

Asian Pacific Journal of Nursing



ASSESS THE EFFECTIVENESS OF SURVIVORSHIP PROGRAM (SP) IN MEETING THE HOLISTIC NEEDS OF BREAST CANCER SURVIVORS

Journal homepage: www.mcmed.us/journal/apjn

Vanaja P^{1*}, Dr. Jaya N², Dr. Periyandavar I³, Dr. Prasannababy⁴, Jayasakthi T⁵

¹Research Scholar, Nursing Tutor, Academic Officer, Coordinator i/c Nursing Education & PME, Tamil Nadu Govt. Multi Super Specialty Hospital, Chennai -02, Tamil Nadu, India.

²Dean, Shenbagha College of Nursing, Chennai – 77, Tamil Nadu, India

³Professor, Department of Diabetology, MMC, Chennai, Tamil Nadu, India.

⁴Nursing Tutor, Academic Officer, Tamil Nadu Govt. Multi Super Specialty Hospital, Chennai -02, Tamil Nadu, India. ⁵Former Principal, Sri Ramachandra College of Nursing, Sri Ramachandra University, Chennai, Tamil Nadu, India.

ABSTRACT

Aim: The aim of the study was to assess the unmet needs of breast cancer survivors and intended to meet the holistic needs of the survivors in order to enhance their survival and reduce the burden of breast cancer symptoms. Methods: The True experimental design and the participants of 32 were selected, for experimental and control group divided into each 16, simple random sampling technique was used to collect the data from samples by using Structured Questionnaires assessing the demographic variables, holistic care needs that is Physical, Psychological, Social & Spiritual aspects among breast cancer survivors. Experimental group received the survivorship program, whereas the control group received only the routine treatment and at the end of sixth month this group also received the intervention for the benefits of breast cancer survivors. Results: The present study findings revealed that, in experimental group, there was a reduction by 28.51% physical needs score whereas control group are reduced only 1.81%. In Experimental group are reduced 26.53% psychological needs score whereas control group are reduced only 1.90%. In Experimental group are reduced 31.80% social needs score whereas control group are reduced only 1.80%. In Experimental group are reduced 35.56% Spiritual needs score whereas control group are reduced only 2.88%, it shows the effectiveness of the survivorship program. Conclusion: In all the domain, effectiveness of survivorship program with percentage of reduction score shows that the survivorship program had effectiveness in meeting the holistic needs in experimental group when compared to control group. The study findings help the survivors to enhance the survival through reduction of morbidity associated breast cancer and helps to identify and fulfill the need without dependency.

Keywords: Survivorship program, Holistic needs, Breast Cancer Survivors.

Corresponding Author	Article Info					
Vanaja P	Received 12/10/2022; Revised 20/11/2022					
Email:- vanajmr96@gmail.com	Accepted 24/12/2022					

INTRODUCTION

In the past 30 years, Cancer has been the leading cause of death in the world. Furthermore, cancer continues to be one of the most important public health issues worldwide [1]. Cancer is clearly a health issue that cannot be ignored. In the developing world, more than 50 million people die every year around the world with cancer. Of these deaths, 80% occur is incurable on diagnosis, these patients with incurable cancer need holistic care. The demand for holistic care is a challenge facing healthcare systems. The twentieth century has often been called as the cancer century. This is because more than a hundred types of cancer have been discovered in this century, and secondly, because enormous medical efforts were made to fight all kinds of cancers all over the world [2].

In the early decades of the century, cancer was considered to be a fatal disease, and although many



cancers remain fatal, medical therapy has developed significantly over the years such that most cancers can be treated and cured. After decades of struggling with various cancers, Medical professionals are now becoming more aware of the causes of these diseases, how they can be treated, and what can be done to prevent them [3]. The most beautiful creation of God, women, are often considered the creator of the universe. Women are responsible for reproduction, the prevalence of love on Earth, and are also the epitome of courage and strength. But like everything else beautiful and perfect women often have to prove their worth by fighting some of the most difficult of struggles [4]. Struggles which they never chose, struggles that people wish never come in anybody's life, struggles which leave a human being weak and wretched. Breast cancer one of the deadliest illnesses has found its way into the womankind and is proving to be the biggest enemy of all times.

Today, one in every 25 women suffers from breast cancer and not many win the battle. Breast cancer, however, remains one of the major concerns in the medical field, mainly because it has many forms and happens to strike a large number of women. The most common cancers diagnosed worldwide have changed little over the last 40 years [5]. Breast cancer is the top and most common cancer in women both in the developed and the developing world. The incidence of breast cancer is increasing in the developing world due to increase life

ational Agency for Research on Cancer

Number of cancer deaths in 2015 (all ages)

Breast

expectancy, increase urbanization and adoption of western lifestyles. Although some risk reduction might be achieved with prevention, these strategies cannot eliminate the majority of breast cancers that develop in low- and middle-income countries where breast cancer is diagnosed in very late stages [6]. Therefore, early detection in order to improve breast cancer outcome and survival remains the cornerstone of breast cancer control.

Overall estimates of Breast Cancer in the U.S

In 2017, it's estimated that among U.S. women there will be, 252,710 new cases of invasive breast cancer (This includes new cases of primary breast cancer among survivors, but not recurrence of original breast cancer among survivors.) 63,410 new cases of in situ breast cancer (This includes ductal carcinoma in situ (DCIS) and lobular carcinoma in situ (LCIS). Of those, about 83 percent will be DCIS [7]. DCIS is a non-invasive breast cancer and LCIS is a condition that increases the risk of invasive breast cancer. 40,610 breast cancer deaths.

WHO (World Health Organization) prediction for **Breast Cancer in India**

For the years 2015, there will be an estimated 1,55,000 new cases of breast cancer and about 76000 women in India are expected to die of the disease. The gap only seems to be widening, which means, we need to work aggressively on early detection [8].



