

Research Proposal

How to deal with excessive anxiety among parents of the children's whose are surviving after receiving a chemotherapy treatments

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1 Introduction

Childhood cancer has become a prevalent type of chronic illness all over the world.

Nevertheless, with the number of children diagnosed with cancer expected to increase,

it is expected that the adverse effects that childhood cancer has on emotional as well as

the physical functioning parents of children diagnosed with cancer is also expected to

increase (Klassen, Raina, Reineking, Dix, Pritchard, and O'Donnell (2007). As a matter

of fact, from a study that was carried out by Klassen et al. (2007), it was found that

parents who were caring for children who had been diagnosed with cancer were more

stressed while compared to parents who were not caring for children with cancer. On

the other hand, Ow (2003) noted that parents caring for children with cancer

experienced poorer physical and psychological quality of life while at some time in their

life, the parents were found to exhibit variety emotional difficulties particularly anxiety

and stress signs.

On the other hand, childhood cancer has separate and tenacious psychosocial effects on

parents of cancer survivors. A study by Paterson, Holm and Gurney (2004) identified

various stressors for parents caring for children with cancer that among others includes

stress connected to cancer such as secondary illness, disabilities, attentional disorders,

as well as parenting stressors like persistent feelings of grief, loss and doubts. In

addition, those stressors as discussed by Van Dongen-Melman et al. (1995) remain

noticeable sources of distress and considerable strains on family resources even after

treatment have ended.

From such views, it can thus be explained that there is sufficient evidence to show that parents caring for children who have undergone chemotherapy treatments tend to suffer from excessive anxiety levels. It is from that perspective that this research was proposed with the purposes of establishing how the excessive anxiety levels by parents of children who have survived chemotherapy treatment can be effectively addressed.

1.1 Aim and objectives of the research

As already pointed out, the aim of the proposed research will be to research how the excessive anxiety levels among parents of the children's who are surviving after receiving a chemotherapy treatments can be effectively dealt with. Nevertheless, in order for the proposed research to effectively achieve that aim, it will be crucial that the following research objectives are achieved first:

- a) Determine what is excessive anxiety levels among parents of child cancer survivors
- b) Find out the type of impacts that the excessive anxiety levels among the parents of child cancer survivors have on the lives of the parents
- c) To establish how the excessive anxiety levels among the parents of child cancer survivors can be dealt with

1.2 Research Questions

To achieve the specified aim and objectives of the proposed research, it will be crucial that the following research questions are answered:

- a) What are excessive anxiety levels in view of the parents caring for cancer survivors who have undergone chemotherapy treatment?
- b) What type of impacts does the excessive anxiety levels among the parents of child cancer survivors have on the lives of the parents?
- c) How can the anxiety levels of parents of cancer victims who have undergone chemotherapy treatments be addressed?

1.3 Outline of the proposed research

The proposed research will have five main sections/chapters. In section/ chapter 1 which will be introduction chapter, the topic of research will be introduced while the background information on the research will also be presented. Thus, among others, this first chapter highlights the aim and objective of the research, outline the research questions that the research will be answering, discuss the need for the research, and explain the significance of the study. The second chapter of the dissertation will be the literature review chapter and will be made up of discussions on existing knowledge such as fundamental findings, theoretical and methodological contributions pertaining to the research topic. The third chapter that will be titled research methodology will explain in great length the approaches that have been used by the researcher when conducting the research and give the rationale as to why those specific approaches have been used. Chapter 4 of the research report will feature the findings of the study and at the same time the analysis of those findings. Chapter 5 will be the final chapter of the

research and it mainly comprise of a summary of the entire research before concluding the research.

2 Literature Review

The extreme caregiving demands that emanate from parenting an individual who has undergone chemotherapy treatments is many at times surpasses that of parenting health children. As a result parents who are caring for cancer victims might be at the risk of impaired physical and mental health. An increasing amount of literature concurs that due the nature of caregiving afforded to children who are diagnosed with cancer, parents caring for such children tend to be distressed even after treatment has been completed (Wijnberg-Williams et al. 2006). Indeed, the studies by Alderfer et al. (2005) and Brown et al. (2003) that focuses on post-traumatic stress symptoms (PTSS) as well as post-traumatic stress disorder (PTSD) among the parents of cancer survivors can be said to have provided sufficient proof that there is depression and anxiety among the parents caring for cancer survivors.

