

“PSYCHOLOGICAL PENSION FOR AN ADOLESCENT WITH CANCER” A CLINICAL STUDY OF ONE CASE AT THE UNIVERSITY HOSPITAL OF TLEMCEN-PSYCHOLOGY UNIT-ALGERIA*

Hadj Slimane Fatima Zahra

Université de Abou Bakr Belkaid Tlemcen Faculté

Science Humaine Et Social

<https://orcid.org/0000-0002-5592-4871>

hadjslimanepsy@gmail.com

Abstract

The aim of the current study is to know the nature of psychological pension for adolescents suffering from cancer, we relied on the clinical approach using the case study, where one case was selected intentionally from the University Hospital of Tlemcen in the Psychology Unit, using the following clinical tools: clinical interview, observation, Beck test for depression, Taylor anxiety scale, Livin Stein scale for the apperception of psychological stress and the Rosenberg scale of self-esteem. Finally, the results concluded that the case with cancer is characterized by a high level of anxiety and depression accompanied by high psychological pressure and a low level of self-esteem.

Keywords: psychological pension, adolescence, cancer, anxiety, depression, psychological stress, self-esteem.

* Geliş Tarihi / Received: 18.11.2022 - Kabul Tarihi / Accepted: 02.12.2022
DOI: 10.17932/IAU.AIT.2015.012/ait_v08i2004

TLEMÇEN ÜNİVERSİTE HASTANESİ-PSİKOLOJİ ÜNİTESİ- CEZAYİR’DE BİR VAKANIN KLİNİK ÇALIŞMASI

Mevcut çalışmanın amacı, kanserden mustarip ergenler için psikolojik emekliliğin doğasını bilmektir. Tlemcen Üniversite Hastanesi Psikoloji Birimi’nden kasıtlı olarak bir vakanın seçildiği vaka çalışmasını kullanan klinik yaklaşıma güvendik. Aşağıdaki klinik araçlar: klinik görüşme, gözlem, depresyon için Beck testi, Taylor kaygı ölçeği, psikolojik stresin algılanması için Livin Stein ölçeği ve Rosenberg benlik saygısı ölçeği. Son olarak, sonuçlar, kanser vakasının, yüksek psikolojik baskı ve düşük benlik saygısı ile birlikte yüksek düzeyde kaygı ve depresyon ile karakterize olduğu sonucuna varmıştır.

Anahtar Kelimeler: Psikolojik emeklilik, ergenlik, kanser, kaygı, depresyon, psikolojik stres, benlik saygısı.

Introduction

Cancer is one of the most common diseases in the world, due to the seriousness of the disease, once the diagnosis is announced, the reactions are numerous and differ from one case to another, “Nabulsi” (1990) confirmed that at the moment the news of cancer was announced, and the perceptions and beliefs that this disease holds, all revolve around the collapse of the myth of immortality, to turn this feeling of safety and become summarized in the idea that I will definitely die and now, to establish this idea psychological trauma is lived as a situation that threatens the life of the individual and robs him of safety. (Nabulsi, 1991:16).

The nature of the treatment course of the disease from the moment of diagnosis through the various appropriate treatment methods according to each case (surgery, chemotherapy, radiation therapy, hormonal treatment, and psychological treatment).

Considering that this period is the period of his suffering, we sought, through this study, to know the nature of the psychological pension of the category of adolescent girls with cancer.

1-The problem of the study:

Cancerous tumors are nowadays one of the health problems facing individuals, to the extent that they have topped the attention of many medical, psychological, academic and applied institutions, one of the features of this importance is that it has become a prominent topic of study within the branch of clinical psychology and mental health science, which aims to study psychological changes associated with physical diseases, this interest is also evident through the American cancer society's encouragement of researchers to conduct research and studies in various fields of knowledge, including the psychological field, in order to find effective ways to take good care of this disease. (shuwaikh ,2007:13).

Specialized scientists are also interested in studying the patient as a coherent psychological, physical and social unit in diagnosis and treatment, as well as studying the impact of psychological disorders on the deterioration of the patient's health status. (fawqiah , 2006:37) .

Living with cancer causes stress that has a severe psychological impact and includes body image, sexual problems, difficulties in interpersonal relationships, anxiety, fear and anxiety related to survival and fear of cancer recurring, most people with cancer show mild and fluctuating symptoms of anxiety and depression, and in others it develops to become severe, such as illness anxiety or stress disorders after trauma, and these cases need special treatment. (Centre National of Breast Cancer, 2003:16).

