

# Effectiveness of Group Supportive Psychotherapy on Psychological Adjustment and Hope among Mothers of Children With Cancer

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Received: March 19, 2015

Accepted: May 2, 2015

## ABSTRACT

Diagnosis of cancer in a child can be extremely stressful for parents. These families may suffer from short - and long-term emotional problems. This research aims at studying the effectiveness of Group Supportive Psychotherapy on psychological adjustment of mothers with children suffering from cancer in Dr. Sheikh Hospital, Mashhad, Iran. In this applied and semi-experimental research, 30 mothers were selected based on Bell adjustment Inventory (pre-test). They were randomly assigned into two groups of experimental and control. Intervention based on Group Supportive Psychotherapy protocol was executed on the experimental group for twelve weeks (twelve sessions, each lasted for 2 hours). Afterwards, post-test was performed for both groups. After twelve weeks, the experimental group completed questionnaire and the follow up phase. Results demonstrated that Group Supportive Psychotherapy increases psychological adjustment in mothers of children with cancer ( $p < 0.001$ ). Covariance analysis indicated that Group Supportive Psychotherapy significantly increases psychological adjustment of mothers whose children suffer from cancer. Finding effective and newer approaches to improve the well-being of parents with a sick child is an important challenge of today's medical researches. Based on our findings, it is possible to increase psychological adjustment in mothers of children with cancer through supportive psychotherapy.

**KEYWORDS:** psychological adjustment, supportive psychotherapy, cancer, children, mothers.

## 1. INTRODUCTION

One of the most devastating life experiences for parents is having their child or adolescent diagnosed with cancer [1]. Although cancers during childhood are uncommon, they are the second reason of death in under 14-year-old children [2]. Diagnosis and initial treatment of childhood cancer is stressful and even traumatic for parents [3]. They must face the life threat of the diagnosis and the many logistical demands of the patient's medical care while also managing the family's ongoing daily needs [3].

Furthermore, during the process of treatment, they are usually confronted with multiple pervasive stressors including significant medical side effects, considerable changes in daily activities and disruption of social and family roles [4]. As a result, it causes significant disorders in all dimensions of parents' personal, familial and social lives. Substantial research demonstrates that parents of children with cancer, particularly mothers, experience heightened psychological distress including anxiety, depression, and posttraumatic stress symptoms [5]. Moreover, caring for a child with fatal disease can cause significant changes in a mother's identity, roles and responsibilities. Therefore, mothers, though not bother themselves, experience many of the consequences of chronic illnesses [6]. Parents of children with cancer are also at risk for poor adjustment outcomes, even more so than their diagnosed child [7].

Cancer has huge changes, pressures and effects on patients' and their family members' lives. The quality of response to the occurrence of cancer depends on many aspects, such as patients and their mental structures, family and social context, disabilities and dimorphisms which have been caused. It can affect all different aspects of patient's life. Crises which are caused by cancer put mind, body and soul into imbalance and disorganization.

There is growing empirical support for interventions for parents of children with cancer [8]. A meta-analysis of 12 psychological intervention studies reviewed psychological distress and adjustment of children with cancer and their parents as the primary outcomes [4]. Interventions were eclectic in nature, employing a variety of modalities within the same intervention (cognitive behavioral techniques, education, support, etc.). There was a significant improvement in parental adjustment and a decrease in distress after parents had participated in the interventions [4].

Based on these findings, there is a need for formulation of health and social policies for early diagnosis, proper management of depression and psychosocial problems, and providing required help for families of children with cancer. Psychiatric treatments are among the methods for effective reduction of mental health problems in parents of patients. Several studies have evaluated the effectiveness of these treatment methods. Supportive psychotherapy establishes a relationship based on feeling of safety and security between therapist and patient and enables the patient to talk about emotions, such as fear, anxiety, sadness, frustration, and irritability [9]. The aim of the study was to find if supportive psychotherapy is effective in increasing the adjustment among mothers of children with cancer.

## 2. MATERIAL AND METHODS

The sample consisted of mothers whose children suffered from cancer and referred to super professional hospital of Dr. Sheikh (a particular medical center for children) in Mashhad, Iran. In the survey, there were 30 mothers in access

tested through sampling were divided into 2 groups (15 in each, the first 15-mother group on intermediary purpose and another 15-mother group on controlling one). Conditions to enter the survey include having children undergoing cancer, having a tendency to be under this study, not confronting any chronic disease either physical or mental. This survey has been a practical one and the information in it has been gathered through a semi-experimental method with the pre-testing-post-testing plan by the controlling group. A Group Supportive Psychotherapy was also carried out among the period of the tests with in two-hour sessions (once a week). In order for trying the test suppositions, descriptive and analytical statistics have been applied.

### 3. Instruments

Bell's Adjustment Scale (Adult Form): Adjustment inventory was written by American psychologist, Behiram Bell in 1961. Adult form of this adjustment scale contains 5 levels of measuring personal and social adjustments separately. To determine the reliability of the scale, Cronbach's alpha and bisect have been used and their value for the total scale have been 93% and 87% respectively. These values show desirable reliability coefficient for the mentioned scale [10].

**Interventions:** Mothers in experimental group received 12 weeks of intervention based on Supportive Psychotherapy Protocol (Table 1).

Table 1. Group Supportive Psychotherapy Protocol

Session	Session goals
1	Introduction to supportive psychotherapy and its importance, members and performing the pre-test.
2	Introduction to the group principals and members' getting to know one another's story of cancer.
3	The introduction of the members to the disease, diagnostic and therapeutic methods.
4	A debate on the issue of cancer amongst the members through their attitudes and emotions.
5	A debate among the members on the cancer running in the family and their matrimonial relationship.
6	A debate of the members on fear of death and how to deal.
7	A one-way camp of the members for fun in order to increase their coping and to create more friendliness.
8	Focus on worries and concerns of four members and giving feedback through others.
9	Focus on worries and concerns of four members and giving feedback through others.
10	Focus on worries and concerns of four members and giving feedback through others.
11	Focus on worries and concerns of three members and giving feedback through others.
12	Conclusion, feedback and implementation post-test.

### 4. RESULTS

The survey includes 2 group, one with the aging average of 37.40 and the controlling group with 35.33. 66.7% of the controlling group and 80% of the intermediary were housewives occupationally. 66.7% of the intermediary group and 40% of the controlling one were under diploma. The mean and standard deviations of research variables in pre-test and post-test in both groups of controlling and Experiment are shown in Table 2.

Table 2: descriptive Characteristics of the study variables.

Variable	Stage	Groups			
		Control		Experiment	
		(Mean)	S.D	(Mean)	S.D
home adjustment	Pre-test	11.67	6.78	12.13	5.03
	Post-test	10.87	6.77	6.63	3.83
Health adjustment	Pre-test	9.87	5.74	10.87	4.68
	Post-test	9.07	4.96	6.87	4.30
Social adjustment	Pre-test	14.90	9.55	14.17	7.21
	Post-test	15.37	8.87	6.27	4.46
Emotional adjustment	Pre-test	16.07	9.74	17.73	5.75
	Post-test	16.60	8.91	8.00	6.16
Occupational adjustment	Pre-test	12.63	6.02	11.10	7.04
	Post-test	13.50	7.75	8.83	8.94
Psychological adjustment	Pre-test	67.67	31.39	66.00	23.10
	Post-test	65.40	33.10	40.40	15.84

As it's observed in Table 2, there is a considerable difference between post-testing and pre-testing average in parameters brought such as adjustment to health, society, emotions and at home. In order to put average variables of the 2 testing types under study, the covariance analysis has been applied by which the results have been shown in Table 3.

**Table 3.** Analysis of covariance for the efficacy of Group Supportive Psychotherapy on Area of adjustment (emotional, social, occupational, health, home and psychological)

Area of adjustment	stage	Change Source	Ss	df	Ms	F	Sig
<b>Emotional</b>	<i>Post-test</i>	<i>Pre-test</i>	989.91	1	989.91	40.92	0.001
		<i>groups</i>	717.69	1	717.69	29.66	0.001
		<i>Error</i>	653.19	27	24.19		
<b>Social</b>	<i>Post-test</i>	<i>Pre-test</i>	852.08	1	852.08	43.48	0.001
		<i>groups</i>	556.40	1	556.40	28.39	0.001
		<i>Error</i>	529.08	27	19.59		
<b>Occupational</b>	<i>Post-test</i>	<i>Pre-test</i>	276.54	1	276.54	4.44	0.04
		<i>groups</i>	114.23	1	114.23	1.83	0.19
		<i>Error</i>	1682.79	27	62.33		
<b>Health</b>	<i>Post-test</i>	<i>Pre-test</i>	374.61	1	374.61	44.06	0.001
		<i>groups</i>	62.40	1	62.40	7.34	0.001
		<i>Error</i>	229.55	27	8.50		
<b>Home</b>	<i>Post-test</i>	<i>Pre-test</i>	582.93	1	582.93	59.61	0.001
		<i>groups</i>	157.76	1	157.76	16.13	0.001
		<i>Error</i>	264.04	27	9.78		
<b>Psychological</b>	<i>Post-test</i>	<i>Pre-test</i>	14740	1	14740	96.92	0.001
		<i>groups</i>	4177.51	1	4177.51	27.47	0.001
		<i>Error</i>	4106.14	27	152.08		

The results concluded from the one-way covariance analysis in Table 3 shows that the supportive psychotherapy has had an impact on the increase of adjustment by keeping the adjustment at home, at work, in the society, psychological and emotions constant before beginning the therapy course since the lower score in the adjustment questionnaire of bell shows more adjustment, it can be concluded that the supportive type of therapy has had an impact on the increase of adjustment at home.

### 5. DISCUSSION

The present study showed that group supportive psychotherapy is effective in increasing the psychological adjustment among mothers of patients with cancer. Findings of this study are in line with other studies [3, 4, 9]. Having a child with cancer causes adverse effects on the psychological well-being of the patients and their family members. The need for medical care and fear of premature death can cause reactions like anger, frustration, hopelessness, and stress among patients and their family. Due to the fact that family is a semi-closed environment, its members should have mutual understanding, and a disease like cancer not only affects the life of the patient, but also has a profound effect on the life of parents and the patient’s siblings, and disrupts family relations. Chronic disease in a child affects all aspects of family life and every member of the family.

Social relationships, daily routines of families and the work status of parents are negatively affected in such cases [11]. A diagnosis of cancer results in feelings of intense fear and despair, both by the child and their family [12].

Based on the results communicated by parents through the Parent Support Survey, there is a definite need for supportive services within the hospital setting. In particular, parents showed a clear interest in joining a support group to help meet their supportive care needs. Results from the execution of the Parent Support Group Intervention showed that parents benefited through participation.

In an effort to reduce healthcare spending within the hospital setting, the importance of establishing evidence based psychological interventions that help families having a child with cancer has been established. Effective psychological interventions at diagnosis could contribute to lower expenses and overall spending on psychosocial care.

Lack of enough samples, low tendency to cooperation, personal and cultural problems could have been named as the limitations to the survey.

**Acknowledgement:** Special thanks to the authorities of Dr. Sheikh hospital and to those mothers giving us hand in the survey.

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