

Analysis of Cancer Control Policy in Surakarta

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ABSTRACT

Background: Cancer is the leading cause of death worldwide. The latest data from Globocan for 2020, there were 141.1 new cancer cases per 100,000 people in Indonesia, and there were 85.1 cancer deaths per 100,000 people. This study aims to analyze cancer control policies in Surakarta City.

Subjects and Method: This study uses a qualitative descriptive method carried out in the city of Surakarta from May to June 2023. This study uses a qualitative descriptive method of analysis conducted with data guidelines derived from interview documents and documentation. This study was conducted in the city of Surakarta in 2023. The location selection is the city of Surakarta. This study is a public policy study. Policy studies are studies related to policy formulation and formulation, policy implementation, policy performance, and policy environment.

Results: In general, there are policies that regulate cancer control. In general, all have carried out cancer control through promotive, preventive, curative efforts, there is a need for support from multi-sectors in cancer control.

Conclusion: There is a need for policy socialization and the role of multisector/multi-actors in cancer control policies in Surakarta, assistance to the community and the role of universities in cancer control, the importance of creating institutions that specialize in cancer control and the importance of advocacy and education about cancer control to the community and psychoeducation in families who have family members with cancer.

Keywords: policy analysis, control management, cancer

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BACKGROUND

Cancer is the leading cause of death worldwide, causing nearly 10 million deaths in 2020, or nearly one in six deaths occurring from cancer. Globally the most common types of cancer are breast, lung, colon, rectum, and prostate cancers. The prevalence of this cancer is increasing from year to year not

only in developed countries but also in developing countries and it is estimated that around 70% of cancer deaths occur in developing countries, including Indonesia (WHO, 2020). The three types of cancer with the highest incidence rate in Indonesia in 2020 are breast, lung, and colorectal cancer (colon and rectum). Lung cancer is the leading cause

of death in cancer clusters. Population growth, rising life expectancy resulting in growth in the elderly population (over 60 years old), lifestyle, and social and economic development, all contribute to the increasing burden of cancer, especially in low and middle-income countries including Indonesia (Mahanani, 2023).

According to the latest data from Globocan for 2020, there were 141.1 new cancer cases per 100,000 people in Indonesia, and there were 85.1 cancer deaths per 100,000 people. Cancer is the largest cause of death from non-communicable diseases, second only to cardiovascular diseases (heart and blood vessels). WHO data shows that 18.6% of the 686,532 premature deaths in Indonesia in 2016 were due to non-communicable diseases. Recent research found that 44.4% of cancer deaths globally in 2019 were caused by estimated risk factors, which include environmental, behavioral, and metabolic risk factors. These risk factors can be prevented with policies and behavior changes (Mahanani, 2023).

Cancer control in Indonesia has been widely carried out by both the government and non-government institutions, but it has not been carried out in an integrated, comprehensive and sustainable manner. The government has issued Regulation of the Minister of Health Number 1575/Menkes/Per/XI/2005 concerning organizations containing the establishment of a directorate for the control of non-communicable diseases (Hardiman, Noviani and Wahidin, 2007). In addition, Indonesia has a number of technical regulations to prevent cancer. Regulation of the Minister of Health Number 34 of 2015 and Number 29 of 2017 regulates the national control program for breast and cervical cancer. There is also a Decree of the Minister of Health Number HK.01.07/MENKES/14/2017 concerning the Indonesia Cancer Control Committee. Cancer as a non-

communicable disease is expected to be controlled by the formation of this unit. The incidence and mortality rate from cancer is increasing rapidly globally despite advances and innovations in cancer prevention and treatment efforts. The public needs to look at Indonesia's achievements in the national cancer control process, along with the steps that can be taken to accelerate the achievement of strategic goals. There are many technical regulations and actions from the government to prevent cancer, but the achievements of the program are not open. Based on the background and data above, we are interested in conducting an Analysis of Cancer Control Policy in Surakarta.

