

## Family distress

BETTER COMMUNICATION TO SUPPORT PATIENT AND FAMILY WELL-BEING

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### STUDY SUMMARY: The Family Member Problem Checklist

Mehta A, Thibodeau K, Laizner A. Assessment and Interventions to support optimal family functioning. Presented at CAPO 2018, Abstract S162.

This symposium discussed a tool used to assess sources of distress in the family when a person is diagnosed with cancer, and interventions to help support family functioning by facilitating communication. Given the complexity of distress across the entire family, there is a growing need to identify the underlying sources of distress within the family. A clinical screening assessment tool, the Family Member Problem Checklist (FMPC), was designed to identify sources of distress in family members. The FMPC has demonstrated a clear connection between caregiver distress and caregiver burden. Higher levels of caregiver burden have been shown to be predictive of psychosocial problems, such as depression and anxiety, which could have lasting implications on quality of life.

An intervention for children, Theraplay®, was introduced as a way to promote positive psychosocial wellbeing in children by helping them express themselves in interaction with a parent who has been diagnosed with cancer. A number of developmentally appropriate interactive games and activities can be played by the child and parent, each built on 4 key principles: structure, engagement, nurture, and challenge. Combining these 4 principles provides children with a unique means of communicating with their parent, which could in turn also increase the child's understanding of their parent's cancer experience.

Children often require psychosocial interventions to interact with a parent who has been diagnosed with cancer and cope with their own emotions. Specifically, treatment side effects such as fatigue and nausea can make it challenging for parents to engage in quality interactions with their

children. Previous research has shown that children have an increased risk for developing psychological problems when family functionality decreases. Thus, the wellbeing of all members of the family, including the parent diagnosed with cancer, must be carefully considered when evaluating whole-family functionality. Prior research has found that mothers frequently report on behalf of the family in studies examining family functioning and wellbeing when a parent has cancer. However, current research is exploring the perspectives and experiences of multiple family members and is revealing significant levels of distress and anxiety in children and spouses, highlighting the importance of interventions to alleviate psychosocial difficulties in all family members.

**COMMENTARY:** Cancer affects not just the individual receiving the diagnosis, but their entire family. With approximately 1 in 2 Canadians receiving a cancer diagnosis in their lifetime,<sup>1</sup> a vast number of family members are also affected by cancer. According to the National Comprehensive Cancer Network (NCCN) Guidelines for Patients,<sup>2</sup> coping with cancer in the family is a difficult process and can often cause distress, resulting in physical and psychological symptoms. Thus, it is crucial to develop a holistic understanding of familial distress after a member of the family receives a cancer diagnosis. Distress management is considered standard of quality cancer care, and the Institute of Medicine (IOM) created a treatment model for distress that includes screening, treatment and followup care.<sup>2</sup>

Common validated and reliable assessment tools for distress include the Distress Thermometer, the Edmonton Symptom Assessment System (ESAS) and the Canadian Problem Checklist (CPC), among others. The FMPC is a unique, comprehensive screening tool that was developed to assess for sources of distress and family functionality when a family member has cancer.

# LANDMARKS

When caring for a family member with cancer, people can experience a wide array of psychosocial and physical stress, depending on the severity of the cancer and care needs.<sup>3</sup> Edwards and Clarke<sup>4</sup> suggested there are common factors that affect family distress levels, based on similar accounts of distress between family members. These researchers found that acting openly, directly expressing feelings and solving problems was associated with lower depression levels, and direct communication was linked to lower anxiety among family members.<sup>4</sup>

Children who are able to effectively communicate and express themselves with their ill parent experience reduced psychosocial distress. Some children require help in com-

municating their feelings to their parent, which emphasizes the need to have different modalities (e.g. Theraplay®) available to children and their families to help them cope when a parent has cancer.

Morris, Martini and Preen<sup>5</sup> found that parent coping depends on how well their children are coping. From a parent's point of view, it can be extremely difficult to communicate, in an age-appropriate manner, the psychosocial and physical symptoms they are experiencing from cancer or its treatment. Thus, it remains important to consider interventions such as Theraplay® that may help parents talk to their children about cancer. Overall, developing screening tools and targeted interventions for vulnerable families affected by cancer is crucial, given that all family members are susceptible to experience distress.

## IN BRIEF

### Already known

- A cancer diagnosis affects the patient's whole family, and children are at risk if family functioning decreases.

### What this study showed

- An intervention for children called Theraplay® promoted communication with the parent.

### Next steps

- Further develop and research the impact of screening tools and interventions for family members and especially children.

### References:

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3. Northouse L, Katapodi M, Schafenacker A, Weiss D. The impact of caregiving on the psychological well-being of family caregivers and cancer patients. *Semin Oncol Nurs*. 2012;28(4):236–45.
4. Edwards B, Clarke V. The psychological impact of a cancer diagnosis on families: the influence of family functioning and patients' illness characteristics on depression and anxiety. *Psycho-Oncology*. 2003;13(8):562–76.
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