On another view, for a parent to care for a cancer survivor, that implies that the parent will be involved in extended caregiving relationship contrary to the case when caring for other children who are clinically ill. For instance, the study by Ressler et al. (2003) found that over 60% of young people who are cancer survivors and have undergone chemotherapy treatments tend to be accompanied by their parents in the long run unlike is the case for young adults who have been diagnosed in other conditions such as

diabetes. Moreover, Hardy et al. (2008) carried out a research that contrasted the parents of adult survivors of pediatric cancer who were still accompanying their children to long-term follow up consultations and the parents of existing pediatric cancer patients or those who have been in active treatment for a year. From the research, the scholars established that the parents who were caring for adult survivors had as much anxiety and stress as was the case with the parents whom children were in active treatment. Those findings can be said to give an indication that parents who accompany their adult daughters and sons could still be psychologically exposed many years after the treatment has been completed while the thought of having a child with a life-threatening illness has a likelihood of not diminishing many years after the son or the daughter has survived.

The task of taking care of a cancer survivor could be predominantly demanding for mothers. Irrefutably, emotional exhaustion was examined in a sample of parents who were caring for brain tumor survivors. From the study, it was found that mothers of brain tumor survivors had higher rates of burnout while compared to the rates of mothers that were caring for healthy children (Robinson, et al. 2007).

Increased levels of stress among the parents caring for cancer survivors are linked with poor results in case of both the parent and child. On the other hand, parental distress tends to have an impact on the child's quality of life. Actually, important connections have been found between caring depressive signs, nervousness, parenting stress and

child's quality of life as was established from a study carried out Roddenberry and Renk (2008).

On the other hand, parenting stress could also result to poorer physical health to the parents caring for cancer survivors. Numerous researches have focused on the impact that severe and chronic stress can have on the health and have established that high stress levels results to decreased immune functioning and that would in the long run result to increased risk of communicable disease in the healthy people (Cohen, Doyle, and Skoner,1999). In case of the physical impacts that stress can have on the parents, it has been found that parents who are stressed from caring of sick children have less time to rest and be involved in other physical activities that might enhance their health thus implying that in the long run, their physical health is affected.

From such views, it is evident that the proposed research is justified as the research will seek to find ways through which the parents who care for their children can deal with the excessive anxiety that they tend to have in order to ensure that their overall health is not negatively affected by the care that they give.

The model that will mainly be used in the proposed study is the transactional stress and coping mode which was advanced by Thompson and Gustafson (1996). The model perceives chronic illness as a likely stressor to which a person and the family system endeavors to acclimate. On the other hand, as far as the variables are concerned, as per

the transactional and coping model, the family operation and handling style have been recognized as important variables that are likely to arbitrate the psychosocial alteration of caregivers of those who can be considered as been pediatric cancer survivors and in that view, family functioning and coping will be the two main variables.

3 Research Method

In order for the aim and objectives of the research to be achieved, the proposed research will involve the researcher conducting a primary research that will involve a mixed research method. A mixed research method as explained by Saunders et al. (2009) is a research approach that used both qualitative and quantitative research approach in a single research thus ensuring that the researcher is able to investigate the research phenomena from a qualitative perspective as well as a quantitative perspective.

As far as the research subjects are concerned, it can be explained that the research subjects will comprise of mothers who are caring for children who have undergone chemotherapy treatments in the past as well as parents who have in the past cared for children who have undergone chemotherapy treatments. The fact that the proposed study will aim to establish on how the excessive anxiety among parents of the children's whose are surviving after receiving a chemotherapy treatments can be dealt with implies that it will be crucial that the parents who are either caring for children who have undergone chemotherapy treatments or parents who have in the past cared for children who have undergone chemotherapy treatments are used.