SUBJECTS AND METHOD

1. Study Design

The study method chosen in this study is a qualitative descriptive method. As part of the qualitative method, the qualitative descriptive approach includes the construction of social reality and cultural meaning, focusing on interactive processes, events, authenticity, not value-free, integrated theory and data, situational or contextual, and researcher involvement (Creswell, 1994). This study explores to find answers to the question of cancer control policy study in Surakarta.

2. Study Informant

The informants in this study were 4 informants and 1 triangulation informant from the Surakarta City Health Office, Karno Regional General Hospital, Surakarta City Health Center and Cancer Management Institutions in Surakarta

3. Study Instrument

The data collection strategy is carried out by collecting relevant documents (statistical data, policy draft documents, policy documents, issuance, and so on), conducting direct interviews with resource persons, and conducting special observation activities

carried out at the level of policy makers and implementers.

4. Data Analysis

The data analysis in this study uses the framework of Creswell (2013). This analysis involves working, organizing, breaking and synthesizing data as well as finding patterns, disclosing important things, and determining what is reported. The presentation of data is carried out by compiling a set of information, so as to provide the possibility of drawing conclusions and taking actions. The form of presentation of this qualitative data includes.

RESULTS

1. Cancer control policy

The government has a number of technical regulations to prevent cancer, one of which is the Regulation of the Minister of Health Number 34 of 2015 and Number 29 of 2017 which regulates the national control program for breast and cervical cancer as well as other regulations related to cancer control. This is in accordance with the results of in-depth interviews conducted with five informants about the disease control policy below:

DM (Informan 1):

"There is already a cancer control policy in Surakarta and this cancer is included in non-communicable diseases, we have made special efforts in implementing this policy both substantially and schematically"

HE (Informan 2)

"Cancer control policies already exist, especially in hospitals and have been implemented, control programs are carried out in general, activities begin by assessing risk factors for cancer"

AZ (Informan 3)

"This policy is in its implementation carried out with a program for the discovery and management of cancer patients, for example in cervical and breast cancer, where in the implementation of the policy

is carried out by training technical personnel for early detection and management of cervical and breast cancer as well as socialization of programs, policies at health centers follow directions from the Health Office, facilities and infrastructure also from the Office, The examination fee is free, only the people who do not want to come"

D (Informan 4)

"Every service already knows about the existence of a cancer policy, this cancer control should be carried out comprehensively starting from cancer prevention, early detection of cancer at an early stage, treating and curing cancer and improving the survival and quality of life of cancer patients"

All informants stated that there is already a policy on cancer control at the level of the Health Office, hospitals and health centers. The policy is in line with the National Cancer Action Plan which contains 13 strategies where the goals include increasing the number of standardized health care facilities, trained human resources, quality of health service delivery, patient safety and technology and resources throughout the provision of cancer care. This expression was supported by a triangulation informant who also stated that there was already a cancer control policy."

FM (Triangulation Informant)

"Cancer control policies already exist and in the implementation of cancer control have been implemented specifically both susceptively and schematically, however, in implementing these policies, support is needed from all levels of the sector and is implemented comprehensively which includes efforts to support screening and early diagnosis as well as effective and quality management. Policies at the health center have been given, human resources are already in each health center,

for infrastructure facilities already exist from the Health Office, procurement from the health office and free examination fees".

2. Problem stream of cancer control

Cancer is included in the list of non-communicable diseases that must be handled properly because it can cause a high rate of illness and death. Cancer is one of the leading causes of death worldwide, the high incidence of cancer shows the need for more effective prevention strategies, and the high cost of cancer treatment is also an obstacle for patients. This is in accordance with the results of in-depth interviews conducted with five informants about the flow of cancer problems below:

DM (Informant 1)

"Cancer control encompasses a number of issues that need to be addressed in an effort to reduce the incidence of cancer, improve early detection and improve care and support for patients affected by cancer."

HE (Informant 2)

"As a first-level health service, the things that are done to control cancer are by conducting early detection, for example, providing education to the community about SADARI or SADANIS and carrying out free IVA examinations or Pap smears on the condition that you bring a BPJS card"

AZ (Informant 3)

"Cancer patients sometimes do not want to do an examination because of the high cost if the patient does not have insurance or BPJS"

D (Informant 4)

"There needs to be support from both families and health workers in cancer patients to palliative care, and there

needs to be a special body that is concerned with cancer cases and cancer handlers in Surakarta"

From the results of interviews with the informants above, it can be concluded that there are several problem streams in controlling cancer, including early detection that is currently still focused on breast cancer and cervical cancer, high treatment costs for underprivileged patients, access to distant hospitals, the need for a special agency or institution that handles cancer control so that it can find out the incidence of cancer. This expression is supported by triangulation informants who state matters related to the problem stream of cancer control.

FM (Triangulation informant)

"In carrying out cancer control efforts, there is indeed a need for collaboration from all sectors, for example when doing early detection when doing a pap smear or REALIZE that many mothers or women are embarrassed to carry out a pap smear this is due to a lack of self-awareness, now this is also the task of health workers in the first level of services to provide counseling on the importance of early detection of cancer, In addition, for patients who do not have or do not have BPJS, they also feel that the cost of treatment is high, they are afraid to do an examination at the hospital even though there is already a convenience from BPJS, then most new cancer cases are diagnosed at an advanced stage, this makes treatment less effective. Limited cancer treatment facilities. environmental factors can also be a trigger in cancer control, for example, air exposure due to cigarette smoke and unhealthy lifestyles, it is hoped that there are special agencies or institutions that are really concerned about cancer cases and cancer control in collaboration with the CITY HEALTH

OFFICE and health services in Surakarta."

3. Policy stream in disease control

Cancer control includes various policies and initiatives implemented by the government and health organizations to address the problem of cancer. The Policy Stream in cancer control can cover a wide range of aspects including prevention, early detection, treatment, patient support, studies and funding. This is in accordance with the results of in-depth interviews conducted with five informants about the policy flow in cancer control below:

DM (Informant 1)

"We have carried out advocacy activities, we have also carried out socialization activities. Program programs from cancer control policies have been implemented, for example, carrying out screening programs for breast cancer and cervical cancer, providing promotional efforts about a healthy lifestyle, the existence of BPJS which can provide assistance for cancer treatment costs and this is also relevant in cancer control, but how else are there still many people who are still embarrassed to carry out examinations as early detection"

HE (Informant 2)

"If what is done here is an effort to implement the policy, among others, providing counseling to the community, providing early detection of SADARI, SADANIS and pap smear or IVA, making referrals to hospitals so that patients can get palliative care"

AZ (Informant 3)

"In hospitals, patients get screenings such as mammography or blood tests to detect cancer, provide support to patients and refer to higher hospitals for further treatment".

D (Informant 4)

"It is necessary to improve the smoke-free area, the existence of institutions or maybe we can collaborate with educational institutions to conduct research on cancer, the need for policies that support cancer studies, for example grants for pharmaceutical companies to develop cancer drugs"

From the results of interviews with the informants above, it can be concluded that the policy stream in controlling cancer includes early detection that is currently still focused on breast cancer and cervical cancer, support for cancer patients, education as a promotional effort, the need for government policies on cancer research and policies that support study funding. This expression is supported by triangulation informants who state matters related to the cancer control policy stream.

FM (Triangulation informant)

"Actually, many things need to be realized to implement cancer control policies, such as prevention, early detection and others. Currently, the program used for early detection is still centered on breast cancer and cervical cancer which is indeed the highest number of cancer cases for women, there are many things that need to be added, for example, there are institutions or governments that carry out studies on cancer, for example about the latest therapies to treat cancer, vaccine development, development of the latest drugs to treat cancer, besides that there may be a need for regulations in the use of chemicals or dangerous chemical products that can increase the risk of cancer"

4. Political stream in cancer control

Political stress in controlling cancer includes political factors that influence government policymaking and actions related to the prevention, detection, treatment, and support of patients against cancer. This is in

accordance with the results of in-depth interviews conducted with five informants about the Political Stream in Cancer Control below:

DM (Informant 1)

"The government has provided policy policies to carry out cancer disease control, maybe there can be additional funds to be allocated to cancer disease control, cancer data is also available in the distribution of non-communicable diseases spread across all sub-districts in Surakarta"

HE (Informant 2)

"The government has provided policy policies to carry out cancer control, maybe there can be additional funds to be allocated to cancer control, cancer data is also available in the distribution of non-communicable diseases spread across all sub-districts in Surakarta"

AZ (Informant 3)

"Hospitals as referral services have also implemented existing policies related to cancer, perhaps here additional infrastructure and resources are needed in handling cancer control"

D (Informant 4)

"Actually, another effort to control cancer is the existence of findings and statistical data that reflect the prevalence of cancer, so this can also affect political awareness and support for cancer control measures."

From the results of the interviews with the informants above, it can be concluded that the political stream in controlling cancer includes public financing, in this case the allocation of funds for the prevention and control of cancer, increasing resources and facilities and infrastructure to control cancer and the influence of research and data. The expression is supported by triangulation informants who state matters related to the political stream of cancer control.

FM (Informan triangulasi)

"Cancer needs full support from the government or advocacy holders, the government's commitment to support the cancer control program affects the direction of the policy, there is a need for additional infrastructure, as well as human resources to handle cancer control, for example in the health center who is responsible for the early detection of cancer only midwives or nurses, the latest findings and statistical data about the disease Cancer can also influence political awareness and support for cancer control measures"

5. Policy window in cancer control

The Policy Window in controlling cancer refers to the time or opportunity when political, social, and economic conditions create an environment that supports the adoption or change of cancer-related policies. The policy window appears when a number of factors converge, allowing for more likely policy changes. These factors could include changes in public opinion, political changes, the incidence of health crises, or support from advocacy groups. This is in accordance with the results of in-depth interviews conducted with five informants about the Policy Window in cancer control below:

DM (Informant 1)

"There is a public health campaign to increase public awareness about cancer risk factors and encourage government action to address it, the latest data that reveals the trend of increasing cancer is needed"

HE (Informant 2)

"What we do in health services is carrying out a kind of educational campaign to the community so that the community knows the risk factors for cancer and how to detect it early, providing opportunities for students who will conduct studies on cancer"

AZ (Informant 3)

"In the hospital, we collaborate with cancer survivors to provide education to the community so that they can carry out early detection of cancer"

D (Informant 4)

"Usually I do campaigns about cancer"

From the results of the interviews with the informants above, it can be concluded that the Policy Window in controlling cancer includes the existence of a public health campaign about cancer, trying to cooperate with surviving public figures to provide the campaign, in addition to the need for the latest data on cancer. The expression is supported by triangulation informants who state matters related to the Policy Window for cancer control.

FM (Informant triangulasi)

"The City Health Office has carried out efforts to realize existing policy policies, for example, providing campaigns to the community about public health, especially about cancer, always striving to provide the latest data on cancer incidence in the Surakarta City Health Office area and this is stated in the distribution of non-communicable diseases and is recorded in the health profile of the Surakarta City Health Office"

6. Policy entrepreneur in cancer control

Policy Entrepreneur in controlling cancer A policy entrepreneur is an individual or group that plays an active role in promoting certain policy ideas or solutions related to cancer. Policy entrepreneurs have an important role in shaping cancer policy and contributing to disease control efforts. With the existence of Policy Entrepreneurs, it can influence policymakers, change public opinion, and ensure that the issue of cancer gets the attention it deserves in the political arena. This is in

accordance with the results of in-depth interviews conducted with five informants about the Policy Window in disease control below.