This is what Ali Hussein Ibrahim (2003) indicated in his study on “psychological symptoms in cancer patients”, where his study consisted of 150 patients from Saudi Arabia, using the beck mood scale and subject understanding test, it was found that cancer patients are more depressed, anxious, fearful, obsessive – compulsive and hostile than healthy subjects, he also found differences between the different types of cancer, affects the psychological state.

This is also what was added by the study of Aya Qawajlia (2013) about “death anxiety among adults with cancer”, the study aimed to know the psychological problems caused by this disease, while determining the level of anxiety they have, the study included three cases at the cancer control center in the state of Batna – Algeria, the researcher used the clinical approach and the Donald's Timbeer death Anxiety scale, the results conclud-

ed that the organic pain caused by cancer leads, in turn to the emergence of a number of serious psychological disorders that are difficult for the patient to get riel of, among these disorders is death anxiety arising from the sick experience he lives with awareness of the seriousness of the disease and the failure of treatment, which results in a state of severe depression, in addition to the emergence of emotion, which is directed towards the self and towards others, especially family members, and the state of anxiety experienced by the patient under the pressure of physical and psychological injury resulting from a physical injury.

As indicated by a “majoir” (1990) study conducted on large groups of patients with cancerous tumors, the study found that patients suffer from psychological disorders, most notably anxiety, depressive symptoms, and low self – esteem.

This was confirmed by “Sandra and marie Claire” (1999), where the results of their study indicated that one of the most common psychological disorders among oncological patients is death anxiety. (Abed Muhammed , Fasian Hussai , 2018:223).

“Marsat and others” also added in their study about anxiety and depression in breast cancer patients, where the study aimed to measure the level of anxiety and depression among breast cancer patients who receive radiotherapy the simple consisted of (122) breast cancer patients who were transferred to receive radiotherapy with surgical treatment, the research used the hospital scale for anxiety and depression (HADS), and the results indicated the emergence of anxiety and depression clearly on cancer patients.

Finally, the results of the study of “Pomina and others” supported these studies, as their study was about the psychological and medical effects of patients with breast cancer. The psychological function scale and the self-scale were applied to (125) cases, the result of the study concluded that there are a group of psychological disorders such as lack of confidence, anxiety, loneliness, sleep disorders, loss of control and poor self –esteem. (Qallal Khadija, 2020:14).

Thus, given all these changers and psychological effects that appear on most cases of cancer, the current study came to shed light on the category of adolescent girls with cancer, by asking the following question:

Does cancer affect the psychological pension of adolescent girls with cancer and what are its nature and advantages?

2-The general hypothesis of the study:

Cancer affects the psychological pension of adolescent girls, causing them anxiety, depression, psychological pressure and a low level of their self-esteem.

3-The importance of the study:

The theoretical importance of the research lies in drawing attention to this segment of adolescent girls with cancer and focusing on the importance of psychological support for them, in addition to strengthening the research and scientific aspect of this type of studies.

As for the importance of the study from an applied point of view, it is represented in gaining experience in dealing with this sensitive group, in addition to identifying the psychological effects and the impact of cancer on the psychological pension of affected adolescent girls, and thus trying to help them.

4-Objectives of the study:

The current study aims to achieve the following:

- To identify the nature and advantages of psychological pension for adolescents with cancer.
- Identifying the level of anxiety in an adolescent with cancer.
- Identifying the level of depression in adolescents with cancer.
- Detection of the level of psychological stress in adolescents with cancer.

5-Methodological procedures for the study:

A. The limits of the study:

The field study was conducted at the department of mental illness-psychology unit-hospital of Tlemcen, Algeria.

B. The study sample:

The study sample was a single case study of a 20 year-old woman with skin cancer.

C. Study approach:

Due to the nature of the current study, it has been relied of the clinical approach based on the case study with the use of various tools such as interview, observation and the application of some psychological tests.

6.Basic terms in the study:

A. Psychological pension:

Freud defines it as the sum of the feelings and emotions that an individual feels when he is in a psychological state and he usually lives an experience that results in a set of reactions and statements towards the influence that provoked this pension. (Sigmund Freud, translated by Othman Al-Nadjati ,1989:18).

As for the procedural aspect, it can be defined as all the feelings and emotions experienced by the individual in the inner life of the individual as a result of the situations and experiences he went through and the consequences thereof.

B. Adolescence:

Adolescence is the age between childhood and adulthood, in the age period between 13 to 25 years, and its beginning and end differ from one researcher to another and from one society to another.

