

# When a Mother Has Cancer: Myriad Issues for Children and Adolescents

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Oncology nurses caring for women with cancer must be aware that many of these patients are mothers of young children and adolescents. Common issues for children dealing with a parent's cancer include worrying about their family's future and changes in their mother's health status. Adolescents share these concerns, along with uncertainties over changes in their responsibilities and demands at home. Teens also deal with interference in maintaining their independence and the

cancer treatment provides children with a "buffer" and acts as a protective factor against depression and other emotional issues (Vannatta et al., 2007).

## To Tell or Not to Tell

Parents may ask an oncology nurse for advice on whether they should share the news of a diagnosis with their children as well as how much or how little information should be given. Some may even ask, because oncology nurses are professionals, "Can you tell them for me?" How you respond is based on your personal, ethical, and professional beliefs. Optimally, the responsibility of informing children about a

parent's cancer diagnosis, treatment, and outcome should be that of the parents themselves. Undeniably, the task is challenging for most parents, particularly when they may be emotionally fragile and attempting to cope with

the news themselves. In many instances, parents can benefit from the involvement of members from their medical team, including nurses, physicians, social workers, and psychologists.

## Developmental Stages

When children are told and how much information they are given depends, in large part, on their age and development.

Oncology nurses recognize that how children respond to their parent's cancer is influenced by age; therefore, understanding their experiences as related to developmental stages is helpful (Turner et al., 2007). Distinct differences exist in the cognitive, emotional, and social development of children and adolescents, and as such, taking a closer look at the stages is important. Although understanding the experiences of youth as related to their development is helpful, the following information should be considered generalized guidelines rather than absolutes.

### Ages 3–5

During this age period, children generally are unable to communicate their emotions and, as a result, may resort to regressive behaviors such as bedwetting. This stage is distinguished by egocentric thinking; therefore, these children have difficulty comprehending other's viewpoints and typically maintain a self-centered perspective (Thomas, 2000). Consequently, they worry about themselves becoming sick and may ask, "Can I catch cancer?" They may need constant reassurance from their parents and encouragement to help express emotions.

### Ages 6–8

Cognitively, young children in this stage may engage in magical thinking and believe their mother's cancer is their fault because, for example, they hoped

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time they spend in activities with friends (Vannatta, Grollman, Noll, & Gerhardt, 2007). Therefore, adolescents may often find themselves in situations in which they are providing care for younger siblings and offering support to their sick parent, rather than the other way around.

Positive family functioning can help to improve the mental health of children and adolescents during their parent's cancer treatment. Some studies have indicated that open communication and flexibility among family members are key characteristics of optimal coping during this time of stress (Lindqvist, Schmitt, Santalahti, Romer, & Piha, 2007). In addition, maintaining close friendships during a parent's

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