Significance and Need of the study

The prospect of developing breast cancer is a source of anxiety for many women. After lung cancer, it is the second most common cause of mortality from cancer for women, with about 39,520 deaths expected in the United States in 2011. The number of global cases of cancer is projected to increase 65% from 12.7 million in 2008 to 21 million in 2030 [9]. Based on these trends, cancer survivorship has growing individual and societal ramifications. There are more than 13 million cancer survivors in United State whose needs for holistic care are

109 | Page

GLOBOCAN 2012 (IARC) (27.1.2014)

SOURCE: HTTP://GLOBOCRN.IRRC.FR

not being met. India is experiencing an unprecedented rise in the number of breast cancer cases across all sections of society, as are also other countries. There is no way we can prevent breast cancer, but we can definitely detect it early and treat adequately. Presently, India already has one of the worst survivals from breast cancer in the world has the highest number of women dying from breast cancer in the world and India ranks number one in the numbers of healthy life years lost (DALY - Disability Adjusted Life Years) due to breast cancer and if this trend is not broken, we can't imagine how bad it will become [10]. Breast



cancer patient's survival rates are constantly increasing and this is related to early detection, advanced technology and improved treatment options. The improved oncological treatment such as chemotherapy, Radiation therapy and Surgical therapy options lead the Breast cancer patients to face side effects of chemotherapy, Body image disturbance, Psychological distress and reduced Quality of life (QOL) [11]. The increased survival rate leads the Breast cancer patients to have a sustained holistic care such Survivorship program to progress towards positive healthy life in the course of cancer trajectory. It seems, in India there is no specific tailored survivorship program for the Breast cancer Survivors apart from the Medical & Surgical options [12]. This research will address the need for the survivorship program for Breast cancer Survivors.

HYPOTHESES

H1: There will be a significant difference between before and after implementation of the Survivorship program in experimental and control among Breast Cancer Survivors.

H2: There will be a significant difference between experimental and control group among Breast Cancer Survivors.

H3: There will be a significant association between Survivorship program in holistic needs and selected demographic variables in experimental and control group.

METHODOLOGY RESEARCH APPROACH

In this study, a Quantitative research approach will be selected to determine the effectiveness of Survivorship program in meeting the holistic need of Breast cancer survivors [13].

RESEARCH DESIGN

A True Experimental designed (Randomized Control Trial) has been conducted on Breast Cancer survivors in Rajiv Gandhi General Hospital, (MMC)Chennai.

Group	Pre-	Intervention	Post-	Post-
	test		test-I	test-II
Experimental	A0	Х	A1	A2
group				
Control	B0		B1	B2
group				

A0 – initial assessment, X – Survivorship program, A1 – assessment after the survivorship program in 3^{rd} month & A2 - 6^{th} month, B0- initial assessment, B1-assessment after 3rd month & B2 - 6th month

Section - A

PART – I: Demographic variables of the breast cancer survivors

PART-II – Gynaecological and Obstetrical History related to breast cancer survivors

PART-III – Breast cancer and its risk factors of the breast cancer survivors.

Section – B

PART-I: Assessing the Physical Needs of the breast cancer survivors

PART-II: Assessing the Nutritional Needs of the breast cancer survivors

PART-III: Assessing the Psychological Needs of the breast cancer survivors

PART-IV: Assessing the Social Needs of the breast cancer Survivors

PART-V: Assessing the Spiritual Needs of the breast cancer survivors.

RESULTS Data analysis and interpretation Table 1. Demographic Profile

	•	Group	Group						
		Experii	nental(n=16)	Contro	l(n=16)				
Demographic variables		n	%	n	%				
Age in Years	30-39 Years	3	18.75%	3	18.75%				
	40-49 Years	6	37.50%	5	31.25%				
	50-59 Years	7	43.75%	8	50.00%				
Marital Status	Single	1	6.25%	1	6.25%				
	Married	13	81.25%	12	75.00%				
	Divorced	1	6.25%	1	6.25%				
	Widow	1	6.25%	2	12.50%				
Personal habits	Tobacco chewing	4	25.00%	3	18.75%				
	Betel leaves	4	25.00%	2	12.50%				
	Smoking	0	0.00%	0	0.00%				
	Alcoholism	0	0.00%	0	0.00%				
	Nil	8	50.00%	11	68.75%				



BMI	Underweight	9	56.25%	8	50.00%	
	Normal weight	4	25.00%	4	25.00%	
	Over weight	3	18.75%	4	25.00%	
Food pattern	Vegetarian	5	31.25%	3	18.75%	
	Ova vegetarian	4	25.00%	4	25.00%	
	Non-vegetarian	7	43.75%	9	56.25%	

Table 2: Gynaecological and Obstetrical History

		Group					
		Experi	mental(n=16)	Contro	l(n=16)		
OG history		n	%	n	%		
Age at Menarche	<9 Years	0	0.00%	0	0.00%		
	9 -10 years	2	12.50%	3	18.75%		
	10 -11years	3	18.75%	4	25.00%		
	11- 12 above	2	12.50%	3	18.75%		
	>12 Years	9	56.25%	6	37.50%		
Duration of Menstrual cycle	Within 28 days	4	25.00%	5	31.25%		
	29 days	4	25.00%	3	18.75%		
	30 days	5	31.25%	8	50.00%		
	More than 30 days	3	18.75%	0	0.00%		
Menopause History	< 45 years	0	0.00%	0	0.00%		
	45 – 50 years	3	18.75%	2	12.50%		
	50 – 55 years	3	18.75%	2	12.50%		
	More than 55 years	10	62.50%	12	75.00%		
Pregnancy History	Normal delivery	10	62.50%	13	81.25%		
	Instrumental delivery	3	18.75%	2	12.50%		
	Vacuum Extraction	0	0.00%	0	0.00%		
	Caesarean section	3	18.75%	1	6.25%		
Children	One	4	25.00%	5	31.25%		
	Two	7	43.75%	7	43.75%		
	More than two	5	31.25%	4	25.00%		

Table 3: Breast cancer and its Risk Factors

		Group			
		Experiment	al(n=16)	Control(n=1	.6)
Risk Factors		n	%	n	%
Family history of Breast	Yes	5	31.25%	4	25.00%
cancer	No	11	68.75%	12	75.00%
Did you breastfeed any of	Yes	10	62.50%	14	87.50%
your children?	No	6	37.50%	2	12.50%
How many months or years	0 – 6 months	1	6.25%	0	0.00%
did you breastfeed them in	6-12 months	6	37.50%	4	25.00%
total	1 year – 2 years	9	56.25%	7	43.75%
	4.0	0	0.00%	5	31.25%
How was that Breast cancer first detected?	Breast Self-Examination (BSE)	0	0.00%	1	6.25%
	Breast Examination by medical care Provider	16	100.00%	14	87.50%
	Mammogram	0	0.00%	1	6.25%
Do you know about the BSE?	Yes	0	0.00%	1	6.25%
	No	16	100.00%	15	93.75%
Do you know about the	Yes	4	25.00%	3	18.75%
mammogram?	No	12	75.00%	13	81.25%
How many Mammogram have	None	13	81.25%	15	93.75%



you had in the past 5 years?	1	1	6.25%	0	0.00%
	2	1	6.25%	1	6.25%
	3	1	6.25%	0	0.00%
	4	0	0.00%	0	0.00%
	5 or more	0	0.00%	0	0.00%
Do you know about the	eYes	0	0.00%	0	0.00%
Survivorship Program fo Breast cancer survivors?	rNo	16	100.00%	16	100.00%