C. Cancer:

The Arab encyclopedia (1986) defines cancer as a malignant tumor resulting from a malignant transformation or change that effects human cells, the reason for this change in cell growth and reproduction is not known specifically, what happens in this disease is that human cells are affected by a disease change that causes them to grow and multiply rapidly in an unorganized way and invade the tissues adjacent to them or surrounding them and then spread through the lymphatic vessels and multiple organs of the body. (bakouch ,2014 :137).

D. Anxiety:

“werner” defines it as a state of emotional excitement that appears as an obstacle to the awareness of the stimulus a through general representations of a physiological danger or psychological threat, he also considers it as tension and preoccupation with many events, and it is accompanied by physical symptoms such as pain in the muscles, a feeling of instability and reassurance.

It can be defined procedurally on what can be measured by symptoms through the Taylor Scale of anxiety.

E. Depression:

The American institute of mental health defines it as a defect in the body, thoughts and mood, it affects the person’s view of himself and the people around him and the events that happen, so that the patient loses his physical, psychological and emotional balance.

It can be defined procedurally as what can be measured by symptoms through the beck test for depression.

F. Psychological stress:

“Richard lazarse” knows that stress cannot be objectively defined and that we feel pressure when we perceive a situation beyond a person’s adaptive resources, it also referred to individual difference in how individuals respond to the same event. (Davisson and Neal, 1996:191).

It can be defined procedurally as the symptoms that can be measured by Levin Stein’s psychological stress perception test.

G. Self-esteem:

“Cooper Smith” defines it as an individual’s assessment of himself and works to maintain it; this includes evaluations of the individual’s positive and negative attitudes toward himself. (Samira Tarag , 2013).

It can be defined procedurally as the symptoms that can be measured by the Rosenberg self-esteem scale.

7-Tools of the study:

A-Clinical interview:

It is a kind of conversation that takes place between the specialist and the case, and it is the main axis around which the psychological counseling process revolves, its purpose is to obtain realistic information about the situation and work to solve the problems it faces.

The interview is a means that creates an opportunity for the process of dynamic interaction between the two parties to the relationship, in which the therapist is a participant and observer, where the case can express its problems and the interview allows to observe the case's behavior, way of speaking and expressive behavior. (Faisal Abbas , 2002:97).

B-Taylor express anxiety scale:

The Taylor anxiety Scale is one of the important measures that measures the level of psychological anxiety. It measures the level of anxiety that individuals suffer from through the apparent and explicit symptoms they feel, and it is suitable for all ages and levels, the test is taken and translated from the explicit anxiety measure used by Taylor (1959) who was famous and known by her name.

He modified the items of scale into Arabic by Muhammed Khair El-Sayed in 1998 and adapted it to the Sudanese environment (Soha Yassin, 2015 : 235).

The answer is “yes” to give a score of one or the answer is “no” to give a score of zero, and the result of the case is interpreted with this scale to know the degree of anxiety he has according to the following criterion:

degree	Anxiety level
0-16	There is not anxiety
17-20	There is a slight anxiety
21-26	There is moderate anxiety
27-29	There is great anxiety
30-50	There is very great anxiety

c-Beck depression scale:

The scale was translated into Arabic for the first time by “Gharib Abdel Fattah” in 1981, the scale consists of 21 items which are represented in the following:

- 1) Feeling sad
- 2) Pessimism
- 3) Felling of failure
- 4) Dissatisfaction
- 5) Feeling guilty
- 6) Feeling deserving of guilt
- 7) Self-hate
- 8) Self-accusation
- 9) Desire to harm oneself
- 10) Having bouts of crying
- 11) The limit of human nature
- 12) Social withdrawal
- 13) Deficit in matters
- 14) Body visualization
- 15) Decreased desire to sleep
- 16) Sleep disturbance
- 17) Susceptibility to fatigue
- 18) Anorexia
- 19) Weight loss
- 20) Preoccupation with health
- 21) Loss of interest in sex

The scale is explained by the following table:

0-9	There is not depression
10-15	Simple depression
16-23	Moderate depression
24-36	Severe depression
37 and over	Very severe depression

D. Psychological stress perception scale of Levin Stein:

It was prepared by Levin Stein and al in 1993 with the aim of measuring pressure indicators; it consists of 22 direct items.

It is the statements that indicate the presence of high pressure when the situation responds positively to the direction of the situation, and it indicates presence of low pressure when the case responds with no, and the presence of (08) other indirect items indicates the presence of low pressure when the case responds with acceptance, and the presence of high pressure when the case responds positively.

