Helping Children When a Family Member Has Cancer: Dealing With Diagnosis

How children react to a cancer diagnosis in the family often depends on how their parents or other close adults handle the crisis. Kids learn through their parents' behavior. Although parents know this, they are under a great deal of stress and have their own intense feelings of fear and uncertainty.

A child might also be affected differently, depending on whether they've known someone with cancer before, and whether or not that person recovered.

With the right kind of help, parents and their children can and do learn to cope well with cancer and its treatments.

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Why Tell Children That a Parent Has Cancer?
Some parents are afraid their children will worry more if they are told the facts about what’s happening. But parents and children have very different life experiences. This makes it unlikely that a child will react to a problem the same way an adult would.

**It is impossible to keep cancer a secret.** Children often know when secrets are being kept, even if they don’t overhear anything. They can see that others are acting differently and usually sense that something is wrong. If they think something is being kept from them, some kids will even look for ways to listen without being noticed. When they overhear these conversations, they often pick up on the anxiety and worry of their parents. Kids tend to be afraid and believe the worst if they haven’t been given complete information. In addition, the effort it takes to keep such secrets may rob the parent of precious energy.

**If children hear about their parent’s cancer from someone else, like a curious neighbor or a classmate, it can destroy the trust that parents have worked to build.** If children think their parents are being vague on purpose or are trying to hide something from them, they might find it hard to know when they are being told the truth. It’s better that parents learn how to share this information truthfully and in a way that allows the child to understand and take part in the discussion.

Another problem in keeping cancer a secret is that the child may assume that whatever is happening is too terrible to talk about. This might make them feel isolated or shut out from the family, because no one will talk about their biggest concern.

Fred Rogers (Mr. Rogers) said, "Anything that’s human is mentionable, and anything that is mentionable can be more manageable. When we can talk about our feelings, they become less overwhelming, less upsetting, and less scary. The people we trust with that important talk can help us know that we are not alone."

This means that the natural desire parents have to protect their kids sometimes only makes things harder for the child. Parents know that it’s impossible to shield children from all of the stressful parts of life, and part of their job is to teach their children how to manage these challenges.

Cancer is also an extremely difficult secret to keep for obvious reasons. **Once treatment starts, the child may see side effects like tiredness, weight changes, hair loss, or vomiting.** Watching a parent’s physical changes can be very scary for a child.

- They see that the parent is sick, and might assume that the parent is going to die.
- They may think that others in the family will get the same illness or the child might fear they will catch the illness.
They may think that life as they know it will end.

Not knowing what’s happening or how to cope with it can be terrifying to a child. To avoid this, children need to be told about the illness. They should know in advance the kinds of side effects that cancer treatment might cause and the ways their daily lives may change.

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**How to Tell a Child That a Parent Has Cancer**

The child’s age is important in deciding what and how much you should tell about a cancer diagnosis. The guiding principle should be to tell the truth in a way that children are able to understand and prepare themselves for the changes that will happen in the family. Kids thrive on routine—it helps them feel safe. When life becomes unpredictable, they will need help adjusting to the changes.

Young children (up to 8 years old) will not need a lot of detailed information, while older children (8 to 12 years) and teens will need to know more. Teens, who are testing their independence and limits, will have very different concerns from a 5-year-old who needs parents for basic caregiving.

All children need the following basic information:

- The name of the cancer, such as breast cancer or lymphoma
- The part of the body where the cancer is
- How it will be treated
- How their own lives will be affected

**First, set up a quiet time when you won’t be disturbed.** You may wish to talk to each child alone so that information can be tailored to each child’s age and understanding.

This can also help the parent(s) pay closer attention to how each child responds. The child may also be more willing to ask questions when away from the other children and possible distractions. Be sure you have time to answer questions and a plan to manage interruptions before you start. If you stop to answer the phone, turn off the stove, or let
the dog out when your child is opening up to you, the child may find it more painful to try again.

Parents should choose a time when they are feeling fairly calm to talk to their children. If people are feeling upset or unsure about what to say, it might be better to wait until their emotions are a bit more under control.

In a 2-parent household, it’s a good idea for parents to talk to their children together. For single parents, it may help to ask an adult relative or friend who is a stable, consistent influence in the child’s life to be with them if they’re feeling a bit shaky about the talk. That is not to say that parents need to pretend that there is nothing to worry about. It’s OK if their kids see them crying sometimes. Parents can admit that this is an upsetting time, that cancer is a scary disease and that it’s OK to have strong feelings about it. But none of this means that the family won’t be able to handle it.

It helps to plan how you will talk with each child.

- Think about what you want to say and how to answer questions on a level each child can understand, but in a serious and thoughtful way.
- Think of possible questions they may ask ahead of time, and you will be less likely to be caught off guard.
- Try to lay the groundwork for an open line of communication with the child—a way for the child to come to you with their concerns, needs, and fears.
- Regularly check in with each child during and after the cancer treatment, it can be a great comfort to them.

Children blame themselves

Besides the illness itself, children have other worries about the cancer. The most common of these is that something they did or didn’t do might have caused the parent’s illness. We know this isn’t true, but most children believe this at some point during the cancer experience. Children engage in “magical thinking.” They believe they are the center of the world and that they can make all kinds of things happen.