 Table 4: Comparison of mean Physical needs score During Pretest, Posttest-I and Posttest-II among experimental and control group

	Group				Mean	Student independent
	Experime	Experimental			Difference	t=test
	(n=16)		(n=16)			
Physical needs	Mean	SD	Mean	SD		
Pretest	142.06	12.66	144.50	14 42		t=0.29 P=0.77 DF=30
	145.00	15.00	144.50	14.42	-1.44	(NS)
Posttest-I	106 56	12 19	142.21	10.10		t=8.59 P=0.001***
	100.30	15.18	142.51	10.19	35.75	DF=30 (S)
Posttest-II	92.10	11.42	140.60	11.07		t=13.90 P=0.001***
	03.19	11.43	140.09	11.97	57.50	DF=30 (S)

NS = Not significant P>0.05 is not significant S= significant, P≤0.001 very high significant





 Table 5: Multiple comparison of Physical needs score between pretest, posttest-I, and posttest-II using Repeated ANOVA test score, Bonferroni t-test

	Assessment	Experiment		Repeated ANOVA test score		Bonferroni t- te	est	
		Mean	SD	F value	P value	Comparison	MD	P value
al	Pretest	143.06	13.66	F=91.72	P=0.001***	Pretest vs post-I	36.47	0.001
iment	Posttest-I	106.56	13.18			Pretest vs Post-III	59.87	0.001
Exper	Posttest-II	83.19	11.43			Posttest-1 Vs posttest-II	23.37	0.001
ntrol	Pretest	144.50	14.42	F=2.02	P=0.15	Pretest vs post-I	2.19	0.19
Ĉ	Posttest-I	142.31	10.19			Pretest vs	3.62	0.07



			Post-III		
Posttest-II	140.60	11.07	Posttest-1 Vs		0.0
	140.09	11.97	posttest-II 1	1.62	0.0.

MD=mean difference P \leq 0.05 significant P>0.05 not significant P \leq 0.01 highly significant P \leq 0.001 very high significant

 Table 6: Comparison of Level of Physical Needs Score

		Expe	Experiment(n=16)		trol(n=16)	Chi-square test
		Ν	%	n	%	
Pretest	Met	0	0.00%	0	0.00%	χ2=0.18 p=0.67
	Partially met	13	81.25%	12	75.00%	not significant
	Unmet	3	18.75%	4	25.00%	
3rd month	Met	7	43.75%	0	0.00%	χ2=10.72 p=0.01**
	Partially met	9	56.25%	13	81.25%	significant
	Unmet	0	0.00%	3	18.75%	
6 th month	Met	13	81.25%	0	0.00%	χ2=22.11p=0.001***
	Partially met	3	18.75%	14	87.50%	significant
	Unmet	0	0.00%	2	12.50%	

Not significant P > 0.05 ** P < 0.01 highly significant *** very high significant at $P \le 0.001$

In pretest there is no difference between experiment and control but in 3rd month and 6th month

there is a significant difference between experiment and control. It was calculated using chi square test.

 Table 7: Comparison of experimental and control group Mean Psychological needs reduction ratio score During

 Pretest, Posttest-I and Posttest-II

	Group	Mean	Student independent			
	Experimental		Control I		Difference	t=test
	(n=16)		(n=16)			
Psychological needs	Mean	SD	Mean	SD		
Pretest	124 10	2 62	122 21	1 25		t=1.34 P=0.19 DF=30
	154.19	5.02	152.51	4.23	1.88	(NS)
Posttest-I	111 20	6 95	121 44	4 07	20.06	t=10.07 P=0.001***
	111.30	0.85	151.44	4.07	20.00	DF=30 (S)
Posttest-II	01 12	6 21	120.25	2 07		t=28.80 P=0.001***
	01.15	0.31	130.23	5.07	49.12	DF=30 (S)

NS = Not significant; P>0.05 is not significant; S= significant; P≤0.001 very high significant







	Assessment	Experime	nt	Repeated ANOVA score		Bonferroni t- te	est	
		Mean	SD	F value	P value	Comparison	MD	P value
	Pre-test	134.19	3.62	F=151.28	P=0.001***	Pretest vs	22.01	0.001
tal				-		post-1	22.81	
en	Post-test-I	111 38	6.85			Pretest vs		0.001
.E		111.50	0.05			Post-III	53.06	0.001
pei	Post-test-III	01.12	6.21			Posttest-1 Vs		0.001
$\mathbf{E}\mathbf{x}_{\mathbf{j}}$		81.15	0.31			posttest-II	30.25	0.001
	Pre-test	122.21	4.25	F=3.32	P=0.07	Pretest vs		0.19
		152.51	4.25			post-I	0.87	0.18
	Post-test-I	121.44	4.07			Pretest vs		0.00
Ы		131.44	4.07			Post-III	2.06	0.08
ntr	Post-test-III	120.25	2.07]		Posttest-1 Vs		0.15
Col		130.25	3.07			posttest-II	1.19	0.15

Table 8: Multiple comparison of Psychological needs score between pretest, posttest-I, and posttest-II using Bonferroni t-test

MD=mean difference; P≤0.05 significant; P>0.05 not significant; P≤0.01 highly significant; P≤0.001 very high significant

 Table 9: Comparison of Level of Psychological Needs Score

		Expe	Experiment(n=16)		ntrol(n=16)	Chisquare test
		Ν	%	n	%	_
Pretest	Met	0	0.00%	0	0.00%	χ2=0.00 p=1.00
	Partially met	16	100.00%	16	100.00%	not significant
	Unmet	0	0.00%	0	0.00%	
3rd month	Met	6	37.50%	0	0.00%	χ2=7.38 p=0.01**
	Partially met	10	62.50%	16	100.00%	significant
	Unmet	0	0.00%	0	0.00%	
6 th month	Met	12	75.00%	2	12.50%	χ2=12.70p=0.001***
	Partially met	4	25.00%	14	87.50%	significant
	Unmet	0	0.00%	0	0.00%	

Not significant P >0.05**P<0.01 highly significant*** very high significant at P≤0.001

In pretest there is no difference between experiment and control but in 3rd month and 6th month

there is a significant difference between experiment and control. It was calculated using chi square test.

