



Psychoeducation in improving psychological support for caregiver of childhood cancer: literature review

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ABSTRAK

Latar Belakang : Kanker adalah suatu penyakit yang ditandai dengan pertumbuhan sel yang tidak terkendali dan menyebar ke bagian lain dari tubuh atau menyebar ke organ lain. Kanker juga menjadi masalah utama pada anak-anak tidak hanya pada orang dewasa. Penyakit kanker pada anak merupakan penyakit kronik dan memberikan respon kepada orang tua/caregiver. Respon psikologis dan emosional yang terjadi dapat menimbulkan ketegangan dan stress pada orang tua.. Salah satu intervensi yang dapat dilakukan untuk mengurangi masalah psikologi adalah psiko edukasi. Psikoedukasi keluarga merupakan bentuk dari terapi modalitas dengan fokus pengobatan adalah pada keluarga. Tujuan dari literatur review ini adalah untuk menganalisis psiko edukasi dalam meningkatkan dukungan psikologis caregiver kanker anak.

Tujuan : Mengetahui bentuk dan pengaruh psikoedukasi dalam meningkatkan dukungan psikologis pada caregiver kanker anak

Metode : Metode yang digunakan adalah systematic review. Pencarian Literatur menggunakan database Proquest, Pubmed, Google Scholar, dan Science Direct, dengan kata kunci caregiver or parent or family and pediatric cancer or childhood cancer and psychoeducation or psychosocial education and support psychologically.

Hasil : Studi ini memberikan keberagaman dalam memberikan psikoedukasi kepada caregiver dengan anak kanker. Ada beberapa teknik yang dilakukan dalam psiko edukasi berupa berpikir positif, terapi kognitif, brief therapy, teknik edukasi dan psikososial. Berbagai teknik yang dilakukan memberikan dampak positif menurunkan kecemasan, depresi, stress dan trauma, meningkatkan strategi koping dan kualitas hidup serta meningkatkan ketahanan keluarga.

Kesimpulan : Psikoedukasi merupakan intervensi keperawatan yang dapat diberikan pada keluarga dengan anak yang menderita kanker. Pemberian psikoedukasi pada keluarga dapat meningkatkan kemampuan keluarga dalam merawat pasien dan meningkatkan dukungan psikologis.

KATA KUNCI : caregiver; kanker anak; psikoedukasi; dukungan psikologis

ABSTRACT

Background: Cancer is one of the main causes of death in the world, especially in developing countries. Cancer is not only a problem for adults but also a major health problem in children. Cancer in children is a chronic disease and responds to parents/caregivers. Psychological and emotional responses cause psychological problems and stress in parents/caregivers. One of the interventions to reduce psychological problems is psychoeducation. Family psychoeducation is a modality of therapy with the focus of treatment on the family.

Objectives: To know various psycho-educational techniques and their impact on increasing caregiver psychological support

Methods: The research method used is a literature review using the Proquest, Pubmed, Google Scholar, and Science Direct databases, with the keywords caregiver or parent or family and pediatric cancer or childhood cancer and psychoeducation or psychosocial and psychological support.

Results: This study provides diversity in providing psychoeducation to caregivers with cancer children. Various techniques are used in the form of positive thinking, cognitive therapy, and brief therapy, educational and psychosocial techniques. The various techniques used have a positive impact on reducing anxiety, depression, stress, and trauma, improving coping strategies and quality of life, and increasing family resilience.

Conclusions: Psychoeducation is a nursing intervention that can be given to caregivers with childhood cancer. Psychoeducation is given to caregivers to improve the ability to care for patients and increase psychological support.

KEYWORD: caregiver; childhood cancer; psychoeducation; support psychological

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INTRODUCTION

Cancer can be identified by uncontrolled cell growth which spread to other body parts or organs (1). It dominantly causes people's death around the world, especially in developing countries. Cancer is not only a serious health issue for adults but also for children. According to the WHO, there is an increasing number of children suffering from cancer every year. There are approximately 400,000 children and adolescents aged 0-19 years diagnosed with cancer (2). In developed countries which have more comprehensive and accessible health services, more than 80% of children suffering from cancer can be recovered well. In low and middle-level countries, it is predicted that only 15-45% of the children can be completely cured. Imperfect diagnosis triggers a higher death rate in middle-income countries. There are also other factors like misdiagnoses or delays, barriers to accessing urgent actions, undisciplined treatment, toxicity, and higher relapse rates (3). According to the Basic Health Research (Riskesdas) in 2013 and 2018, the prevalence of cancer in Indonesia is about 1.4 to 1.49 (4). Since 2013,

the prevalence of cancer in children aged 0-14 years is around 16,291 cases per year (5).

