

Patterns of Response in Parents of Children With Cancer: An Integrative Review

Carla Cerqueira, MSc, RN, Filipe Pereira, MSc, PhD, RN,
and Maria do Céu Barbieri Figueiredo, MSc, PhD, RN

Cerqueira is an associate professor, and Pereira and Barbieri Figueiredo are coordinator professors, all at the Higher School of Nursing of Porto in Portugal.

No financial relationships to disclose.

Cerqueira, Pereira, and Barbieri Figueiredo contributed to the conceptualization and design and analysis. Cerqueira and Barbieri Figueiredo completed the data collection and contributed to the statistical support and manuscript preparation.

Cerqueira can be reached at carlacerqueira@esenf.pt, with copy to editor at ONFEditor@ons.org.

Submitted February 2015. Accepted for publication May 12, 2015.

Key words: family caregivers; parents; child; cancer; integrative review

ONF, 43(2), E43–E55.

doi: 10.1188/16.ONF.E43-E55

Problem Identification: To identify patterns of response of parents in relation to taking care of their child with cancer.

Literature Search: The search was performed using CINAHL® and Scopus in February 2013.

Data Evaluation: The selection process resulted in 18 articles with a wide range of methodologic approaches. The description of the research methods of each study and the relevance of the results in comparison to the purpose of this review were established as assessment criteria.

Synthesis: The results of the studies were analyzed using Meleis's Transition Theory, identifying a vast number of patterns of response developed by the parents. These patterns of response were analyzed, compared, and split into four themes.

Conclusions: Using this methodology, a wide range of behaviors, attitudes, and competencies associated with the circumstance of parents caring for a child with cancer could be identified.

Implications for Practice: Knowledge of the patterns of response will enable nurses to lead parents through a healthy transition process in caring for their children with cancer.

After receiving the diagnosis of a serious illness in a child, parents are faced with the loss of the child's health and the risk of the child dying. Young, Dixon-Woods, and Heney (2002) state that the cancer diagnosis of a child is the beginning of a process that will trigger a major transition in the family. Family members will have to reorganize themselves, and plans and expectations have to be adapted to the circumstances of having a child with cancer (Silva, 2009). The child's condition means that an adult takes on the responsibility for monitoring, managing, and providing the more complex care needed. The mother is usually the main caregiver when a child is diagnosed with cancer (Relvas, 2007; Wegner & Pedro, 2010).

According to Young et al. (2002), becoming the parent of a child with cancer implies a transition process, which involves redefining one's own identity. Parents will undergo experiences that lead to the reconstruction of their identity. Transition Theory provides a framework for understanding this process as a whole (Meleis, 2010; Meleis, Sawyer, Im, Messias, & Schumacher, 2000). Previous studies by the authors of the current article have revealed that parents caring for a child with cancer go through a transition that involves the redefinition of their identities (Cerqueira & Barbieri, 2012; Silva, 2009; Silva & Barbieri-Figueiredo, 2011).

Meleis et al. (2000) state that such a transition can take different paths; therefore, recognizing the signals that mark the direction of a transition is important. Early recognition of whether the parent and patient are undergoing a healthy process or are in a vulnerable state enables preventive action to steer them toward a successful