Table 10: Comparison of experimental and control group Me	an Nutritional needs reduction ratio score During Pretest,
Posttest-I and Posttest-II	

	Group			Mean	Student independent	
	Experimental (n=16)		Control	Difference	t=test	
			(n=16)			
Nutritional needs	Mean	SD	MeanSD			
Pretest	5 60	07	5 20 1 21		t=0.79 P=0.43 DF=30	
	5.09	.07	5.56 1.5	0.31	(NS)	
Posttest-I	4.12	1.45	5 10 1 22	1.06	t=2.23 P=0.03* DF=30	
	4.15	1.43	5.19 1.22	21.00	(S)	
Posttest-II	2 20	01	4.04 02		t=5.08 P=0.001***	
	5.56	.01	4.94 .93	1.56	DF=30 (S)	

NS = Not significant; P>0.05 is not significant; S= significant; P \leq 0.001 very high significant



Fig 3: Comparison of experimental and control group Mean nutritional needs reduction score During Pretest, Posttest-I and Posttest-II



Table 11: Multiple comparison of Nutritional needs score between pretest, posttest-I, and posttest-II using Repeated ANOVA test score & Bonferroni t-test

	Assessment	Experime	nt	Repeated ANOVA test score		Bonferroni t- test			
		Mean	SD	F value	P value	Comparison	MD	P value	
al	Pretest	5.69	.87	F=24.33	P=0.001***	Pretest vs post-I	1.56	0.01	
iment	Posttest-I	4.13	1.45			Pretest vs Post-III	2.31	0.001	
Exper	Posttest-III	3.38	.81			Posttest-1 Vs posttest-II	0.75	0.05	
	Pretest	5.38	1.31	F=1.57	P=0.22	Pretest vs post-I	0.19	0.58	
ol	Posttest-I	5.19	1.22			Pretest vs Post-III	0.44	0.25	
Contr	Posttest-III	4.94	.93			Posttest-1 Vs posttest-II	0.25	0.43	

MD=mean difference; P≤0.05 significant; P>0.05 not significant; P≤0.01 highly significant; P≤0.001 very high significant

 Table 12: Comparison of level of Nutritional Needs Score

Assessments		Expe	riment(n=16)	Control(n=16)		Chi-square test
		Ν	%	n	%	
Pretest	Met	0	0.00%	0	0.00%	χ2=0.16 p=0.69
	Partially met	12	75.00%	11	68.75%	not significant
	Unmet	4	25.00%	5	31.25%	
3rd month	Met	10	62.50%	0	0.00%	χ2=14.55 p=0.01**
	Partially met	5	31.25%	13	81.25%	significant
	Unmet	1	6.25%	3	18.75%	
6 th month	Met	12	75.00%	1	6.25%	χ2=15.67p=0.001***
	Partially met	4	25.00%	15	93.75%	significant
	Unmet	0	0.00%	0	0.00%	

Not significant P >0.05; ** P<0.01 highly significant; *** very high significant at P≤0.001

In pretest there is no difference between experiment and control but in 3rd month and 6th month

there is a significant difference between experiment and control. It was calculated using chi square test.



	Group			Mean	Student independent
	Experimen	Experimental		Difference	t=test
Social needs	(N=10) Mean	SD	(fi=10) Mean SD		
Pretest	67.94	4.27	67.44 4.9	90 _{0.50}	t=0.31 P=0.76 DF=30 (NS)
Posttest-I	54.56	8.72	66.81 5.6	5612.25	t=4.71 P=0.001*** DF=30 (S)
Posttest-II	42.50	3.48	66.00 4.9	95 23.50	t=15.52 P=0.001*** DF=30 (S)

 Table 13: Comparison of experimental and control group Mean Social needs reduction ratio score During Pretest,

 Posttest-I and Posttest-II

NS = Not significant; P>0.05 is not significant; S= significant; P≤0.001 very high significant

Fig 4: Comparison of experimental and control group Mean social needs reduction score during Pretest, Posttest-I and Posttest-II



Table 14: Multiple comparison of Social needs score between pretest, posttest-I, and posttest-II using Repeated ANOVA test score, Bonferroni t-test

	Assessment	Experime	nt	Repeated score	ANOVA test	Bonferroni t- test			
		Mean	SD	F value	P value	Comparison	MD	P value	
al	Pretest	67.94	4.27	F=123.66	P=0.001***	Pretest vs post-I	13.36	0.001	
iment	Posttest-I	54.56	8.72			Pretest vs Post-III	25.44	0.001	
Exper	Posttest-III	42.50	3.48			Posttest-1 Vs posttest-II	12.06	0.001	
	Pretest	67.44	4.90	F=2.56	P=0.09	Pretest vs post-I	0.63	0.33	
ol	Posttest-I	66.81	5.66			Pretest vs Post-III	1.44	0.10	
Contr	Posttest-III	66.00	4.95			Posttest-1 Vs posttest-II	0.81	0.13	

MD=mean difference; P≤0.05 significant; P>0.05 not significant; P≤0.01 highly significant; P≤0.001 very high significant

Table 15:	Comparison	of level of	f Social Need	ls Score

Assessments		Expe	xperiment(n=16) Control(n=16)		Chi-square test	
		Ν	%	n	%	
Pretest	Met	0	0.00%	0	0.00%	χ2=0.00 p=1.00
	Partially met	1	6.25%	1	6.25%	not significant
	Unmet	15	93.75%	15	93.75%	_
3rd month	Met	0	0.00%	0	0.00%	$\gamma 2=12.50$ p=0.01**

	Partially met	13	81.25%	3	18.75%	significant
	Unmet	3	18.75%	13	81.25%	
6 th month	Met	8	50.00%	0	0.00%	χ2=19.69p=0.001***
	Partially met	8	50.00%	5	31.25%	significant
	Unmet	0	0.00%	11	68.75%	

Not significant P >0.05 ** P<0.01 highly significant *** very high significant at P≤0.001

In pretest there is no difference between experiment and control but in 3rd month and 6th month

there is a significant difference between experiment and control. It was calculated using chi square test.