Children can also believe that bad things happen because they have been angry with their mom or dad and now the child is being punished. Children and even teens can feel guilty. Reassure children even if they do not express these feeling. Parents can say something like, “The doctors have told us that no one can cause someone else to get cancer—it’s nothing that any of us made happen.” It’s better not to wait to see if children
bring this up because they could be feeling guilty without saying so.

Teens may also need to be reassured in a different way. Teens and the parent who is sick may have been arguing a lot or the teen may feel they did not appreciate their parent enough, so in the back of their mind they see the cancer as punishment. You may say, “I know you and I (or dad or mom) have been arguing a lot, but that has nothing to do with this illness.”

**Children might worry cancer is contagious**

Children may also worry that cancer is contagious and they can catch it, or that everyone dies from it, or that the other parent will get it, too. It’s a good idea to correct these ideas before the child has a chance to worry. Kids can become confused about how people get sick. A common worry is that cancer can be passed from one person to another, like a cold. Parents can explain that cancer is a different kind of illness and the child doesn’t have to worry that someone passed it on to Mom or Dad or that they will get it.

Parents should also say that it would be very unusual for the other parent to get sick. They may want to tell their children something like this: “Years ago, people often died from cancer because doctors didn’t know much about how to treat it. Doctors have learned a lot more about it since then, and there are treatments that can cure many cancers. Now, people can live with cancer instead of dying from it.”

So along with the basics about the parent’s cancer as noted above, be sure to stress these facts:

- No one caused the parent to get cancer. (It’s not the child’s fault.)
- You can’t catch cancer like a cold or the flu—it’s OK to hug or kiss the person with cancer.
- The family will work together to cope with cancer and its treatment.
- Even though the sick parent may not have as much time with them, the children are loved and will be taken care of while the parent is sick.

You may need to make these points more than once. More importantly, the parent and other adults in the child’s life can serve as examples and remind the child of these things too. Children pick up on small cues in how you and others act around them, so if they notice adults don’t hug the sick parent like they used to, a child may worry. If adults are in a hurry and don’t speak as kindly to the children as they once did, the children may think the adults are mad at them or blame them in some way for their parent’s
illness.

Children also need to understand some basic terms about cancer. We have defined some of the more common words in Words to Describe Cancer and Its Treatment\(^1\).

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**How Will My Child React?**

A child’s emotional reaction to this news will depend on many things, including how the information is given to them and the child’s experience with illness. Sometimes parents worry about showing unpleasant emotions in front of their children. They may worry this will scare the children or may fear that their own grief, anxiety, or pain will somehow affect their child’s ability to cope with the illness.

In the media and from others, you often get advice to keep a "positive attitude." While it’s true you might be better able to handle cancer and its treatment when you are able to look at things in a positive light, that is not always possible. When people try to deny the very real feelings of fear and sadness, which are a part of any cancer diagnosis, the effort often just doesn’t work. The energy it takes to hold in “bad” feelings can make coping much harder.

For many people, a grieving process starts with a cancer diagnosis. It’s normal to be sad and upset after being told you have cancer. It often feels as if nothing will ever be the same. Patients grieve for the loss of safety and predictability in their lives, and for the future that may not turn out as planned. If they can face these feelings, it’s might be easier for them to work on meeting the challenges ahead. Parents and other adults can model healthy expressions of a full range of emotions. This allows children to express their emotions as well. No one wants to alarm their children by being hysterical. But there’s nothing wrong with shedding a few tears when your family has a crisis.

Parents can tell their kids that there will be times when they will need to cry, because it helps them feel better. Parents can assure them that at some point they won’t need to cry about the situation, but it’s OK for them to express all of their feelings. Everyone deals with problems in a different way, and it’s fine to feel angry or sad as long as you don’t use these feelings to hurt themselves or others. It’s important for parents to give themselves permission and time to figure out what’s best for them and each family member.
Remember, prior experience will affect children’s reactions. If other family members, friends, or acquaintances have died from cancer then children may assume that will happen again. Make sure they understand that each person is different, and just because Grandpa died 5 years ago doesn’t mean the same thing will happen now. Cancer treatment changes from year to year and better treatments are being tested all the time. Even though no one can predict the future, more people are approaching cancer treatment today with new hope.

Every child responds in his or her own way to the news of a parent’s cancer diagnosis.

The child’s age, personality, relationship to the parent, and the way information is presented are just a few factors that can influence how a child will react. A child who is very dependent may become even more so during that crisis of a new cancer diagnosis. A child who always imagines the worst may do so now. A child who plays rough with his toys when upset may get even rougher.

Children can’t always tell you in words, but may show you how they feel.

Most parents get an idea about what’s going on with their kids by watching how they act. A parent who sees their kids fighting with each other after learning about the diagnosis can probably assume that this is their way of showing they’re upset. Parents can put this into words by saying something like, "I know everybody is more worried right now, but let’s talk about this instead of fighting." Children’s language is play and feeling may be expressed in their play as well. Their dolls may become "sick." They may also express themselves through drawing or coloring.

A child may act less mature when upset.

In general, parents can expect that the stage of a child’s development dictates how well he or she understands what’s going on. