

Symptoms and Self-Management Strategies Identified by Children With Cancer Using Draw-and-Tell Interviews

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PURPOSE: This cross-sectional study described how school-aged children with cancer represent their symptoms and associated characteristics using draw-and-tell interviews.

PARTICIPANTS & SETTING: 27 children aged 6–12 years receiving treatment for cancer at the Cancer Transplant Center at Primary Children’s Hospital, a tertiary pediatric hospital in Salt Lake City, Utah.

METHODOLOGIC APPROACH: Children participated in draw-and-tell interviews while completing drawings depicting days when they felt well and days when they felt sick. Children’s drawings and accompanying explanations were analyzed qualitatively.

FINDINGS: Children’s drawings related symptoms and the strategies children used to self-manage those symptoms. Nausea, fatigue, pain, and sadness were the most frequently reported symptoms. Strategies to manage symptoms most often included physical and psychosocial care strategies.

IMPLICATIONS FOR NURSING: Children with cancer were able to relate detailed descriptions of their symptoms and symptom self-management strategies when presented with developmentally sensitive approaches. Healthcare providers are well positioned to integrate arts-based approaches to symptom assessment and to support children in implementing their preferred strategies to alleviate symptoms.

KEYWORDS pediatric patients; arts-based approach; draw-and-tell interview; symptom management; cancer
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More than 10,000 children aged younger than 15 years are diagnosed with cancer in the United States each year (Siegel, Miller, & Jemal, 2018). These children are developmentally diverse, ranging from pre-verbal infants to young adolescents with the capacity to think abstractly. Children’s developmental abilities also influence the manner in which they articulate and respond to their symptoms (Linder, 2008). Although children as young as four years old are recognized as being capable of providing self-report their symptoms, resources to support children in relating their symptom experiences are limited.

Elementary school-aged children, those aged 6–12 years, are developing the ability to represent events mentally and symbolically. Maturing reasoning abilities allow children to form relationships between things and ideas, as well as to think through actions and anticipated consequences (Rodgers, 2011). In contrast to adults, who tend to use external, verbal cues to recall information, children tend to recall and communicate information through internal cues, which are supported through activities that involve the use of the senses. The majority of resources for eliciting children’s self-report, including self-report of symptoms, however, are based on adult versions of tools that rely on external, verbal prompts for recall of information. In addition, these self-report tools provide limited opportunity to explore children’s perspectives of the context in which they are experiencing symptoms and the meanings they attach to their symptoms. Alternative approaches to obtain an understanding of children’s experiences to inform clinical interventions are needed.

Symptoms in Children With Cancer

Challenges in understanding children’s symptom experiences are evident in qualitative and quantitative