 Table 16: Comparison of experimental and control group Mean spiritual needs reduction ratio score During Pretest,

 Posttest-I and Posttest-II

	Group			Mean	Student independent
	Experimen	ntal	Control	Difference	t=test
	(n=16)		(n=16)		
Spiritualneeds	Mean	SD	MeanSD		
Pretest	66.00	7 10	65 44 5 0	1	t=0.24 P=0.56 DF=30
	00.00	/.18	03.44 5.9	¹ -0.56	(NS)
Posttest-I	12 75	6 60	$(2, 0) \in \mathcal{D}$	2	t=8.73 P=0.001***
	45.75	0.09	05.09 0.2	² 19.94	DF=30 (S)
Posttest-II	II 20.44	6.25	62 56 5 9	4	t=14.89 P=0.001***
	50.44	0.55	02.30 5.8	⁺ 32.12	DF=30 (S)

NS = Not significant; P>0.05 is not significant; S= significant; P≤0.001 very high significant





 Table 17: Multiple comparison of Spiritual needs score between pretest, posttest-I, and posttest-II using Repeated ANOVA test score, Bonferroni t-test

	Assessment	Experiment		Repeated ANOVA test		Bonferroni t- test		
				score				
		Mean	SD	F value	P value	Comparison	MD	P value
ental	Pretest	66.00	7.18	F=86.05	P=0.001***	Pretest vs	22.25	0.001
	D			-		post-1	22.23	
	Posttest-I	43.75	6.69			Pretest vs		0.001
.H			0.02			Post-III	35.56	0.001
pei	Posttest-III	20.44	C 25			Posttest-1 Vs		0.001
$\mathbf{E}\mathbf{x}_{\mathbf{j}}$		30.44	0.35			posttest-II	13.31	0.001
01	Pretest	65 11	5.01	F=3.02	P=0.08	Pretest vs		0.10
ntro		65.44	5.91			post-I	1.75	0.18
Co	Posttest-I	63.69	6.22			Pretest vs	2.88	0.09



					Post-III			
	Posttest-III 62.56	62.56	5.94	Posttest-1	Vs		0.22	
		5.64	5.84	posttest-II		1.13	0.55	

MD=mean difference; P≤0.05 significant; P>0.05 not significant; P≤0.01 highly significant; P≤0.001 very high significant

 Table 18: Comparison of Level of Spiritual Needs Score

Assessments		Experiment(n=16)		Control(n=16)		Chi-square test	
		Ν	%	n	%	_	
Pretest	Met	0	0.00%	0	0.00%	χ2=0.00 p=1.00	
	Partially met	1	6.25%	1	6.25%	not significant	
	Unmet	15	93.75%	15	93.75%		
3rd month	Met	0	0.00%	0	0.00%	χ2=3.86 p=0.05*	
	Partially met	13	81.25%	3	18.75%	significant	
	Unmet	3	18.75%	13	81.25%		
6 th month	Met	8	50.00%	0	0.00%	χ2=10.17p=0.001***	
	Partially met	8	50.00%	5	31.25%	significant	
	Unmet	0	0.00%	11	68.75%		

Not significant P >0.05; ** P<0.01 highly significant; *** very high significant at P≤0.001

In pretest there is no difference between experiment and control but in 3rd month and 6th month

there is a significant difference between experiment and control. It was calculated using chi square test.

Table: 19 Effectiveness of Survivorship program on holistic needs among breast cancer survivors in experimental and control group.

Physical Needs		Maximum	Mean score	% of mean	% of Reduction
Reduction		score		score	of physical needs
Score					score
Experimental	Pretest	210	143.06	68.12%	28.51%
	Posttest-I	210	106.56	50.74%	
	Posttest-III	210	83.19	39.61%	
Control	Pretest	210	144.50	68.81%	1.81%
	Posttest-I	210	142.31	67.77%	
	Posttest-III	210	140.69	67.00%	
Psychological Nee	eds Reduction So	core			
Experimental	Pretest	200	134.19	67.10%	26.53%
	Posttest-I	200	111.38	55.69%	
	Posttest-III	200	81.13	40.57%	
Control	Pretest	200	144.50	72.25%	1.90%
	Posttest-I	200	142.31	71.16%	
	Posttest-III	200	140.69	70.35%	
Nutritional Need F	Reduction Score				
Experimental	Pretest	8	5.69	71.13%	28.88%
	Posttest-I	8	4.13	51.63%	
	Posttest-III	8	3.38	42.25%	
Control	Pretest	8	5.38	67.25%	5.50%
	Posttest-I	8	5.19	64.88%	
	Posttest-III	8	4.94	61.75%	
Social Needs Redu	ction Score				
Experimental	Pretest	80	67.94	84.93%	
	Posttest-I	80	54.56	68.20%	
	Posttest-III	80	42.50	53.13%	
Control	Pretest	80	67.44	84.30%	1.80%



Vanaja P, et al. / Asian Pacific Journal of Nursing. 2022, 9(2), 108-123.

	Posttest-I	80	66.81	83.51%					
	Posttest-III	80	66.00	82.50%					
Spiritual Needs Gained Score									
Experimental	Pretest	100	66.00	66.00%	35.56%				
	Posttest-I	100	43.75	43.75%					
	Posttest-III	100	30.44	30.44%					
Control	Pretest	100	65.44	65.44%					
	Posttest-I	100	63.69	63.69%					
	Posttest-III	100	62.56	62.56%	2.88%				

Table:	20 Association	between	post inter	rventional	level o	f holistic	needs	with	selected	demographic	variables	among
breast	cancer survivoi	ſS.								_		