DM (Informant 1)

"During the public health campaign, we invite public figures to help increase public awareness, as well as collaborate with the Surakarta city government"

HE (Informant 2)

"We are participating in the Community health campaign"

AZ (Informant 3)

"Inviting oncologists to provide medical insights and advocate for changes in treatment guidelines or standards of care"

D (Informant 4)

"Inviting researchers to conduct studies on cancer and forming organizations or patient advocacy groups that fight for cancer patients' rights, access to affordable care through campaigns"

From the results of the interviews with the informants above, it can be concluded that Policy Entrepreneurs in controlling cancer include public health campaigns about cancer, trying to collaborate with surviving public figures to provide the campaign, inviting researchers to conduct cancer studies. This expression is supported by triangulation informants who state matters related to Policy Entrepreneur cancer control.

FM (Informant triangulasi)

"We have continuously carried out the socialization process, the Health Office conducts campaigns about public health, especially about cancer, inviting community leaders or public figures to participate in the campaign."

DISCUSSION

In this study, the Stream Window Model by Kingdon was used where the analysis of cancer control policies in Surakarta was

carried out by analyzing cancer control policies, problem streams, policy streams, political streams, policy windows and Policy Entrepreneurs

1. Cancer control policy

The results of the study were obtained that all informants stated that there was already a policy on cancer control at the level of the health office, hospitals and health centers. The policy is in line with the National Cancer Action Plan which contains 13 strategies where the goals include increasing the number of standardized health care facilities, trained human resources, quality of health service delivery, patient safety and technology and resources throughout the provision of cancer care.

This is in accordance with (Ministry of Health, 2020) Regulation of the Minister of Health of the Republic of Indonesia Number 21 of 2020 concerning the Strategic Plan of the Ministry of Health for 2020-2024, one of the health efforts carried out by the government as a health effort step is the prevention and control of non-communicable diseases, namely cancer. This is a phenomenon experienced by most developing countries due to changes in the socio-economic status of people which leads to changes in lifestyle.

In addition, there is also the Regulation of the Minister of Health of the Republic of Indonesia Number 34 of 2015 concerning the Control of Breast Cancer and Cervical Cancer, which is a continuous public health service program in the field of breast cancer and cervical cancer that prioritizes promotive and preventive aspects to the community accompanied by curative and rehabilitative and palliative individual health services that come from the target community of the program and above individual initiatives themselves which are carried out comprehensively, effectively, and efficiently (Ministry of Health, 2015).

Health policy is included in one of the public policies. Health policy means all policies taken regarding the health sector. National health policy aims to improve the health and welfare of the population in a country, health policy describes the ways, provisions and behaviors carried out as an effort to improve public health goals (Saputra et al., 2023). Furthermore, the Minister of Health Regulation Number 34 of 2015 and Number 29 of 2017 concerning the national control program for breast and cervical cancer was issued to address the increasing burden of cancer. The main objectives of the program include health promotion through community involvement in primary prevention efforts and secondary prevention measures, such as expanded screening and early diagnosis. Also improve the referral system among primary health facilities.

In addition, based on the Decree of the Minister of Health Number HK.01.07/MEN-KES/14/2017 concerning the Indonesia Cancer Control Committee, the National Cancer Control Committee (KPKN) was formed which has the task of assisting the Ministry of Health in compiling and implementing the National Cancer Control Action Plan. The general goal of these cancer control policies is to reduce the incidence of illness and death due to cancer, extend life expectancy and improve the quality of life of cancer patients.

2. Problem stream of cancer control

From the results of interviews with informants, it can be concluded that there are several problem streams in controlling cancer, including early detection that is currently still focused on breast cancer and cervical cancer. Second, limited access to health services, especially in remote and rural areas. Many people in Indonesia do not have access to early detection, diagnosis, and treatment of cancer. The third is financial barriers, the high cost of cancer treatment

can be a big obstacle for many people to get treatment. Health insurance coverage through BPJS Kesehatan for cancer is limited, and the out-of-pocket costs can be very large, not to mention the high cost of non-medical treatment for underprivileged patients.

