

Effects of a Web-Based Pediatric Oncology Legacy Intervention on Parental Coping

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OBJECTIVES: To examine the effects of a legacy intervention for children with advanced cancer and their parents on parental coping strategies.

SAMPLE & SETTING: The authors recruited 150 children with advanced cancer and their parents via Facebook.

METHODS & VARIABLES: Child–parent dyads were randomly assigned to the intervention or usual care. Children in the intervention group created electronic digital storyboards to assist in documenting their legacies. Parents completed the Responses to Stress Questionnaire at baseline/preintervention (T1) and postintervention (T2). Linear regressions were used to test for differences between the groups in the amount of change from T1 to T2 for each parent coping score.

RESULTS: Although not statistically significant, the legacy intervention showed trends toward increasing use of primary control and disengagement coping strategies in parents over time relative to usual care.

IMPLICATIONS FOR NURSING: Nurses can help to facilitate opportunities for parents to use adaptive coping strategies. More work is needed to determine how legacy interventions in pediatric oncology can facilitate adaptive coping strategies for parents of children with cancer.

KEYWORDS parents; coping skills; web-based intervention; pediatric oncology

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The diagnosis of advanced (i.e., recurrent or refractory) childhood cancer can foster uncertainty and emotional distress for parents. Parents may experience symptoms of depression and anxiety, lower self-competence, and social isolation, and have high levels of stress (Neu et al., 2014; Olagunju et al., 2016; Rosenberg et al., 2013; Sherief et al., 2015). These consequences can lead to parental distress (Masa'deh & Jarrah, 2017), marital disruptions (Wiener et al., 2017), family financial strain (Lindahl Norberg et al., 2017), and job loss (Hovén et al., 2017; Lindahl Norberg et al., 2017). Parents must cope with their own emotional distress while focusing on their role of meeting their child's physical, spiritual, and emotional needs (Hinds et al., 2009). Parental coping toward those challenges makes significant impacts on children's well-being and entire family integrity (Darlington et al., 2018; Isokääntä et al., 2019). In addition, there is a growing need for supportive interventions for both parents and children with cancer as they share distress (Robb & Hanson-Abromeit, 2014).

Legacy-making, or actions or behaviors aimed at being remembered, is one strategy that may help to decrease suffering of patients with serious, advanced conditions and their family members (Akard et al., 2013; Akard, Wray, et al., 2020; Foster et al., 2009). Although legacy interventions have attracted attention in palliative care fields in various forms, such as dignity therapy, life review, and personal narrative interventions, these methods have been mainly used in adults with life-threatening conditions (Brožek et al., 2019; Kittelson et al., 2019; Roikjær et al., 2019; Vuksanovic et al., 2017). Outcomes of adult legacy interventions have included improved dignity, meaning and purpose, will to live, and generativity, and decreased suffering and depressive