		Experimental	Control	Experimental	Control	
Demographic ^v	variables		Maan ISD	Oneway ANOVA F-test/t-test	Oneway ANOVA	
Dhusiaal Maada	Deduction Sec.	$\frac{\text{prean} \pm 5. D(n)}{10}$	111111111111111111111111111111111111		r-test/t-test	
Physical Needs	Reduction Sco	re				
Age in Years	30-39 Years	45.00 ± 22.07 (3)	-2.00 ± 10.58 (3)	F=1.40 p=0.28(NS)	F=1.38	
	40-49 Years	58.67 ± 18.90 (6)	2.80 ± 6.26 (6)		p=0.28(NS)	
	50-59 Years	67.29 ± 18.86 (7)	6.63 ±7.73 (7)			
Marital Status	Single	92.00 ± 0.00 (1)	4.00 ± 0.00 (1)	F=2.72 p=0.09(NS)	F=1.75	
	Married	54.54 ± 17.18 (13)	2.25±6.57 (13)		p=0.21(NS)	
	Divorced	$66.00 \pm 0.00 (1)$	0.00±0.00(1)			
	Widow	91.00 ± 0.00 (1)	15.00±14.14 (1)			
Type of work	Heavy	$0.00 \pm 0.00 \ (0)$	0.00 ± 0.00 (0)	t=2.16 p=0.05*(S)	t=0.41	
	Moderate	70.95 ± 17.01 (9)	2.50±10.50(9)		p=0.53(NS)	
	Sedentary	50.86 ± 20.14 (7)	5.13±4.91(7)			
Personal habits	Tobacco chewing	66.00 ± 24.52 (4)	5.00± 3.46 (4)	F=0.40 p=0.68(NS)	F=0.46 p=0.65(NS)	
	Betel leaves	62.75 ± 4.99 (4)	7.50±7.78 (4)			
	Smoking	0.00 ± 0.00 (0)	$0.00 \pm 0.00(0)$			
	Alcoholism	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)			
	Nil	55.38 ± 23.07 (8)	2.55± 5.22 (8)			
BMI	Underweight	63.89 ± 16.24 (9)	4.25±9.21 (9)	F=0.58 p=0.57(NS)	F=0.04	
	Normal weight	$t58.75 \pm 29.38$ (4)	2.75±10.24 (4)		p=0.96(NS)	
	Over weight	49.33 ± 19.60 (3)	4.00±4.24 (3)			
Food pattern	Vegetarian	53.60 ± 26.12 (5)	1.67 ±2.89 (5)	F=0.38 p=0.68(NS)	F=1.82	
1	Ova vegetariar	159.75 ± 26.27 (4)	$-1.50 \pm 5.97 (4)$	1 ()	p=0.20(NS)	
	Non- vegetarian	64.43 ± 11.60 (7)	6.89 ± 8.89 (7)	_		
Psychological r	needs reduction	score		·	<u>.</u>	
Age in Vears	30-39 Vears	$45.00 \pm 5.20(3)$	0.00 + 6.24(3)	E = 4.29 n = 0.05 s(S)	F-0 53	
rige in reals	40-49 Vears	$52 33 \pm 5.98 (6)$	2.80 ± 2.95 (6)	r =4.29 p=0.05 (b)	n = 0.55 n = 0.60(NS)	
	50 59 Vears	$52.33 \pm 5.98(0)$ 58 43+ 7 48 (7)	$2.80 \pm 2.95(0)$		p=0.00(1 1 5)	
Marital Status	Single	$58.43 \pm 7.48(7)$ 57.00 ± 0.00(1)	$2.38 \pm 3.40(7)$	F = 0.97 p = 0.44 (NS)	E-0.64	
Warnar Status	Married	$57.00 \pm 0.00(1)$ 53 77 + 7 17 (13)	$1.83 \pm 4.00(13)$	$1^{-0.97}$ p=0.44(103)	n=0.61 (NS)	
	Divorced	$53.77 \pm 7.17(13)$ $51.00 \pm 0.00(1)$	$7.00\pm0.00(13)$	-	p=0.01(110)	
	Widow	$51.00 \pm 0.00(1)$ $42.00 \pm 0.00(1)$	$7.00\pm0.00(1)$ 2.00+2.83(1)			
Type of work	Heavy	$-2.00 \pm 0.00(1)$	$2.00\pm 2.03(1)$	t = 2.14 p = 0.05 (S)	E = 0.41	
rype of work	Moderato	$57.24 \pm 5.24(0)$	$0.00\pm0.00(0)$ 0.75+ 4.10(0)	$\mu = 2.14 \text{ p} = 0.05^{\circ}(3)$	n = 0.41 n = 0.53 (NS)	
	Sedenterry	$37.24\pm 3.34(7)$ $10.03\pm 8.07(7)$	$3.73 \pm 4.10(3)$ $3.37 \pm 3.11(7)$	-	P-0.23(143)	
	pedentary	H7.UJI 0.7/(/)	$0.31 \pm 0.11(1)$		1	



Personal habits	Tobacco chewing	51.50± 9.15 (4)	-0.33± 2.89 (4)	F=0.22 p=0.80(NS)	F=0.62 p=0.55(NS)
	Betel leaves	56.50± 6.86 (4)	4.00±0.00 (4)		
	Smoking	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)		
	Alcoholism	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)		
	Nil	52.13 ± 6.64 (8)	2.36± 4.13 (8)		
BMI	Underweight	53.89± 5.95 (9)	1.38± 3.42 (9)	F=1.31 p=0.32(NS)	F=0.43
	Normal weight	49.50± 10.66 (4)	0.50±4.04 (4)		p=0.66(NS)
	Over weight	55.33± 5.86 (3)	5.00±3.37 (3)		
Food pattern	Vegetarian	49.80± 5.45 (5)	-0.67 ±1.15 (5)	F=1.18 p=0.33(NS)	F=2.28
1	Ova vegetarian	52.00± 8.21 (4)	0.50 ±4.93 (4)		p=0.14(NS)
	Non- vegetarian	56.00± 7.37 (7)	3.67 ± 3.20 (7)		
Nutritional need	ds reduction sco	ore		•	
Age in Years	30-39 Years	3.33 ± 1.15 (3)	1.00 ± 1.00 (3)	F=1.73 p=0.25(NS)	F=0.38
-	40-49 Years	1.83±0.75 (6)	1.00 ± 1.00 (6)		p=0.69(NS)
	50-59 Years	2.29±1.38(7)	0.38 ±1.92 (7)		
Marital Status	Single	$3.00 \pm 0.00(1)$	4.00 ± 0.00 (1)	F=0.85 p=0.49(NS)	F=3.23
	Married	2.15 ± 1.21 (13)	0.17±1.27 (13)		p=0.06(NS)
	Divorced	2.00 ± 0.00 (1)	1.00±0.00(1)		
	Widow	4.00 ± 0.00 (1)	-0.50±0.71(1)		
Type of work	Heavy	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)	t=1.21 p=0.29(NS)	F=1.00
21	Moderate	2.11±1.17 (9)	0.00± 1.07 (9)		p=0.33(NS)
	Sedentary	2.57±1.27(7)	$0.75 \pm 1.83(7)$		
Personal habits	Tobacco chewing	2.50± 1.29 (4)	0.33± 1.53 (4)	F=0.55 p=0.58(NS)	F=0.07 p=0.73(NS)
	Betel leaves	1.75 ± 0.50 (4)	0.00 ± 1.41 (4)		r
	Smoking	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)		
	Alcoholism	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)		
	Nil	2.50 ± 1.41 (8)	0.45 ± 1.63 (8)		
BMI	Underweight	2.23 ± 0.87 (9)	0.50 ±1.77 (9)	F=4.01 p=0.05*(S)	F=0.15
	Normal weight	3.35 ± 1.50 (4)	0.00±0.82 (4)		p=0.86(NS)
	Over weight	1.00 ± 0.00 (3)	0.50±1.73 (3)		r 、 ,
Food pattern	Vegetarian	$3.20\pm0.84(5)$	$-0.67 \pm 0.58 (5)$	F=2.46 p=0.12(NS)	F=1.09
· · · · I · · · ·	Ova vegetarian	1.75 ± 1.50 (4)	$1.00 \pm 2.16(4)$		p=0.36(NS)
	Non- vegetarian	2.00± 1.00 (7)	0.44 ± 1.33 (7)		L 、 /
Social needs re	duction score				
Age in Years	30-39 Years	$23.00 \pm 5.20(3)$	3.00 ± 3.00 (3)	F=3.83 p=0.05*(S)	F=0.46
ε	40-49 Years	25.00± 2.83 (6)	0.80 ± 1.10 (6)		p=0.64(NS)
	50-59 Years	$30.14 \pm 5.30(7)$	1.25 ±4.03 (7)		1
Marital Status	Single	$17.00 \pm 0.00(1)$	-5.00 ± 0.00 (1)	F=1.26 p=0.33(NS)	F=2.58
	Married	26.00 ± 4.98 (13)	2.33±2.84 (13)		p=0.10(NS)
	Divorced	23.00 ± 0.00 (1)	0.00±0.00(1)		
	Widow	29.00 ± 0.00 (1)	$0.00\pm0.00(1)$		
Type of work	Heavy	0.00 ± 0.00 (0)	$0.00\pm0.00(0)$	t=1.21 p=0.29(NS)	F=0.15
-) F	Moderate	26.67 + 4.95(9)	$1.75 \pm 2.92(9)$		p=0.70(NS)
	Sedentary	23.86 + 5.24(7)	1.13 + 3.48(7)	-	L
Personal habits	Tobacco chewing	24.25± 4.11 (4)	2.00± 4.00 (4)	F=0.32 p=0.73(NS)	F=0.24 p=0.79(NS)
	Betel leaves	$24.50 \pm 2.65(4)$	$0.00\pm0.00(4)$		r (1,5)
	Smoking	$0.00 \pm 0.00(0)$	0.00 ± 0.00 (0)		