Chronic conditions will not only affect the children themselves but also their families (6). Research conducted by Saleem et al stated that chronic disease may have long-term psychological effects on the children's parents. They may suffer from anxiety and depression (20-30%), post-traumatic stress (21-44%), worry (33 -75%), thoughts and feelings related to illness (13%), and lower level of life quality (7). Cancer causes bad psychological responses and directly affects other family members (8). The parents that take care of their suffering children report that they cannot obtain optimal emotional support, perform high levels of caregiver burden, and poor quality of life (9). Caregivers/parents who have children with chronic diseases must be fully supported because supports from other parties are substantial and heterogeneous. The current health care system is still limited in providing psychological support for families because there are only a few numbers of psychological experts that can be available to meet their needs at any time. According to the

biobehavioral family model, the pattern of family relationships and different reactions toward a child's disease may influence his physical and psychological well-being. Relieving parental distress can positively influence the children's and their families' conditions to adapt to living with cancer.

Caregivers who have children suffering from palliative diseases such as cancer seem to have higher stress levels. Some studies have been conducted to identify the caregivers' needs related to the children. One effort to reduce the stress level is psychoeducation. It consists of modality therapy by focuses on the family treatment. Family members (caregivers) are encouraged to identify and find problem-solving for adaptive mal conditions both for themselves and for others (10). Research conducted by Nurhasanah showed that psychoeducation can be done by regular nurses to provide relevant information related to the disease and improve family members' skills to take care of others who are experiencing psychosocial problems. It is expected that all of them can have adaptive coping with their anxiety (11). Psychoeducation can be done individually and in groups to face challenges or problems in their life. It also aims to help and develop support sources. Psychoeducation tries to develop and improve patients' acceptance in dealing with the disease they are suffering from. Based on some descriptions before, the authors are interested in researching the Effect of Psychoeducation on Families with Children Suffering from Cancer with Palliative Conditions.

MATERIALS AND METHODS

The purpose of this paper can be achieved through a systematic review that uses some clinical questions based on the PICO framework, namely: (1) population/problem, (2) Intervention, and; (3) Outcome. This article is made up by

studying some related literature from online databases. The databases include Science Direct, Proquest, Pubmed, and Google Scholar. The keywords are *caregiver or parent or family and pediatric cancer OR pediatric cancer or childhood cancer and support psychological OR psychosocial*. The researchers use the word "AND" as a *boolean operator* by combining different concepts and aspects as the main keywords to specify the required documents.

The researcher set the search filter based on some inclusion criteria, which are the articles that discuss the influence of education in improving psychological support for the caregivers of the children suffering from cancer, the published year must be from 2013 to 2021 and written in English, and the articles use quantitative methods. There is an exception for those that cannot display the full text. The articles should be included as Randomized Controlled trials (RCT) and quasi-experimental. There are 8772 articles found according to the keywords. Next, based on the established inclusion and exclusion criteria, ten articles are taken for review. Details of the searching strategies for the articles that meet the requirements are reviewed and analyzed using the PRISMA flowchart as shown in Figure 1.

RESULTS AND DISCUSSION

RESULTS

The selection results in 3 journals obtained from Proquest, 2 journals from PubMed, 3 journals taken from Google Scholar, and 2 journals obtained from Science Direct. This research uses seven studies using RCT, and three studies using quasi-experimental methods. According to the previous table, psychoeducational interventions for the caregivers of children suffering from cancer have been conducted in many countries using various methods. It significantly influences the participants' psychology. Some findings obtained from the ten journals above are:

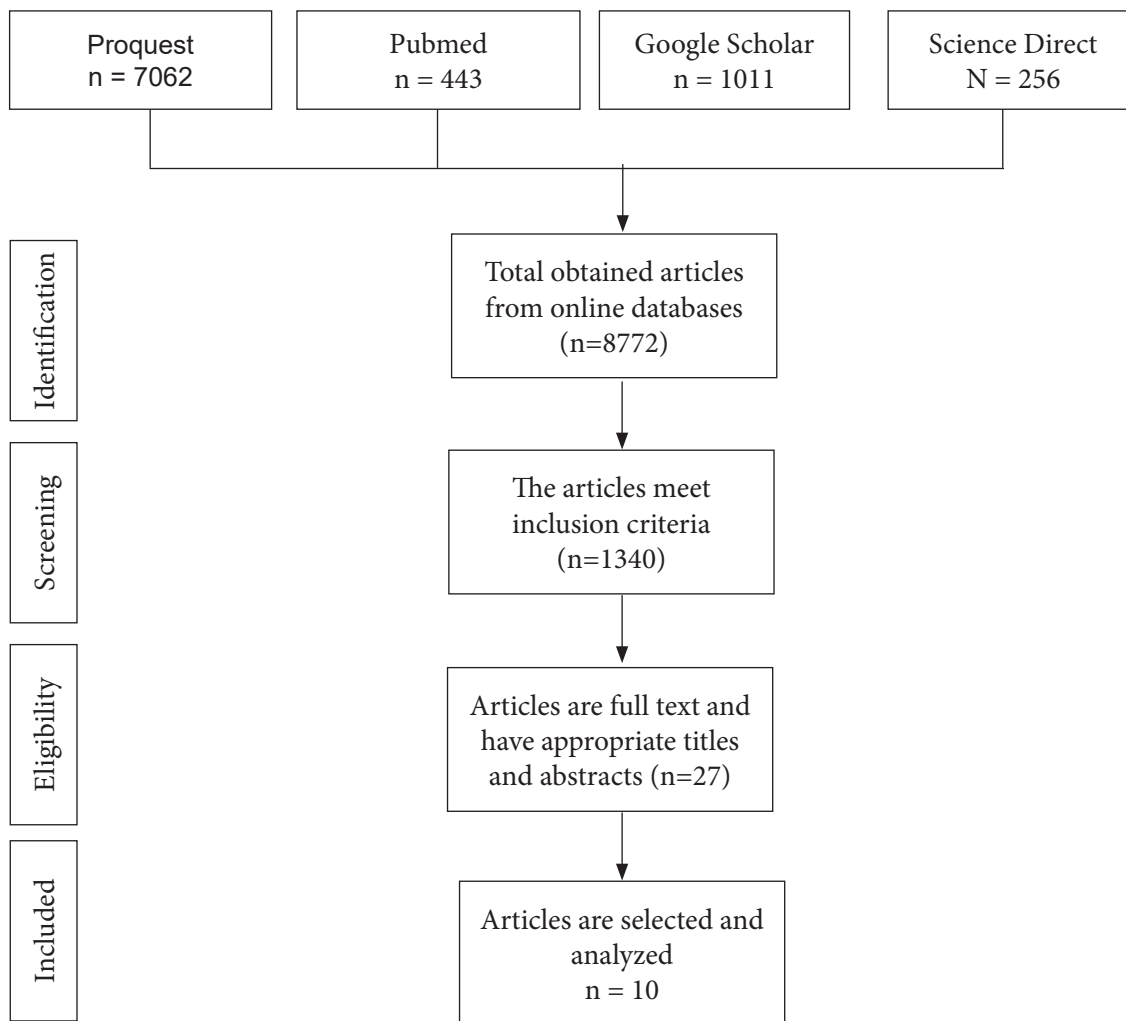


Figure 1. Flowchart of the review of the studied articles

Cognitive therapy

The most commonly used intervention is cognitive intervention. In some studies, cognitive intervention is given to the caregivers within a specific series and time (12,13,14,15,16).

Anxiety and depression

Psychoeducation intervention can influence and reduce anxiety and depression levels (16). This finding is the same as Zhang's (17). Educational therapy completed with the Solution Focused Brief Therapy technique shows important effects in reducing anxiety and depression and increasing hopes. Cognitive intervention therapy provides support in reducing caregivers' anxiety (13).

Stress and trauma

Research conducted by Shakiba and Svavarsdottir related to the cognitive intervention showed it can reduce the stress levels in mothers having children suffering from cancer (12,15). The same result is also shown by Kimberly and Salem (7,18).

Coping Strategy

Research conducted by Hoda found that positive thinking intervention can improve patients' quality of life (16). Chauvin's research also showed that cognitive therapy provides improvements in caregivers' coping strategies (13).