The method of correcting the test falls in a graduation from one to four points, and the following table shows that:

Items	direct	indirect
The answers		
Approximately-never	1	4
Sometimes	2	3
Much(often)	3	2
usually	4	1

E. Rosenberg self-esteem scale:

It was published by Abdou el Hafeez Moghadam in his book on statistics and psychometrics (1993:303).

This scale consists of a list of 10 statements, five of which are positive, and five of which are negative, this can be explained through the following table:

phrases	items	The answer	degree
Positive Phrases	1-3-4-7-10	I totally refuse	1
		I refuse	2
		I totally agree	3
		I agree	4

Negative phrases	The answer	Degree
2-5-6-8-9	I totally refuse	3
	I refuse	4
	I totally agree	1
	I agree	2

The scores are combined, and whenever the individual has higher marks, this indicates a high self -esteem, as the total score ranges: between 0-40 and the average is 20 and the following table show this more:

Registered degree	The meaning of the degree
10-19	Low self -esteem
20-29	Average self -esteem
30-40	High self -esteem

8. View and discuss results:

A. Presentation of the case:

- The name : M
- The age : 20years
- The gender : female
- The academic level : university
- The social situation: single
- Rank within the family : 02
- The type of disease : skin cancer
- The duration of the disease five months

B. Presenting the results of the Taylor anxiety scale and discussing them in light of the results of the scale and the clinical interview together :

After applying the Taylor anxiety scale to the case “M” the latter obtained a score of (37°), which falls between 30 and 50, and this indicates according to the scale, that there is severe anxiety in the case “M”.

After displaying the results of the Taylor anxiety scale for case “M”, which was estimated at 37°, it found that the case suffers from very severe anxiety.

What supported these results is what the case “M” said during the clinical interview about her constant concern due to her chronic illness, which she expressed as the shock of her life and that it completely changed the course of her life.

With regard to the behavioral level of the case “M”, only the results of the Taylor scale anxiety were evident on her, through her tension and stereotyped movement (playing with hands and feet during the interview ...).

All these behaviors were also reflected in their answers to the following items (15-16-21-26-40-44).

As for the cognitive level, it appeared through her negative thoughts about herself, her loss of self-confidence and society’s image of her as an adolescent with cancer, in addition to the situation’s fear and anxiety about the future, she indicated this through her statements during the clinical interview about her anxiety and fear of death, and this was also supported by her answer with the phrase “yes” to the following items (23-25-29-30-34).

With regard to the physiological level, a group of physical and tiring symptoms appeared in the case, such as feeling insomnia disturbed sleep and loss of appetite, and this is reflected in her answer to the following items (8-27-35-46).

C. Presenting the results of the beck test for depression and discussing them in light of the results of the test and the clinical interview together:

After applying the beck depression test on the case “M” she obtained a score of 40, which falls from 37 or above, and this indicates that the case suffers from very severe depression.

During the clinical interview with the case “M” signs of depression were evident on her through the gestures and expressions of her face (sadness and exhaustion)

This is supported by its recording of the highest score on the test, which was estimated at (3), and it recorded in the following axes (the theme of sadness, pessimism, fatigue and susceptibility to fatigue, preoccupation with health).

The case also scored two degree on the following axes (feeling of failure, constant crying, social withdrawal, sleep disturbance, weight loss).

In addition to registering the case for one degree on the following axes (anorexia, body image and figure).

Through the test results and the case’s statements during the clinical interview, it was found that she suffers from depression due to her illness, which made her lose her self-confidence and fear of the future and society’s view of her, the case also has negative thoughts, which led to a feeling of sadness, fear, despair and constant fear of death, the case also stated that she was no longer able to make decisions due to fatigue and psychological exhaustion caused by the disease.

D. Presenting the results of the Levin Stein Scale for the perception of psychological stress and discussing them in light of the results of the scale and the clinical interview together:

After collecting the sum of the results obtained in the Levin Stein Scale for the perception for psychological stress and after collecting the raw points from the direct and indirect items, the case “M” obtained a total score of 84, the psychological stress perception index was calculated through the following equation:

This score indicates the presence of a high level of psychological pressure in the case.

These results are supported by the appearance of anxiety, fear and frustration through the case’s answers during the clinical interview, and the excessive tension over her situation despite the support provided to her by her family, however the case stated that she does not want any one’s pity because of her illness and that she wants them to treat her the same way as any normal person, and because of their treatment of the situation, she feels inferior compared to others, and that she has obsessive thoughts and says that she will die as soon as possible, and she has a constant feeling that she will die.

As shown by the case answers to the following items (5-12-4) that the case sometimes feels lonely and that no one feels its suffering because her frustration and makes her isolated from others.