Vanaja P, et al. / Asian Pacific Journal of Nursing. 2022, 9(2), 108-123.

	Alcoholism	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)		
	Nil	26.50 ± 2.65 (8)	1.55±3.30 (8)		
BMI	Underweight	25.22± 5.38 (9)	1.13±3.76 (9)	F=2.79 p=0.10(NS)	F=1.41
	Normal weight	29.25± 1.26 (4)	0.00±0.00 (4)		p=0.27(NS)
	Over weight	21.00± 4.36 (3)	3.50±2.65 (3)		
Food pattern	Vegetarian	26.00± 7.35 (5)	-0.67 ±1.15 (5)	F=0.58 p=0.57(NS)	F=2.32
_	Ova vegetarian	23.00± 5.35 (4)	-0.75±2.99 (4)		p=0.13(NS)
	Non- vegetarian	26.43± 3.10 (7)	3.11 ± 2.71 (7)		
Spiritual needs	reduction score				
				F=2.20 p=0.05*(S)	
Age in Years	30-39 Years	1.33 ± 1.15 (3)	1.00 ± 1.00 (3)		F=2.98
	40-49 Years	2.53±0.75 (6)	1.00 ± 1.00 (6)		p=0.09(NS)
	50-59 Years	3.29±1.18 (7)	0.38 ±1.92 (7)		
Marital Status	Single	3.00 ± 0.00 (1)	4.00 ± 0.00 (1)	F=1.71 p=0.21(NS)	F=0.31
	Married	2.15 ± 1.21 (13)	0.17±1.27 (13)		p=0.81(NS)
	Divorced	2.00 ± 0.00 (1)	1.00±0.00(1)		
	Widow	4.00 ± 0.00 (1)	-0.50±0.71 (1)		
Type of work	Heavy	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)	t=1.40 p=0.18(NS)	F=1.82
	Moderate	2.11±1.17 (9)	0.00±1.07 (9)		p=0.07(NS)
	Sedentary	2.57±1.27 (7)	$0.75 \pm 1.83(7)$		
Personal habits	Tobacco chewing	2.50± 1.29 (4)	0.33±1.53 (4)	F=0.64 p=0.54(NS)	F=1.27 p=0.32(NS)
	Betel leaves	1.75±0.50 (4)	0.00± 1.41 (4)		
	Smoking	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)		
	Alcoholism	0.00 ± 0.00 (0)	0.00 ± 0.00 (0)		
	Nil	2.50 ± 1.41 (8)	0.45±1.63 (8)		
BMI	Underweight	2.33±0.87 (9)	0.50±1.77 (9)	F=0.15 p=0.86(NS)	F=0.63
	Normal weight	3.25±1.50 (4)	0.00±0.82 (4)		p=0.54(NS)
	Over weight	1.00±0.00 (3)	0.50±1.73 (3)		
Food pattern	Vegetarian	3.20± 0.84 (5)	-0.67 ±0.58 (5)	F=0.76 p=0.48(NS)	F=0.41
	Ova vegetarian	1.75±1.50 (4)	1.00 ±2.16 (4)]	p=0.67(NS)
	Non- vegetarian	2.00± 1.00 (7)	0.44 ± 1.33 (7)		

DISCUSSION

A modified structured questionnaire was used to collect data from breast cancer survivors. Experimental group received a survivorship program, control group received routine care. We collected data from both groups at 3rd and 6th months. Inferential and descriptive statistics were used to analyze the data, and the results were interpreted. Discussion based on study objectives. Out of 16 samples from the experimental group, 43.7% were in the 50-59 age group, whereas out of 16 samples from the control group, 50% were in that age group. Regarding marital status, 81.2% were married in experimental group, whereas in control group, 75% were married. In the experimental group and the control group, respectively, 50% and 68.7% did not chew tobacco, chew betel leaves, smoke, or drink alcohol. Experimental and control groups had underweight samples in 56.2% and 50%, respectively. Experimental and control groups had menopause rates of 62.5% and 81.25%, respectively. A family history of breast cancer was found in 31.2% of experimental samples

and 25% of control samples. There were 81.2% of experimental samples and 93.7% of control samples without a mammogram in the past five years. The experimental group and control group were both unaware of survivorship programs. According to table 6, out of 16 samples in the experimental group, 81.2% were satisfied with their physical needs and 18.7% were not. Before implementing the survivorship program, 75% of the samples were satisfied with their physical needs, but 25% were unmet. At the end of the survivorship program at 3 and 6 months, 43.7% and 81.2% of the experimental groups met the physical needs and 56.2% & 18.7% were satisfied, whereas in the control groups, 81.2% & 87.5% were satisfied and 18.7% & 12.5% were unmet. Furthermore, table 9 shows that psychological needs were satisfied in both experimental and control groups before implementing survivorship program. The experimental group met 37.5% and 75% of psychological needs at the third and sixth month after survivorship program and 62.5% and 25% of them were satisfied, while the control



