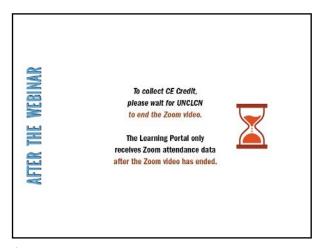




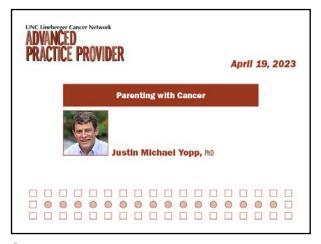
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Participants must attend using one of the following: Zoom with the slides and video components At a designated site with a site coordinator The following do NOT qualify for CE credit: Joining Zoom using Phone audio only (using the Zoom Android or iPhone app is fine) Watching with MediaSite To claim CE credit View 50 minutes or more Fill out an evaluation and select a certificate Claim credit within seven days





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Justin Yopp, PhD, is a clinical psychologist and Assistant Professor in the Department of Psychiatry at UNC. He serves as Program Director for the UNC Comprehensive Cancer Support Program at the North Carolina Cancer Hospital where he provides psychotherapeutic services for children, adolescents, and adults impacted by cancer.

Dr. Yopp co-leads the Parenting with Cancer Clinic at UNC. He also co-leads the Widowed Parent Project and co-authored the book, The Group: Sewen Widowed Fathers Reimagine Life, published by Oxford University Press.

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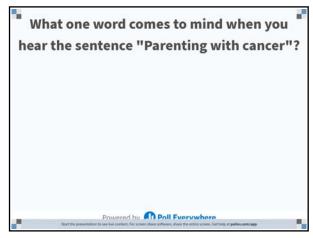
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SCLOSURE

This activity has been planned and implemented under the sole supervision of the Course Director, William A. Wood, MD, MPH, in association with the UNC Office of Continuing Professional Development (CPD). The course director and CPD staff have no relevant financial relationships with ineligible companies as defined by the ACCME.

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Why Parents?

- · Affects an entire family
- Increased risk for depression, anxiety;
 disruption to family roles & routines
 (Nilsson et al., 2009; Semple et al., 2010)
- Impacts treatment decision-making (Check et al., 2017)
- · Alters children's life trajectories

Across the Illness Continuum

- Diagnosis | Recurrence
- During Treatment
- Parents with Advanced Cancer
- End-of-Life

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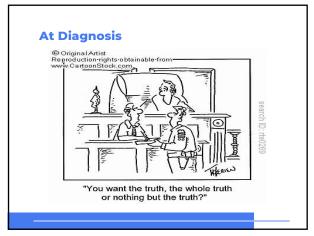
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Communication
Communication

At Diagnosis (or Recurrence)

- · To Tell or Not to Tell?
- Parental instinct to protect
- "What if my children ____?"
- · "What if they ask if I'm going to die?"

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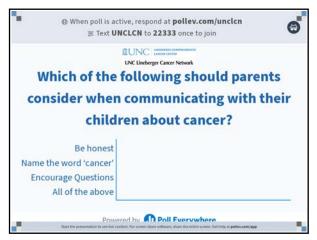
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Establishing and Maintaining Trust

At Diagnosis

- When: 1st to tell; control the narrative
- What: name it; anticipate changes
- · How: model showing emotion
- Encourage questions; start of convo
- Provider's role: empower parents

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Throughout Treatment

- Two keys for parenting:
 - · Emotional availability
 - Maintaining consistency

Throughout Treatment: Emotional Availability

- Important → ongoing conversation...
- Update as needed; check-ins
- "How can I tell how my kid is doing?"
 - · While driving; laying in bed
 - · Mad-Happy-Sad-Thankful game

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Throughout Treatment: Maintaining Consistency

- · The ideal not reality
- Finding a temporary normal; adapting to shifting roles/responsibilities
- · Keep behavioral expectations
- Reassuring to children that not everything has changed

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Throughout Treatment

- Aside from concerns of death, parenting issues are similar among parents with met or non-met cancer (Park et al., 2019)
- Parenting concerns = depression, anxiety, low QOL in parents (Park et al., 2016; Park et al., 2018)

Parenting with Advanced Cancer

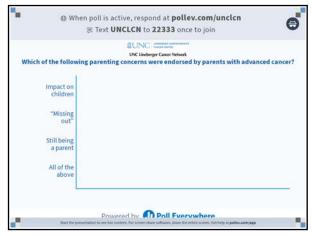
 Parenting concerns in parents with advanced cancer is associated with depression, anxiety, low QOL (Park et al., 2016; Park et al., 2018)

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Parenting with Advanced Cancer

- Four themes: (Park et al., 2017)
 - · Concerns about impact on child
 - "missing out"
 - · Still being a parent
 - · Treatment decision-making

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Parenting with Advanced Cancer

- Patients who are parents are more likely to pursue aggressive treatments (Kiebert et al., 1994)
- Maximizing time with children and preserving parental functioning are priorities (Check et al., 2017)

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Untapped Wisdom

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Widowed Fathers

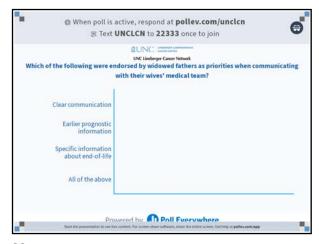
- Top 4 communication priorities with dying mother: (Park et al, 2017)
 - Raising children in ways that reflect her hopes/values
 - How she wants to be remembered
 - Whether/how to talk with the children about impending death
 - Whether how to talk with children about her death after she dies

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Widowed Fathers

- Four themes of care delivery: (Park et al, 2015)
 - Clear communication from the medical team (avoid avoiding)
 - · Earlier prognostic information
 - · Specific information about EOL
 - · Bedside manner

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End-of-Life: Talking with Children

- · Much depends on situation; child's age
- Explanations reflect care goals; what doctors expect to happen
- · "No other medicines to try"
- No one's fault
- · Decide/explain where the child will live

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End-of-Life: Continuing Bonds

- · Leave tangible legacies
- · Drawings, photo albums
- · Tell stories/reflect together
- Write letters

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Innovative Programs at UNC

Parenting with Cancer Clinic at UNC

- Launches next week for parents w/ cancer who have minor-age children
- Every Wednesday afternoon; no charge
- Two broad areas:
 - 1) Intrafamilial communication, support, and coping
 - 2) Custody & estate planning issues

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Families Addressing Cancer Together (FACT)

- A web-based intervention for parents with cancer (Park et al. 2022)
- Aim is to help parents communicate with their children about cancer
- · Will be accessible broadly
- · Watch this space!

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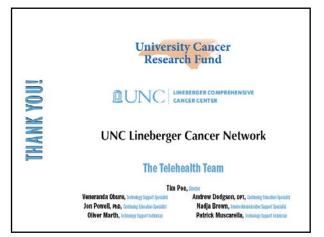
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Discussion





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