E. Presentation of the results of Rosenberg self -esteem scale and their discussion in light of the results of the clinical interview scale together:

After applying the Rosenberg Scale of self -esteem to case “M” she obtained a score of 17 which according to the scale falls between 10 and 19

degree, and this indicates a low level of self -esteem, only the key to the scale, this score indicates a very low self -esteem.

After conducting several clinical interviews with the case, it became clear that she is not satisfied with herself and that she feels inferior as a result of how others treat her after her exposure to the disease, and this has greatly affected her psychological and physical condition. In addition to the feeling of failure and uselessness due to her inability to participate in the simplest things due to her constant and severe fatigue.

9. Discussing the results under the formulated hypothesis:

Through the results obtained in clinical interview with case “M” and a set of scales and tests applied to it, which are the Taylor anxiety Scale, the beck depression scale, the Livin Stein psychological stress perception scale, and the Rosenberg weight self- esteem scale, we concluded that the case “M” suffers from severe to high anxiety with severe depression and a high level of psychological stress and negative self -esteem.

Through our field study and based on the most important previous studies, we can say that cancer negatively affects the psychological pension of the case.

This effect is shown through our consideration of the most important features of psychological pension for adolescents with cancer coinciding with the beginning of the diagnostic stage, which was characterized by fear, anxiety, shock, lack of acceptance, fear of death and the psychological stress it causes, making the case enter into a state of depression and lack of self -esteem.

All these results indicate the verification of the hypothesis of our study.

Conclusion:

We conclude the subject of our study with a call for more psychological and therapeutic support and care for the category of cancer suffers in general and the category of adolescent girls with cancer in particular this disease causes psychological pressures and negative effects that threaten their psychological, physical and even family stability, especially in a society like ours, were we find him dealing with a person with cancer either through neglect and denial or by over protection and pity for him, all this makes the patient unable to adapt to this situation and unable to control and

control his emotions with the stages and events he is going through and related to his disease (chemotherapy and psychological treatment). The psychological pension of a teenage girl with cancer is negatively affected as much as her physical aspect is affected and this leads to the emergence of a range of disorders such as anxiety and depression in addition to a high level of psychological stress and a low self-esteem.

References:

Muhammed, A. and Hussai, F.(2018), Psychological Pension for Women Diagnosed with Breast Cancer, Human Development Journal, 10th edition, March.

Nabulsi, A.B. (1991). Psychological Trauma- Psychology of Wars and Disasters, the First Edition, al Nahda for Printing and Publishing.

Davidson, G. and Neal J. (1996). ab Normal Psychology, 6th Edition, New York :Inc.

Abbas, F. (2002). Intelligence and Psychometrics, First Edition, Manhal Lebanese Publishing and Distribution.

Radwan, F.H. (2006).Health Disability, Cairo:Modern Books House for Publishing and Distribution.

Shuwaikh, H.A. (2007). Strategies to Relieve Psychological Stress Caused by Cancerous Tumors, Egypt: Atrak for Publishing and Distribution.

Hafeez, M.A. (1993). Statistics Ssychological and Educational Measurements with Models of Standards and Test, Algeria: University Press Office.

Khadija, Q. (2020). Body Image for a Woman with Breast and Uterine Cancer, a Dissertation for Obtaining a Master's Degree, Specializing in Clinical Psychology, University of Abdelhamid Ibn Badis, Mostaganem.

Aya, Q. (2013). Death Anxiety in an Adult with Cancer, a Dissertation for Obtaining a Master's Degree, Specializing in Clinical Psychology, University of Muhammad Khider, Biskra.

Taraj, S. (2013). Self-esteem and Ego Efficacy in an Adolescent with Diabetes, a Dissertation for Obtaining a Master's Degree, Specializing in Clinical Psychology, University of Muhammad Khider, Biskra.

Hajjaji, S.N. (2013). *Clinical Psychology for Children*, al Mesira for Printing and Publishing.

Yassin, S. (2015). *the Psychometric Efficacy of the Beck Scale for Anxiety on a Sample of Normal and Psychiatric Patients*, a Dissertation for Obtaining a Master's Degree, a Dissertation for Obtaining a Majister's Degree, Department of Psychological Measurement and Evaluation, Damascus University, Syria.

Freud, S. (1989). *Detection Symptom and Anxiety*, Translated by Othman al- Najati , First Edition, al Shourouk , Cairo.

Bakoush, K.A. (2014). *the Relationship Between Hope and Pain in a Sample of Cancer Patients, Algeria* :University Journal Volume 2, issue 16.

Werner, (1995). *Encyclopedia Psychology Dictionary*, Paris.