

Pediatric patients undergoing treatment for oncology diagnoses are likely to experience stress, anxiety, and social isolation. One role of a pediatric oncology nurse is to incorporate play into daily hospital routines. By using medical and normative play, nurses can decrease distress and promote normal growth and development. However, the use of play is not limited to pediatric patients. Oncology nurses who work with adults can incorporate similar strategies within their patient populations to reduce anxiety and stress and to improve quality of life.

AT A GLANCE

- Patients with cancer are highly likely to experience distress during treatment.
- Nurses in all oncology settings can incorporate activities like play into patients' daily routines to alleviate stress and anxiety.
- Reducing patient stress increases treatment adherence, promotes positive coping abilities, and improves quality of life.

KEYWORDS

pediatrics; oncology nursing; play; distress

DIGITAL OBJECT

IDENTIFIER

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Creative Play

A nursing intervention for children and adults with cancer

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Children with oncology diagnoses are particularly vulnerable to distress within the hospital setting. Sources of distress include isolation from peers and family members (Christiansen et al., 2015) and anxiety related to constant procedures and treatments (Burns-Nader & Hernandez-Reif, 2015). In addition, disease symptoms, treatment side effects, and disruptive hospital routines increase children's stress (Linder & Seitz, 2016). Unaddressed sources of discomfort increase pain and anxiety, decrease children's compliance with medical interventions and willingness to engage in self-care, and promote ineffective coping (Flowers & Birnie, 2015; Steele, Mullins, Mullins, & Muriel, 2015).

The American Academy of Pediatrics and the Association of Pediatric Hematology/Oncology Nurses endorse guidelines on providing developmentally appropriate care geared at alleviating distress among hospitalized children and are considered a quality indicator (Committee on Hospital Care and Child Life Council, 2014; Mattie Miracle Cancer Foundation, 2015). Because play is the work of the child, every interprofessional team member should incorporate it into interventions and care (Burns-Nader & Hernandez-Reif, 2015). However, the use of play is not limited to the pediatric patient population. Adult patients with cancer may benefit from playful interventions designed to alleviate distress (Brand, Pickard, Mack, & Berry, 2016). Distress encompasses emotions such as vulnerability, anger, sadness, and anxiety, as well as physical symptoms and spiritual crises that can

impede a patient's treatment. Most adults with cancer feel distressed multiple times throughout their treatment (National Comprehensive Cancer Network [NCCN], 2018). The NCCN (2018) recommends that providers screen all patients for indicators of distress. Identifying distress and intervening are essential oncology nursing functions. Because nurses are a constant presence at the bedside, they provide most of the direct patient care and are ideally situated to initiate these interventions for pediatric and adult patients.

Examples of Pediatric Play in the Oncology Setting

Unstructured or normative play consists of activities children characteristically partake in outside of the hospital, including board and card games, puzzles, arts and crafts, and other toys. Unstructured play is important, particularly in the hospital setting; it is crucial for children's normal cognitive, physical, social, and emotional development (Burns-Nader & Hernandez-Reif, 2015). In addition, hospitalized children experience enhanced unstructured play when it involves family and friends, which provides a sense of companionship, security, joy, and comfort (Christiansen et al., 2015). For example, E.M., a 4-year-old girl diagnosed with rhabdomyosarcoma, was hospitalized for extended periods of time. Often, she became bored when confined to her room and the unit. Nurses recognized E.M.'s unhappiness and found time to engage her and her family in water-gun fights, E.M.'s favorite pastime outside of the hospital, in the unit hallways. At times, these water-gun fights would last as long