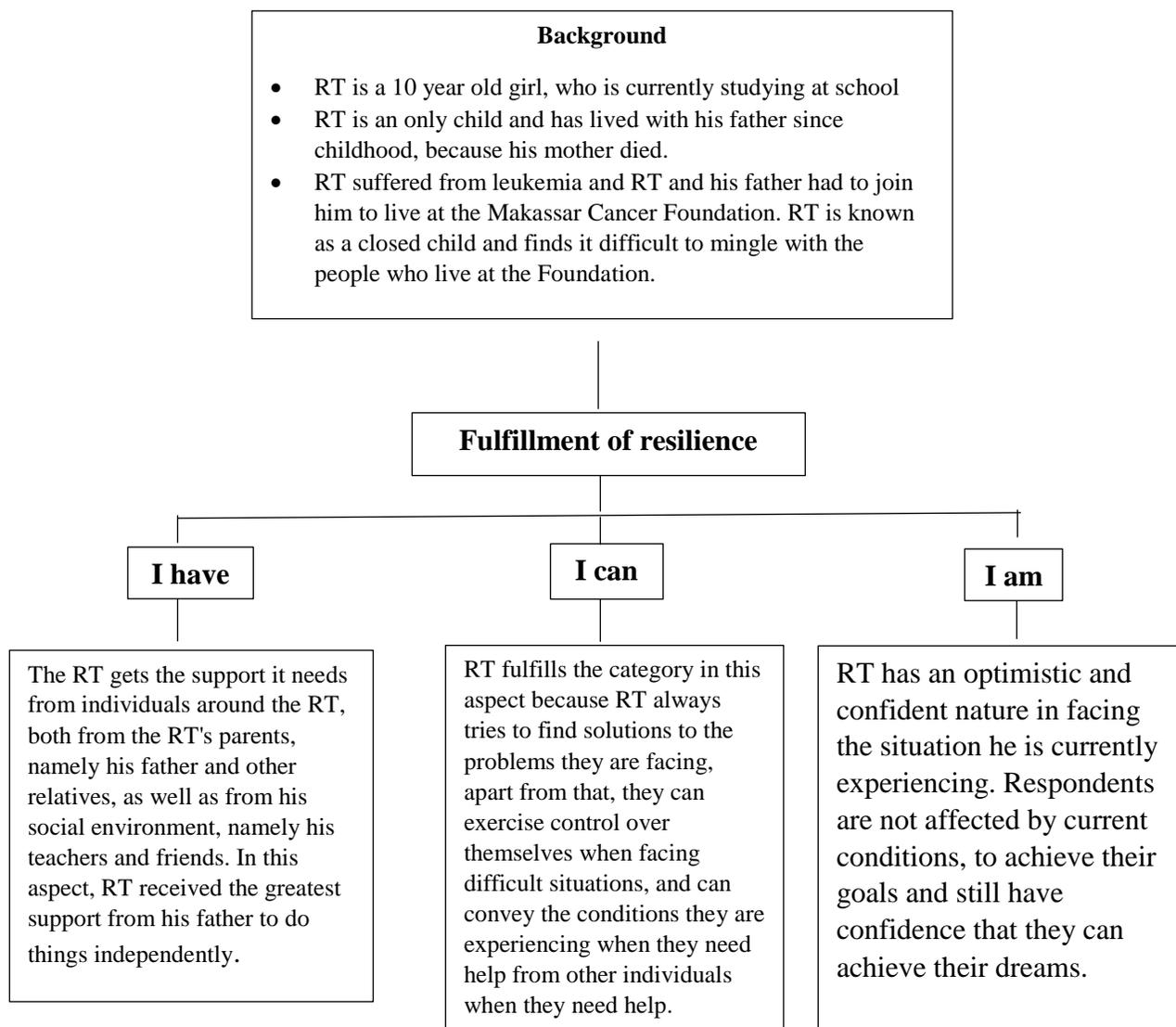
The fourth indicator relates to decisions taken to ask for help from other individuals when they need help. Of the three respondents, RT and SK met this category, while AS did not fall into that category. US respondents have not independently done something when faced with quite difficult situations. US respondents more often involve other people before doing something, rather than making their own decision to do something. The fifth indicator relates to the individual's condition to express the feelings felt by the conditions experienced. Of the three respondents, namely, RT, SK, and AS fall into this category, because these three respondents can express their feelings based on the situation they are facing to other people around them.

