



# Distress in Pediatric Oncology Patients and their Family Caregivers: An Educational Initiative

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## Statement of the Problem

- Distress is "... a multifactorial emotional experience of a psychological (cognitive, behavioral, emotional), social, and/or spiritual nature that may interfere with coping effectively with cancer, its physical symptoms and its treatment" (NCCN, 2021).
- Distress screening is a standard of care; little implementation exists in pediatric settings.

## Background/Literature Review

- Over 300,000 children are diagnosed with cancer yearly; more than half of these patients and family caregivers will experience distress (Desjardins et al., 2021).
- Early identification of distress and subsequent support is a crucial component to enhancing coping ability, quality of life, treatment adherence, and overall psychosocial well-being (Nikolskaya et al., 2020).

## Purpose/Objectives

This project's purpose is to educate nurses on the presence of distress in pediatric oncology patients and their family caregivers. **Objectives:**

- To promote early identification of distress
- To assess nurses' perception of how distress is managed and their comfort/understanding of distress in this patient population
- To improve nurses' comfort advocating for increased psychosocial support
- To determine effectiveness of a brief educational session

## Methods

**Project Design:** 20-minute educational session  
**Sample:** Pediatric oncology nurses (N=42) with an average of 9 years in practice  
**Setting:** Boston Children's Hospital, 30-bed Inpatient Oncology unit  
**Evaluation:** 10-item Pre and Post Survey  
**Timeline:** Fall 2022

## Findings

- The majority of respondents (82%) in the pre survey reported having never received education on distress.
- 100% of respondents reported the educational session was helpful.

Items	Pre Education (N=42)	Post Education (N=17)
Is distress well managed in our patients?	2.45	2.62
Is distress well managed in our family caregivers?	2.32	2.19
I am confident advocating for psychosocial support for my patients and their family caregivers.	2.95	3.06
I am aware of the resources available to support distressed patients and family caregivers.	2.67	3.13

1=strongly disagree; 4= strongly agree

## Conclusions

- A short in-service for inpatient pediatric oncology nurses is beneficial.
- There is a need for increased support in the identification and management of distressed patients and family caregivers.

## Limitations

- High turnover with the use of travelers resulted in incompleteness of survey post education.
- Lack of availability of nurses to attend education during work hours.

## Acknowledgements/References

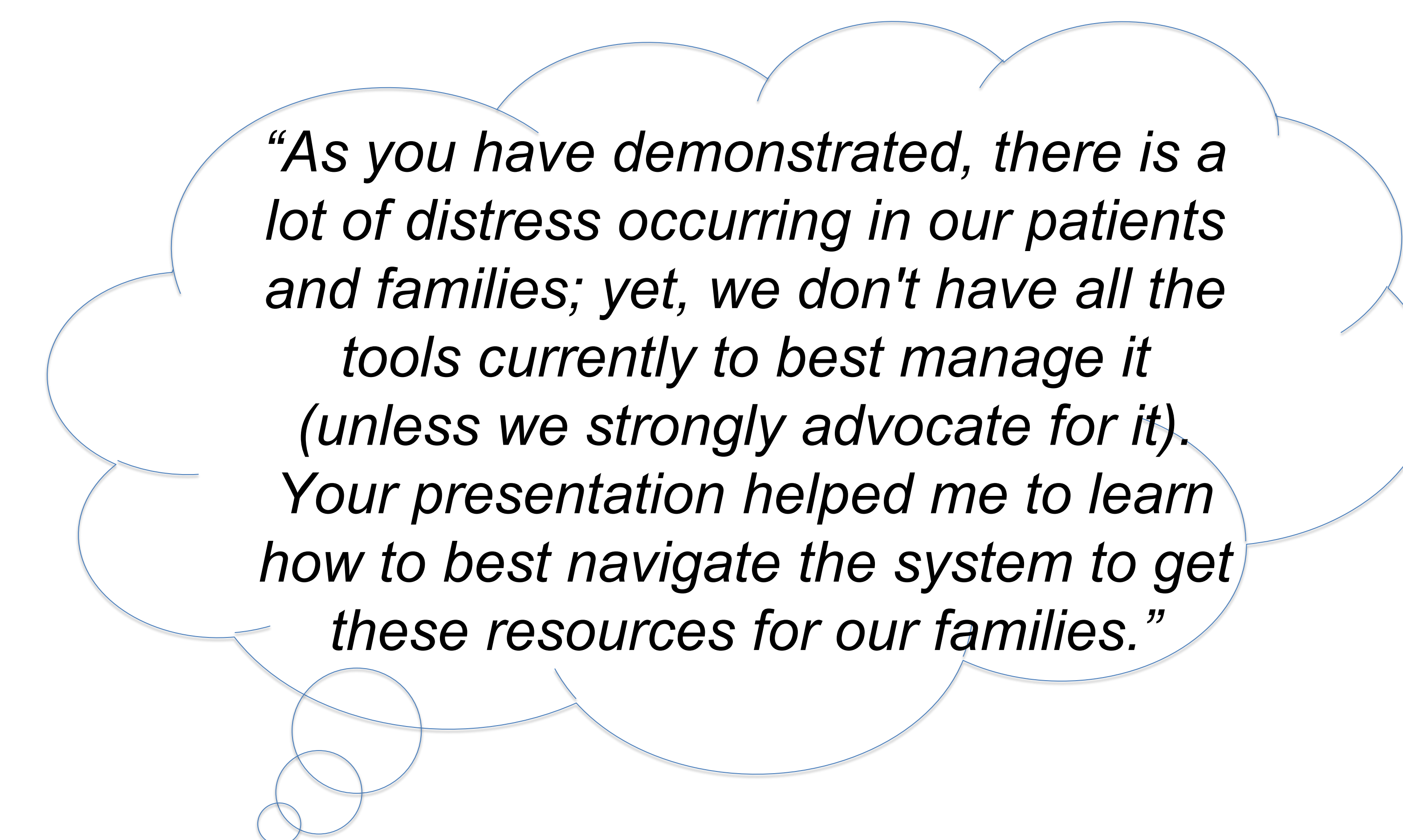
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### References



*"As you have demonstrated, there is a lot of distress occurring in our patients and families; yet, we don't have all the tools currently to best manage it (unless we strongly advocate for it). Your presentation helped me to learn how to best navigate the system to get these resources for our families."*