Table 1. Reviews of articles

Journal Identify	Research Method	Finding
Hoda, E. D., Elyasi, F., & Hasanzadeh, R (2019) <i>Effectiveness of positive thinking training on anxiety, depression, and quality of life of mothers of children with leukemia</i> , Journal of Nursing and Midwifery Sciences, 6(1), 21-26	<i>Randomized Controlled Trial (RCT)</i>	Positive thinking interventions can reduce anxiety and depression levels and improve patients' quality of life
Zhang, A., Ji, Q., Currin-McCulloch, J., Solomon, P., Chen, Y., Li, Y. Nowicki, J. <i>The effectiveness of solution-focused brief therapy for psychological distress among Chinese parents of children with a cancer diagnosis: A pilot randomized controlled trial</i> , Supportive Care in Cancer, 26(8), 2901-2910	<i>Randomized Controlled Trial (RCT)</i>	Intervention using Solution Focus Brief Therapy has better results than the control group on the assessment of somatic stress, anxiety, depressive symptoms, and level of hope
V.S. Chauhan, Kaushik Chatterjee, Kalpana Srivastav, Sanjeevan Sharma, R.K. Saini (2021), <i>Impact of Cognitive Behavioural Intervention on Caregiver Burden in Mothers of Children Diagnosed with Cancer</i> , Medical Journal Armed Forces	<i>Quasi-experiment</i>	Cognitive-behavioral interventions can significantly improve patients' coping strategies in self-acceptance without any self-blame and denial, and reduce anxiety
Center Kimberly, McIntyre Rebecca, Babb Rebecca, Ramirez Alejandra, Vega Gabriela, lewis Amanda, Bottrell, Lawlor. Kazak. (2021) <i>A community-based trial of a psychosocial eHealth intervention for parents of children with cancer</i> , Pediatric Blood Journal: Pediatric Blood & Cancer	<i>Quasi-experiment</i>	Psychosocial interventions through eHealth for parents who have children suffering from cancer can relieve their acute distress, anxiety, and symptoms of post-traumatic disorders.
Mansour Shakiba, Arsalan Latifi, dan Ali Navidian, (2020), <i>The Effect of Cognitive-Emotional Intervention on Growth and Posttraumatic Stress in Mothers of Children With Cancer: A Randomized Clinical Trial</i> , Journal of Pediatric Hematology/Oncology, Volume 42, Number 2, March 2020, pp. 118-125(8)	<i>Randomized Controlled Trial (RCT)</i>	The average value of trauma and stress in mothers with children having cancer after the cognitive-emotional intervention is significantly lower than in the non-intervened group.
A R. Rosenberg, Miranda C. Bradford, Courtney C. Junkins, Mallory Taylor, Chuan Zhou, Nicole Sherr, Erin Kross, J. Randall Curtis; Joyce P. Yi-Frazier, (2019), <i>Effect of the Promoting Resilience in Stress Management Intervention for Parents of Children With Cancer (PRISM-P)</i> , Journal: JAMA Network Open.2019;2(9):e1911578.	<i>Randomized Controlled Trial (RCT)</i>	Statistically, PRISM-P (stress management intervention) can improve the resilience of the families having children suffering from cancer
Farahani Atefeh Safarabadi, Masoomah Maarefvand, Akbar Biglarian, Jagdish Khubchandani. (2016). <i>Effectiveness of a Brief Psychosocial Intervention on Quality of Life of Primary Caregivers of Iranian Children With Cancer: A Randomized Controlled Trial</i> , Journal of Pediatric Nursing. 31(4).	<i>Randomized Controlled Trial (RCT)</i>	Brief psychosocial intervention can effectively improve the quality of life of primary caregivers having children suffering from cancer
Svavarsdottir, Erla Kolbrun, R.N., PhD., & Sigurdardottir, Anna Olafia, R.N., M.S.N. (2013). <i>Benefits of a brief therapeutic conversation intervention for families of children and adolescents in active cancer treatment</i> . Oncology Nursing Forum, 40(5), E346-57	<i>Quasi-experimental</i>	Therapeutic conversation interventions significantly affect the improvement of family functioning and communication with children suffering from cancer
Arsalan Latiffi, Farshid Saeedinezhad, Asadollah Keikhaei, and Ghasem Miri Aliabad, <i>The Effect of Cognitive-emotional Intervention on Psychological Distress in Mothers of Children with Cancer</i> , Med Surg Nurs J. 2020 November; 9(4):e113171.	<i>Randomized Controlled Trial (RCT)</i>	Cognitive-emotional intervention can significantly influence and reduce psychological distress levels in mothers having children suffering from cancer.
Hanin Salem, Christoffer Johansen, Kjeld Schmiegelow, Jeanette Falck Winther, Peder Skov Wehner, Henrik Hasle, Steen Rosthøj, Anne E. Kazak & Pernille E. Bidstrup (2017), <i>FAMILY-ORIENTED SUPPORT (FAMOS): development and feasibility of a psychosocial intervention for families of childhood cancer survivors</i> Acta Oncologica, 56:2, 367-374,	<i>Randomized Controlled Trial (RCT)</i>	Family Support System intervention can influence and reduce stress, depression, and anxiety, and improve family functions

Family resilience and function

Rosenberg in his study stated that the intervention through improved/promoted resilience and stress management performs better results in improving resilience in the parents that have children with cancer (19). Therapeutic conversation intervention significantly affects the functions and communication of the families that have childhood cancer (15).