The fourth is the delay in the diagnosis of the Late Stage. Many cases of cancer are diagnosed at an advanced stage, making treatment less effective and reducing the chances of survival. This is partly due to a lack of awareness and a regular cancer screening program. Fifth, there are still limited adequate cancer treatment facilities. Lastly, preventive measures, such as public health campaigns that promote healthy lifestyles and cancer risk reduction, have not been widely implemented.

The fourth is the delay in the diagnosis of the Late Stage. Many cases of cancer are diagnosed at an advanced stage, making treatment less effective and reducing the chances of survival. This is partly due to a lack of awareness and a regular cancer screening program. Fifth, there are still limited adequate cancer treatment facilities. Lastly, preventive measures, such as public health campaigns that promote healthy lifestyles and cancer risk reduction, have not been widely implemented.

This is also in accordance with a study carried out by (Amelia, Fajriyah and Octaviani, 2019), that the policy is appropriate, in each Health Center already has trained and certified personnel IVA and CBE. Then for the infrastructure facilities are complete and the equipment comes from the Semarang Regency Health Office. In addition, funding comes from the budget of the District Health Office and the examination fee is free for all WUS in the Semarang Regency area. This is of course in accordance with the results of the input indicator assessment, namely "Very Good".

One of the Problem Streams is that exposure to carcinogenic substances in the workplace in Indonesia is the second highest after Thailand (Institute for Health Metrics and Evaluation [IHME], 2019). This problem is due to the lack of special regulations on the control of carcinogens in the workplace. This has an impact on the high death rate due to occupational cancer, so there is a need for regulations in the use of safe substitution materials in the workplace (Soleman, 2021).

3. Policy stream in cancer control

From the results of interviews with informants, it can be concluded that the policy stream in controlling cancer includes early detection that is currently still focused on breast cancer and cervical cancer, support for cancer patients, education as a promotional effort, the need for government policies on cancer research and policies that support study funding. The expression is supported by triangulation informants who state matters related to the policy stream of cancer disease control.

Prevention policies focus on strategies to reduce the incidence of cancer by addressing risk factors such as tobacco use, unhealthy diet, lack of physical activity, and exposure to carcinogens. To overcome this, the government can implement and enforce tobacco control policies, such as Smoke-Free Zones (KTR) and promote healthy lifestyles through public awareness campaigns.

As is well known, smoking is an epidemic that contributes to public health problems in the world and is a risk factor for most preventable deaths. The policy of implementing a No Smoking Zone (KTR) has been identified as the main intervention strategy for controlling non-communicable diseases (Rochka et al., 2019).

The early detection policy aims to encourage early detection of cancer through screening programs and efforts to increase public understanding. The government can

increase access to affordable and widespread screening services, then educate the public about the importance of early detection.

4. Political stream in cancer control

From the results of interviews with informants, it can be concluded that the political stream in controlling cancer includes public financing, in this case the allocation of funds for the prevention and control of cancer, increasing resources and facilities and infrastructure to control cancer and the influence of research and data.

Political Streams in cancer control that influence government policymaking and actions related to prevention, detection, treatment, and patient support for cancer are groups that have interests in the health industry, pharmaceutical companies, insurance, or patient advocacy groups can have significant political influence in cancer-related decision-making. This is in accordance with a study conducted by (Wulandari and Suwanda, 2019) the role of the NGO Ecoton in an effort to fight for the community's environmental rights where the results of the study show that: (1) the role of the NGO ECOTON in an effort to fight for the environmental rights of the community in the Brantas watershed includes participatory study programs such as through bio-cultural activities, education to the community such as activities with the concept of zero waste cities that create an environment waste-free, and environmental advocacy to the government through protests and lawsuits and assistance, (2) the challenges faced are the lack of individual awareness about the environment and differences of opinion and interests with the government.

