

EXPERIMENTEEL-KLINISCHE EN GEZONDHEIDSPSYCHOLOGIE

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COUPLE FUNCTIONING AFTER PEDIATRIC CANCER DIAGNOSIS: A SYSTEMATIC REVIEW

INTRODUCTION

Pediatric Cancer = chronic illness

- → All family members & the family as a whole need to adapt to the unpredictable and uncontrollable course of cancer and its treatment
- > Focus in the literature on **individual** & **family** adaptation
- > Research into the adaptation of **family subsystems** is less common
 - = little is known about how the couple subsystem -the intimate relationship of the diagnosed child's parents- is affected by pediatric cancer

METHOD

Searches: Web of Science, Pubmed, Cochrane, PsycInfo & Embase

Criteria: articles a) examining the impact of child cancer (0 -18 years; any type of cancer) on any aspect of couple functioning; b) written in English; c) presenting new empirical qualitative/ quantitative data

Study Selection: 5660 identified papers

Screening based on title, abstract & full text

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Final set of 32 articles

RESULTS

Part I: Characteristics of Reviewed Studies Part II: Narrative Summary of Reviewed Studies Seven dimensions of couple functioning emerged from the literature - 17 quantitative, 13 qualitative & 2 mixed method studies - 21 cross-sectional & 11 longitudinal studies - Marital conflict (N=8): both in on- & off-treatment families - Marital support (N=12): important, available and helpful to cope - Time since diagnosis: new diagnoses to 7 years post-diagnosis - In 47 % of the articles both partners participated - Sexual intimacy (N=4): ↓ in most couples - Marital satisfaction (N=7): U-shaped curve - General marital adjustment (N=11): mostly within normal limits

"I have moved a stone in the river and the river will never flow in the same way again. That's a song. Actually the illness is the same. We will always be that family, but this has changed the flow and so it's going to flow differently "

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CLINICAL IMPLICATIONS

- → Most couples adapt well
- → Marital problems may seem **secondary** to the more pressing need of ensuring adequate cancer & psychosocial care for the child, **overlooked** by health care providers OR **downplayed** by the couple themselves
- → BUT: these problems might **negatively impact** the adjustment of the child and his/her treatment!
- → It is important to **screen** and **remedy** those problems, taking into account **evidence-based standards** for psychosocial care in pediatric oncology

