



Psychological Impact of Childhood Cancer

Cancer is the leading cause of death caused by disease in children under the age of 15. Every year, approximately 9,000 children are diagnosed with cancer and approximately 1,500 die as a result of the disease.

However, each year, more and more children are survivors of cancer. More than 70 percent of children with cancer survive the disease. These children may experience medical and physical effects, psychological effects, and cognitive and neuropsychological effects, all of which can impact their experience transitioning back into the lives and routines they had prior to diagnosis. Therefore, mental health interventions are vitally important in helping children and their families cope adaptively to ensure positive long-term adjustment.

The Psychological Impact on the Child

- The physical symptoms of cancer and the treatment of it can have serious social and emotional consequences for the child. Research indicates that the negative perception of self-appearance often found in children with cancer is associated with academic, social, and psychological impairment, low self-esteem, and symptoms of depression.
- The traumatic experience of having cancer places children at significant risk for a range of short- and long-term social, emotional, and behavioral difficulties. The chronic strains of childhood cancer, such as treatment-related pain, visible side effects such as hair loss, weight gain or loss, physical disfigurement, and repeated absences from school and peers, negatively impact children's social and psychological adjustment.
- Children with cancer and survivors of childhood cancer may experience: severe anxiety, inhibited and withdrawn behavior, behavior problems, excessive somatic complaints, intense stress, post-traumatic stress disorder (PTSD), academic difficulties and surrounding frustration, peer relationship difficulties, and worries about the future in relation to career and relationships.
- Research indicates that childhood cancer survivors also experience academic difficulties that contribute to social and emotional maladjustment. Contributing to the learning problems which many students with cancer face is the high rate of absenteeism that may result from hospitalizations, treatments, and treatment side effects. Children with leukemia report missing between 10 to 20 weeks of school in one year, and as a result, many of them repeat grades.
- Furthermore, when a child is out of school for a long period of time, he or she may experience reactions such as depression, apathy and poor self-concept.

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The Psychological Impact on the Family/Caregivers

- Family members of a child with cancer often suffer various forms of distress with regards to the child's illness. Parents report feelings of anxiety, depression, symptoms of PTSD, and distress related not only to the child with cancer, but also to the adjustment of the child's siblings.
- Siblings also report feeling anxious, stressed, overwhelmed, neglected, and guilty.

Promising Results for Psychosocial Interventions

- Early signs of emotional distress and symptoms of posttraumatic stress require early assessment and intervention to minimize negative impact for the child and his or her family.
- There are numerous factors and interventions, which seem to predict better psychological adjustment for children with cancer. For example:
 - Having high levels of support from the family, classmates, the school, and the hospital predicts better adjustment.
 - Research has also shown promise in the effectiveness of cognitive-behavioral interventions for children, parents, siblings and the family as a whole, which include teaching effective coping strategies for children, targeting social skills development, group therapies alleviating sibling emotional and behavioral problems, and improving overall and long-term family functioning via family therapy.

References

- Barakat, L. P., Kazak, A. E., Gallagher, P. R., Meeske, K. & Stuber, M. (2000). Posttraumatic stress symptoms and stressful life events predict the long-term adjustment of survivors of childhood cancer and their mothers. *Journal of Clinical Psychology in Medical Settings*, 7(4), 189-196.
- Barrera, M., Chung, J. Y. Y., & Fleming, C. F. (2004). A group intervention for siblings of pediatric cancer patients. *Journal of Psychosocial Oncology*, 22(2), 21-39.
- Fuemmeler, B. F., Elkin, D. T., Mullins, L. L. (2002). Survivors of childhood brain tumors: Behavioral, emotional, and social adjustment. *Clinical Psychology Review*, 22, 547-585.
- Hoekstra-Weebers, J., Heuvel, F., Jaspers, J., Kamps, W. & Klip, E. (1998). Brief report: An intervention program for parents of pediatric cancer patients: A randomized controlled trial. *Journal of Pediatric Psychology*, 23(3), 207-214.
- Kazak, A. E., Simms, S., Barakat, L., Hobbie, W., Foley, B., Golomb, V., & Best, M. (1999). Surviving cancer competently intervention program: A cognitive-behavioral and family therapy intervention for adolescent survivors of childhood cancer and their families. *Family Process*, 38(2), 175-191.
- McDougal, S. (1997). Children with cancer; Effects and educational implications. *Pediatric Oncology Resource Center*. Speechley, K. N. & Noh, S. (1992). Surviving childhood cancer, social support, and parents' psychological adjustment. *Journal of Pediatric Psychiatry*, 17, 15-31.
- Zebrack, B. & Walsh-Burke, K. (2004). Advocacy needs of adolescent and young adult cancer survivors: Perspectives of pediatric oncology social workers. *Journal of Psychosocial Oncology*, 22(2), 75-87.