Based on the discussion above, it can be seen that the process of building resilience in children suffering from leukemia can occur because of belief in themselves and other individuals around them. Confidence in the respondent takes the form of trust that is built within him, that the respondent has the strength to overcome the conditions he is currently facing. Having confidence in the respondent can help the respondent find solutions to the difficult conditions they are facing, this can take the form of self-control possessed by the respondent when facing situations that put pressure on the respondent.

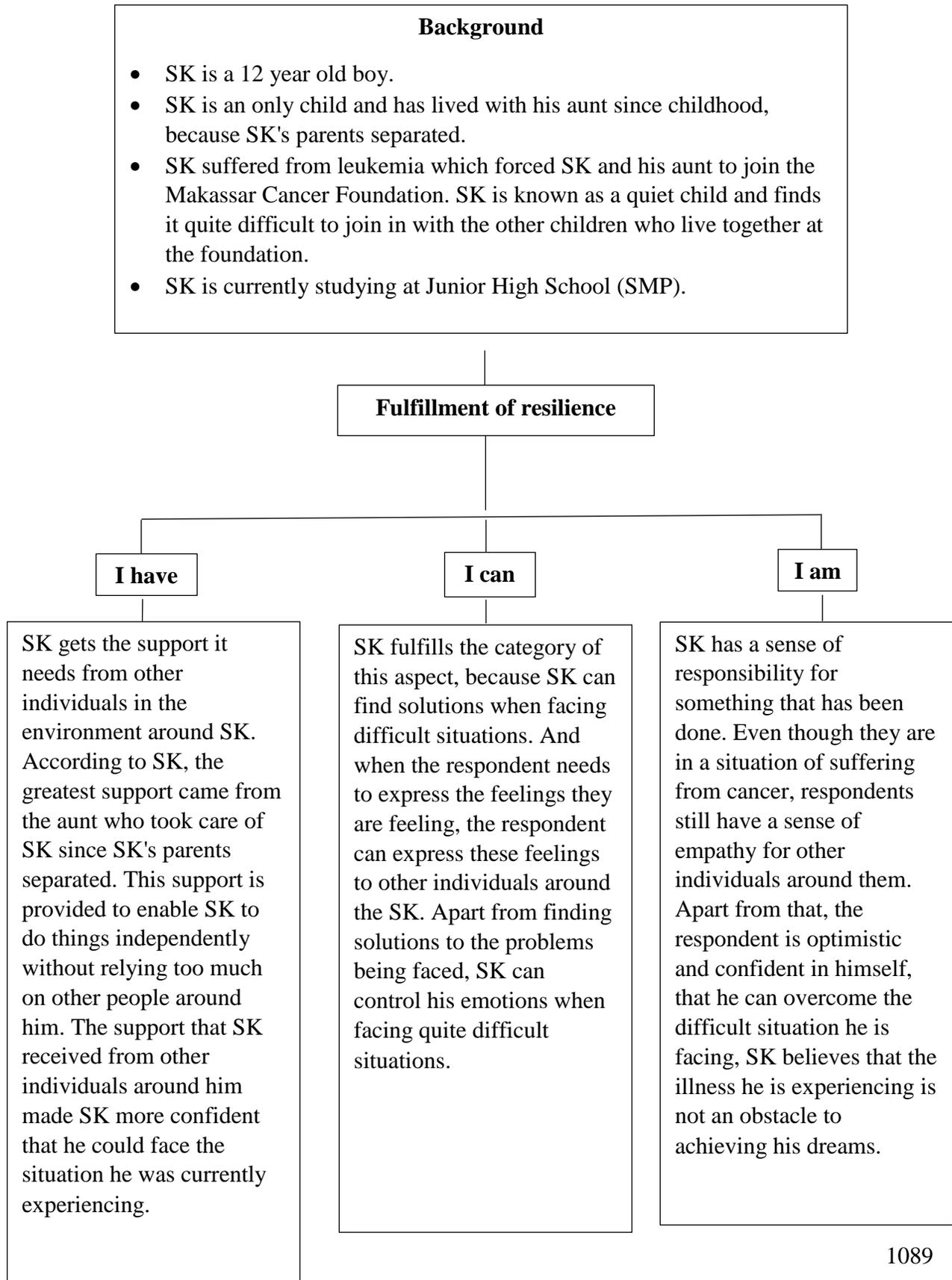
Apart from the trust within each respondent, this trust also grows due to the support provided by other individuals around the respondent. Support from other individuals is a form of reinforcement given so that respondents do not give up on the pressing conditions they face. This strengthening takes the form of the presence of people closest to the respondent in every difficult situation the respondent experiences,

