Helping Children and Parents Cope with Pediatric Cancer: From Diagnosis to Survivorship

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Background

• Treatment of pediatric cancer is a medical success story

• Pediatric cancer exerts a strong psychological toll on children and on their families
  - **(Kids)** → problems with self-esteem, anxiety, depression, school performance, and social competence (“fitting in”)
  - **(Caregivers)** → Prolonged elevated anxiety, depression, post-traumatic stress symptoms
• Treatments that children receive for cancer are often described as “worse than cancer itself”
  - Painful, invasive, and frequent

• There is substantial variability in how parents and child react to treatment procedures

• Our research seeks to understand why some parents and children cope better than others and design interventions to help families
Understanding Families

• Studying ~ 100 children and caregivers from the time of child’s cancer diagnosis

• Observed children and parents 6 times over the course of 2 years
  - 3 video-recordings of treatment procedures
Resource model

• A family’s ability to successfully cope with stressful events depends on the resources available to them

• Resources can range from the practical (e.g., transportation, insurance) to a person’s enduring psychological attributes

• Children and parents with higher levels of personal resources show better short- and long-term psychosocial adjustment to cancer
<table>
<thead>
<tr>
<th><strong>“Resources” (+)</strong></th>
<th><strong>“Deficits” (-)</strong></th>
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Current Study

• Intervention #1: Caregiver self-efficacy
  - Based on principles of Motivational Interviewing
    • Goal-oriented approach
    • Teaches parents tools to help child cope
    • Focuses on facilitating but not “pushing” change

- Increase parents’ confidence to care for child
- Protect against negative long-term outcomes
- Improve parent and child reactions to treatment
Next steps

• Intervention #2: Family Check-Up
  - Flexible approach to helping parents and children
  - Assesses the needs of each individual family
  - Tailors treatment to areas where it is most needed

• Pressing issue in intervention research
  - “One size fits all” interventions
    • Each family has unique needs and resources
    • Providing the same treatment to all families is neither an effective use of resources nor helpful for families
Next steps

• Study #3: Understanding Life After Cancer
  - Long-term follow-up of survivors and their families
    • Continue to observe same ~100 families
    • Currently 5-years post-diagnosis
    • Focus on children as they approach adolescence
  
  - Adolescence is a difficult developmental transition for “healthy” children
    • Despite high rates of survivorship, research has been limited to adult survivors (18-39 years old)
    • Critical need to understand the unique issues facing survivors and families during this transition
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Publications


