شبكة المعلومات الجامعية

التوثيق الإلكتروني والميكروفيلم

بسم الله الرحمن الرحيم

HANAA ALY

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جامعة عين شمس

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قسم

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علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات

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HANAA ALY

Sources of Stress among Parents' Having Children Undergoing Chemotherapy

A Thesis

Submitted for Partial Fulfillment of the Requirement of
Master Degree in Nursing Sciences
(Psychiatric Mental/Health Nursing)

By

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Under Supervision of

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Doha Samy abd El-Fatah Soliman

List of Contents

List of Abbreviations

Abbr.	Full-term
ALL	**:** Acute lymphocyte leukemia
AML	**:** Acute myeloid leukemia
CSF	**:** Cerebrospinal fluid
CVC	**:** Central Venous Catheter
DNA	**:** Deoxyribonucleic acid
SD	**:** Standard deviation
SPSS	**:** Statistical Package for Social Sciences

List of Tables

List of Figures

Figure No. Title Page No.

Figures in Review:

Figures in Results:

ABSTRACT

Background: The psychological distress from pediatric cancer populations is varied. The immediate impact of cancer diagnosis and treatment on child and parent distress is mostly clear. Aim: This study conductes to assess the sources of stress among parents' having children undergoing chemotherapy. Design: A descriptive design was used to accomplish this study. Settings: This study was carried out at children cancer department of Tanta cancer center include inpatient unit and outpatient unit. Subjects: A convenience sample of all available number of parents of children with cancer who are undergoing to chemotherapy fulfilling the criteria of both sex of parent, aged (5-12) years for children and all ages for parent and diagnosed with cancer and undergoing chemotherapy for the children. They were 300 participants (100 children, 100 mothers and 100 fathers). Tools: Part I: Socio-Demographic characteristics included of Children and their parents under study. Part II: Parenting stress scale, translated into Arabic and adapted by the researcher to assess parents stress. Results: The finding of the current study demonstrated that, more than two third (68%) of the studied children had high level of stress, while (32%) of them had low level of stress. Significantly, the current study finding showed that the most of parents (92%) suffer from high level of stress. Conclusion: The psychological distress from pediatric cancer affects the family's need for care, self-esteem, social interaction, and functioning. Based on the results of the present study it could be concluded that parents stress level was found to vary between low and high. A statistically significant difference between fathers' age and residence of parent's children and total parents stress related to child's domains and also between the number of siblings and the total parental stress score related to child's domain. Recommendations: comprehensive nursing education and training programs on dealing with parents` psychological distress are recommended.

Key words: Sources of Stress, Parents, Children, Chemotherapy

Introduction

The psychological distress from pediatric cancer populations is varied. The immediate impact of cancer diagnosis and treatment on child and parent distress is mostly clear. Both parents and children report notable levels of distress after the child has received a diagnosis of cancer. This distress, includes symptoms of anxiety and depression, is generally found to be most severe immediately following diagnosis with some symptoms persisting up to a year later **(Myers et al., 2014).**

Despite the medical progress in the field of pediatric oncology, a gap between the medical and psychosocial fields is evident especially in Egypt **(World Fact Book, 2017).** Being a parent of a child diagnosed with cancer can challenge and disrupt the family's daily life, causing extensive psychological distress for parents **(Ljungman et al., 2014).** Childhood cancer is an increasing and prevalent type of chronic disease worldwide. Leukemia is one of the most common cancers in children under 15 years of age and represents 25% of all cancers in children. Like other chronic diseases, it causes many physical and mental problems for the caregivers, who are mainly parents, and makes parents show various levels of anxiety, shock, depression, disappointment, and denial during the initial stages of the diagnosis of childhood **(Gelesson et al., 2014).**

Stressors associated with parenting a child diagnosed with cancer include taking care of the child through painful procedures and side effects of treatments, adaptation to an unpredictable treatment outcome, uncertainty regarding possible late effects, financial and occupational concerns. Parents' adaptation after end of treatment is especially challenging if the child experiences late effects, which from a parent perspective often implies care giving responsibilities. Parents' involvement in a child's cancer care often entails absence from paid work. Even after the end of successful treatment, some parents need to reduce working hours **(Wakefield et al., 2014).**

In Egypt, according to Children's Cancer Hospital, 8,500 children are estimated to be diagnosed with cancer in Egypt every year **(Children's Cancer Hospital, 2013)** and Tanta cancer center being the main center in Tanta which received new cases in pediatric department in (2017) about 425 new cases.

When parents are involved in the care of a child with cancer, they experience both positive and negative changes in their relationships, communication, stress, and their roles. Emotions such as anxiety, guilt, anger, and distress ebb and flow during the course of the child's illness. These emotions are felt and expressed by all family members, often more overtly by mothers and children. The child's cancer affects the family's need for care, self-esteem, social interaction, and

functioning. Consequently, parents may find it necessary to change or modify their family roles to cope with the demands of their child's illness. There are variations in the impact of the child's illness on fathers' and mothers' relationships. While some relationships are weakened by these extremely stressful circumstances, others are strengthened during the cancer experience **(Mark, 2014).**

Psychiatric nursing should include in their daily activities,home care for cancer patients and their families,and work to support these families to establish bonds to identify the patients distressing thoughts of having their wishes met to be reconciled with him/herself and with others as well as to support families in the process of death in a caring and humane manner **(Marchi et al.,2016).**

Significance of the study:

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This study was conducted because there are very stressful situations to which parents are exposed to it as a result of receiving their children chemotherapy, include effects on the family such as neglect other children of the family, economical