Quality of life

Psychosocial intervention which consists of counseling sessions and follow-up by telephone can effectively improve the quality of life for the caregivers of childhood cancer (20).

DISCUSSION

Psychoeducational intervention mainly focuses on providing relevant information. It can be more effective if combined with other activities such as counseling or support using different methods for the caregivers. It can also be done individually or in groups (21). Research conducted by Nurhasanah on family psychoeducation showed that it aims to provide information to families to improve their skills in caring for their members who are experiencing psychosocial issues. It is expected that all family members can have adaptive coping strategies to solve and relieve anxiety. Psychoeducation can be done on individuals, families, and groups because it focuses on dealing with life challenges or problems. Psychoeducation also helps the participants to develop their sources of social support and coping skills to solve many kinds of life problems (13).

Some educational programs indicate good results in improving knowledge and skills, so they can positively influence the caregivers' self-perception of abilities. This psychoeducational intervention allows them to share their daily experiences in taking care of the children with complex needs with other families to show

and prove that they are not alone and that they can help each other (22). The purpose of psychoeducation is to develop and increase patients' acceptance levels of the disease they are suffering from or newly experienced disorders, involvement in therapy, and develop coping mechanisms when they are facing difficult problems related to their illness (22).

Some underlying theories of psychoeducation are behavioral cognitive theory, learning theory, group practice models, stress and coping models, social support models and normative approaches, and ecological system theory. Ecological system theory provides a framework for assessing and helping individuals in recognizing disturbances or experiences related to other systems in their life, such as family, school, and partners. Psychoeducation also adapts the basic concepts of humanistic-existential, behavioral, and cognitive theory. The humanistic approach that underlies psychoeducation is existential-humanistic which explains that humans can make personal decisions based on the potential, and influence of their surrounding environment. The behavioral theory emphasizes the influence of environmental manipulation. Cognitive theory focuses on the mastery of cognitive-emotional skills as the main components of the psycho-training process (24).

Psychoeducation can be flexibly implemented in many different situations. In the clinical aspect, it can be combined with other types of interventions, such as health or medical psychology (23). In terms of health psychology, psychoeducation is commonly applied to chronic patients and their families (24). Psychoeducation has been generally implemented in foreign and developed countries. However, in Indonesia, it may be stated that it is a "rare" method to be applied.

To provide support in dealing with conflict of desperation, and facilitate the decision-making process, there are many kinds of media like

videos, workbooks, and counseling that can be delivered to the patients (21). Psychological intervention functions to reduce stress levels. One of which is relaxation. It is usually used to reduce pressure and release physical and psychological tension due to stress and calm the body system down (25). However, current pandemic conditions do not enable this program to be done directly. Therefore, there have been many activities done remotely using the internet (online). Psychoeducation is one form of psychological service that can be done indirectly.

After a child is diagnosed with cancer, his/her parents must immediately find psychosocial consultation to solve barriers to treatment and to get psychosocial support. Online interventions can provide practical preferences for them (16). Online al intervention can significantly support the patients in dealing with health problems and increasing individual resilience (26). Research conducted by Sugiyanto showed that psychoeducational intervention can reduce the family's burden by 59.4% by increasing their ability to take care of the patients, deal with stress, and the ability to cope with the problems being faced by optimizing the support system in caring for the patients with palliative conditions (27).

According to Mowla, taking care of children suffering from chronic diseases can be greatly influenced by the intervention. Psychoeducational intervention and the power of relaxation can improve the quality of caregivers who are handling chronically ill children (28). This finding is similar to Boo who stated that psychoeducation can improve the life quality of the children, adolescents, and their parents with chronic neurological disorders (29).

Psychoeducation does not only provide descriptions regarding the problems faced by participants but also teaches them some skills to deal with their problems (30). According to Daye et al, psychoeducation conducted through group

interventions can be accepted by the family and increases HRQoL (Health-Related Quality of Life)(31).

CONCLUSIONS AND RECOMMENDATION

Psychoeducation is a nursing intervention that functions to improve the family's ability to participate in caring for childhood cancer and reduce anxiety and stress levels. This research finding performs many kinds of methods to teach psychoeducation to the caregivers who are handling children with cancer. Some techniques or methods may consist of positive thinking, cognitive therapy, brief therapy, and educational and psychosocial techniques. They have great and positive impacts on reducing anxiety, depression, stress, and trauma, as well as improving coping strategies, quality of life, and increasing resilience.

Health practitioners are required to provide quality care to cancer patients. Nurses as a health workers provide care for patients with childhood cancer. Assessment of patient can be do observation and interviews. Nursing interventions, including psychoeducation, can be carried out by nurses to increase psychological support

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