such as when undergoing treatment, prayers are always said for the respondent in every condition, giving rewards for the achievements obtained by the respondent after facing difficult situations. This form of reinforcement has the impact on respondents that they are not alone in facing this situation, they have people who love them and consider their presence important. Of the three respondents involved in this research, based on the main aspects of resilience, namely I have, I am, and I can, RT and SK respondents fulfilled all components of these aspects, while for US respondents there were indicators that were not fulfilled in the three main aspects. in resilience. This indicator is contained in the I can component, namely the condition indicator when an individual decides to take an action and interacts with another individual and the decision taken to ask for help from another individual when they need help. US respondents have not been able to do this independently, where respondents more often involve other individuals in the problem solving process, rather than searching for and finding solutions to their problems independently. The following describes the dynamics experienced by each respondent.

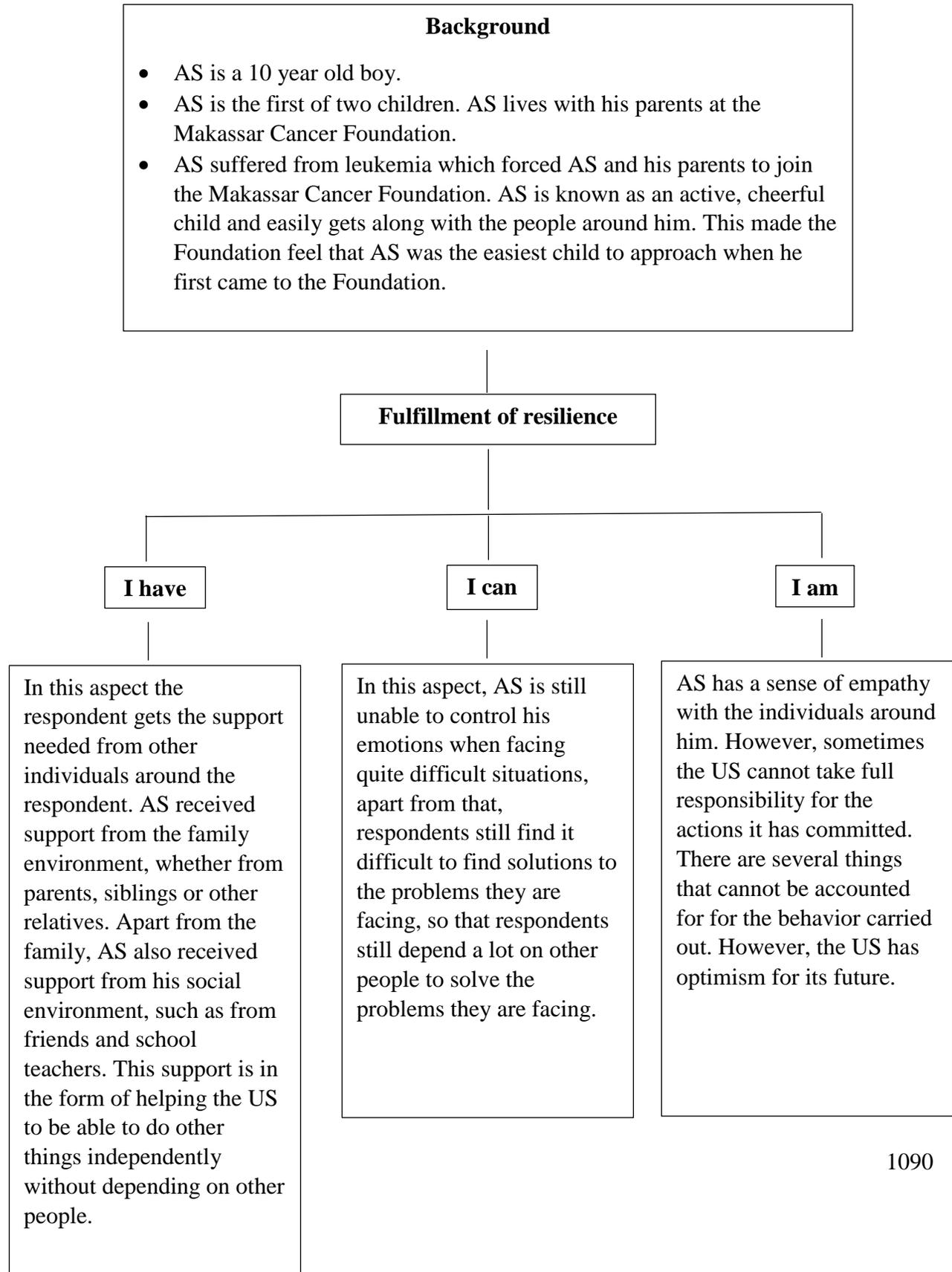
**a. RT respondents**



## b. SK Respondents



**c. US respondents**



## **CONCLUSIONS AND RECOMMENDATIONS**

### **A. Conclusion**

Based on the results of the research and discussion described above, it can be concluded that of the three respondents there were two respondents, namely RT and SK, who fulfilled all aspects of resilience from the three components, namely I have, I am, and I can. Meanwhile, US respondents still cannot fulfill all aspects of the resilience component, namely I can. The form of resilience found in RT is that respondents can dynamically carry out the process of adapting to the conditions currently being experienced. This dynamic process allows RT to survive even in difficult conditions. This is similar to the definition of