group met 100% & 87.5%. The nutrition needs were satisfied in 75% of cases and unmet in 25% of cases, whereas before implementing survivorship programs, 68.7% of participants were satisfied and 31.2% were unsatisfied with nutrition. During the 3rd and 6th month after survivorship program, experimental group met 56.0% & 79.5% nutrition needs, and 31.2% & 25.0% were satisfied, while control group met 81.2% & 93.7% of nutritional needs, but 18.7% & 6.2% were unsatisfied. As shown in table 15, 6.2% of the social needs were met in both the experimental and control groups before the survivorship program was implemented. The experimental group had 81.2% & 50% satisfied and 18.7% & 50% unmet social needs, but the control group had 18.7% & 31.2% satisfied and 81.2% & 68.7% unmet social needs at 3rd and 6th month after survivorship program. Among the experimental group, 6.2% were satisfied with spiritual needs and 93.7% unsatisfied with nutritional needs, whereas 93.7% of the control group were unsatisfied with spiritual needs before implementing survivorship programs. On the third- and sixth-month following survivorship program, 81.2% and 50% of experimental group showed satisfaction, while 18.7% & 50% showed unmet spiritual needs, whereas 81.2% in control group said they were satisfied.

A Survivorship program was evaluated in experimental and control groups for its effectiveness on holistic needs. Pretest-posttest-I mean differences in physical need are 36.47 (p≤ .001). Score increased to 59.87 after post-test II ($p \le .001$). A repeated measures ANOVA F-test shows that there is no statistical significance between pre-test and post-test-II in the control group (F = 2.02, p > 0.05). Psychological mean difference from pretest to posttest-I is 22.81 (p≤0.001). Post-test II showed a mean difference of 30.25.87 from pre-test to post-test II ($p \le .001$). The difference between pre-test and post-test-II is not statistically significant in the control group (F = 3.32, p > 0.05). From pretest to posttest-I, nutritional needs mean difference score is $2.31 \text{ (p} \le .001)$. After post-test II, score is 0.75, which is statistically significant from pre-test to post-test II. There is no statistically significant difference between pre-test and post-test-II in the control group (F = 1.57, p > 0.05). The mean difference in social needs between pretest and posttest is 25.44 ($p\leq$.001). There was statistically significant difference from pre-test to post-test II ($p \le .001$) after post-test II. In the control group, there is no statistically significant difference between pretest and posttest-II (F = 2.56, p > 0.05). Between pre-test and posttest-I, there is a 35.56 difference in mean spiritual needs scores ($p \le .001$). In comparison to the pre-test score, the post-test II score is 13.31, which is statistically significant ($p\leq .001$). Statistically, there is no significant difference between pre-test and post-test-II in the control group (F =3.02, p > 0.05). A 5% level of significance was found for psychological needs, nutritional needs, social needs, and spiritual needs reduction scores with selected demographic variables such as age, BMI, type of job, food pattern, and personal habits.

CONCLUSION

This study provides the first evidence that a survivorship program effectively changes patient behavior in important ways despite its time and resource demands. Setting up survivorship programs can be time-consuming and resource-intensive, but they are well worth the investment. Regardless of whether patients attend SCs, we seem to be doing well with many aspects of survivorship care. Our measures can assist us in improving the care we provide to cancer survivors as well as help other institutions measures the quality and effectiveness of their programs. When comparing the effectiveness of survivorship programs with percentages of reduction scores, the results indicate that survivorship programs were effective in meeting the holistic needs of experimental group members as compared to control group members in all domains. There is no doubt that the findings of this study will help the survivors to improve their survival through the reduction of morbidity associated with breast cancer and also help to identify and fulfill their needs without becoming dependent on others.

REFERENCES

- GBD 2015 Mortality and Causes of Death Collaborators. (2016). Global, regional, and national life expectancy, all-cause mortality, and cause-specific mortality for 249 causes of death, 1980-2015: a systematic analysis for the Global Burden of Disease Study 2015. Lancet; 388, 1459-544
- 2. Hiroki Nagai and Young Hak Kim. (2017). Cancer prevention from the perspective of global cancer burden patterns. *J Thorac Dis.* 9(3), 448–451.
- 3. Jerant AF, Friedrichs-Fitzwater MM, Moore M. (2005). Patients' perceived barriers to active self-management of chronic conditions. *Patient Education and Counseling*. 57(3), 300–307.
- 4. Hewitt M, Rowland JH, Yancik R. (2003). Cancer survivors in the United States: Age, health, and disability. *Journal of Gerontology*.58(1), 82–91.
- 5. Dunn J, Steginga SK. (2000). Young women's experience of breast cancer: defining young and identifying concerns. *Psychooncology*. 9(2): 137-146.
- 6. Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA and Jemal A. (2018). Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin*; 68, 394- 424.



- 7. Torre LA, Bray F, Siegel RL, Ferlay J, Lortet-Tieulent J and Jemal A. (2015). Global cancer statistics, 2012. *CA Cancer J Clin*; 65, 87-108
- 8. Miller KD, Ortiz AP, Pinheiro PS. (2021). Cancer statistics for the US Hispanic/Latino population, 2021. *CA Cancer J Clin*; 71, 466-487.
- 9. Arnold M, Morgan E, Rumgay H, Mafra A, Singh D, Laversanne M. (2022). Current and future burden of breast cancer: global statistics for 2020 and 2040 Breast.
- 10. Lindsey A Torre, Freddie Bray, Rebecca L Siegel, Jacques Ferlay, Joannie Lortet-Tieulent, Ahmedin Jemal. (2015). Global cancer statistics, 2012. *CA Cancer J Clin*. 65(2), 87-108.
- 11. Gelband H, Jha P, Sankaranarayanan R, Gauvreau, Horton S. (2015). Chapter 1, Cancer. In: Jamison Dean T, Gelband Hellen, Horton Sue, Jha Prabhat, Laximinarayan Ramanan, Nugent Rachel., editors. Disease Control Priorities in Developing Countries. 3rd. United States: *World Bank*.
- 12. Verma R., Bowen R.L., Slater S.E., Mihaimeed F., Jones J.L. (2012). Pathological and epidemiological factors associated with advanced stage at diagnosis of BC. *Br. Med. Bull.* 103, 129–145.
- 13. Zebrack B. (2009). Information and service needs for young adult cancer survivors. Support Care Cancer. 17 (4), 349–357.