In view of the sampling technique and the sample size, the sampling technique that will be used will be convenience sampling technique as the technique will make it possible for the participants who are available and are willing to participate in the research be involved in the study (Flick. 2006). In case of the sample size, a total of 150 research participants will be used in the study with the number of those who will be used in the qualitative research been 20 while 130 participants will be used in the quantitative research. Once data has been collected; thematic content analysis approach will be used to analyze qualitative findings while the quantitative findings will be analyzed through the use of Statistical Package for Social Sciences (SPSS) tool.

As far as ethical considerations are concerned, there are various ethical issues that the research will have to address. One of the ethical issues that will have to be addressed entails the issue of informed consent. When conducting the research, all the individuals who will be taking part in the research will be required to give informed consent with those who fail to give their consent been disqualified from taking part in the research. In addition, in order to ensure that the identity of the participants will not be disclosed, their real names will not be used in the research report.

References

- Alderfer, M. A., Cnaan, A., Annunziato, R. A., & Kazak, A. E. (2005). Patterns of post-traumatic stress symptoms in parents of childhood cancer survivors. *Journal of Family Psychology, 19*(3), 430-440.
- Brown, R. T., Madan-Swain, A., Lambert, R. (2003). Posttraumatic stress symptoms in adolescent survivors of childhood cancer and their mothers. *Journal of Traumatic Stress, 16*(4), 309-318.
- Cohen, S., Doyle, W. J., Skoner, D. P. (1999). Psychological stress, cytokine production, and severity of upper respiratory illness. *Psychosomatic Medicine, 61*(2), 175-180.
- Hardy, K. K., Bonner, M. J., Masi, R., Hutchinson, K. C., Willard, V. W., Rosoff, P. M. (2008). Psychosocial functioning in parents of adult survivors of childhood cancer. *Journal of Pediatric Hematology and Oncology, 30*, 153-159.
- Flick, U. (2006). *An Introduction to Qualitative Research*. London: Sage Publications.
- Klassen, A., Raina, P., Reineking, S., Dix, D., Pritchard, S., O'Donnell, M. (2007) "Developing a literature base to understand the care giving experience of parents of children with cancer: a systematic review of factors related to parental health and well-being," *Supportive Care in Cancer*, vol. 15, pp. 807-818, 2007.
- Ow, R. (2003). "Burden of care and childhood cancer: Experiences of parents in an Asian context," *Health & Social Work*, vol. 28, pp. 232-240, 082003.
- Patterson, J., Holm, K., Gurney, J. G. (2004). The impact of childhood cancer on the family: A qualitative analysis of strains, resources and coping behaviors. *Psycho Oncology, 13*, 390-407

- Ressler, I. B., Cash, J., McNeill, D., Joy, S., Rosoff, P. M. (2003). Continued Parental attendance at a clinic for adult survivors of childhood cancer. *Journal of Pediatric Hematology/Oncology*, 25(11), 868-873.
- Robinson, K. E., Gerhardt, C. A., Vannatta, K., Noll, R. B. (2007). Parent and family factors associated with child adjustment to pediatric cancer. *Journal of Pediatric Psychology*, 32(4), 400-410.
- Roddenberry, A., Renk, K. (2008). Quality of life in pediatric cancer patients: The relationships among parents' characteristics, children's characteristics, and informant concordance. *Journal of Child and Family Studies*, 17(3), 402-426.
- Saunders, M.N.K., Lewis, P., & Thornhill, A. (2009). *Research Methods for Business Students (5th Ed.)*. Harlow, United Kingdom: FT Prentice Hall.
- Thompson, R. J., Jr., Gustafson, K. E. (1996). *Adaptation to chronic childhood illness*. Washington, DC: American Psychological Association.
- Van Dongen-Melman, J. E., Pruyn, J. F., De Groot, A., Koot, H. M., Hahlen, K., Verhulst, F. C. (1995). Late psychosocial consequences for parents of children who survived cancer. *Journal of Pediatric Psychology*, 20(5), 567-586.
- Wijnberg-Williams, B. J., Kamps, W. A., Klip, E. C., & Hoekstra-Weebers, J. E. H. M. (2006). Psychological adjustment of parents of pediatric cancer patients revisited: five years later. *Psycho-Oncology*, 15(1), 1-8.