resilience, which is a condition where individuals try to survive when facing difficult conditions. SK respondents have a picture of resilience where respondents can adapt well to previous conditions. The adaptation process carried out by SK makes respondents aware of the forms of self-defense that respondents can use to get through difficult conditions in their lives. Meanwhile, for US respondents, the three components, namely component I can, are indicators of conditions when individuals decide to take action and interact with other individuals and decisions taken to ask for help from other individuals when they need help. US respondents have not been able to do this independently, where respondents more often involve other individuals in the problem solving process, rather than searching for and finding solutions to their problems independently. The lack of fulfillment by US respondents from the three components has an influence on the process of forming resilience in respondents.

### **B. Suggestion**

1. For respondents to be able to better recognize the emotional conditions they feel, apart from that, respondents are expected to be able to express their emotional feelings to other people.
2. For parents to always accompany and provide support to respondents in the form of motivation for respondents to be able to get through the adversity process they are facing
3. For the foundation to provide support to all family members and also respondents so that they can overcome the conditions they are facing by providing motivation and assistance to the respondent's family.
4. For future researchers who wish to conduct similar research, it is recommended to conduct research with more varied respondent backgrounds such as age, gender, and type of cancer suffered by the respondents, as well as the number of respondents. Using different research methods, especially finding treatment methods that can increase resilience factors for respondents.

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