Political Stream in cancer control, one of which is the influence of studies and data, scientific study findings, and statistical data that reflect the prevalence of cancer and its impact can affect political awareness and support for cancer control measures. This is

in accordance with a study conducted by (Binabar and Ivandari, 2018) which resulted in the recording of cancer patients so far. The recording can later be used to analyze and detect other patients who have the same characteristics. The results of the study show that KNN with a k value of 13 has the best accuracy level of 97.28% with an error value of 1.5% and a micro value of 97.28%.

5. Policy window in cancer control

From the results of interviews with informants, it can be concluded that the Policy Window in controlling cancer includes a public health campaign about cancer, trying to collaborate with surviving public figures to provide the campaign, in addition to the need for the latest data on cancer.

Public awareness campaigns and advocacy efforts can generate support for cancer control policies and create a policy window. Collaboration with advocacy groups, health professionals, and influential individuals to raise awareness about cancer and advocate for policy change. Engage the media to reinforce the message. Events involving influential people such as celebrities or indwellers or public figures can help raise the profile of cancer as a public health problem.

One of the Policy Window in cancer control is the latest epidemiological data which is new data that reveals an increasing trend in cancer incidence or urgent needs in cancer control can open a policy window. This is in accordance with a study conducted by (Isna and Trisna, 2020) which obtained the results that the risk factors that affect the occurrence of cervical cancer can be seen that from the demographic characteristics there are 3 characteristics that are at risk of cervical cancer, namely from parity, education level and employment status. Meanwhile, from other risk factors that affect the occurrence of cervical cancer, it can be seen from the age of marriage that is too early and the history of previous vaginal discharge. The findings of

this study can be information for the public to be able to prevent cervical cancer in women through improving personal hygiene, especially in the female area. In addition, women also need to understand the importance of nutrition in maintaining immunity status to prevent exposure to infectious agents that cause cervical cancer.

Strong study findings and data on cancer prevalence, trends, and the economic burden of cancer can provide a compelling reason for policymaking. Having up-to-date and comprehensive data can create a policy window. Cancer studies and data collection are important to build a strong evidence base for policy recommendations.

6. Policy entrepreneur in cancer control

From the results of interviews with informants, it can be concluded that Policy Entrepreneurs in controlling cancer include public health campaigns about cancer, trying to collaborate with public figures who survive to provide the campaign, inviting researchers to conduct cancer studies.

In the context of cancer disease control, a policy entrepreneur is an individual or group that plays an active role in promoting certain ideas or policy solutions related to cancer, one of which is a patient advocacy group. This is in accordance with a study conducted by (Sahara, 2020) and the results showed that there was a strong and positive relationship between social support and the peace of mind of cancer survivors in the Cancer Information and Support Center (CISC) Jakarta community with a significance value of 0.000 or less than 0.05 and a Spearman Rank correlation value of 0.740. This means that the greater the social support, the greater the peace of mind of cancer survivors at the Cancer Information and Support Center (CISC) Jakarta Community. The support of external factors related to peace of mind is social support including

emotional support, award support, instrumental support, information support and group support.

Policy entrepreneurs advocate for specific policies to promote evidence-based policies that address various aspects of cancer control, such as tobacco control and cancer screening programs. Furthermore, the dissemination of information through data and study findings. This information helps policymakers make informed decisions regarding cancer control policies. Policy entrepreneurs can also mobilize support from cancer survivors, patients, nurses, and the concerned community to build public awareness through awareness campaigns, public education, and media outreach.

AUTHOR CONTRIBUTION

Hanung Prasetya is the principal researcher who selects topics, searches and collects study data. Dodet Aditya Setyawan, Sudiro, Budi Utomo, Farahdila Mirshanti, and Ahmad Azmiardi analyzed and reviewed the study documents.

CONFLICT OF INTEREST

There was no conflict of interest in the study.

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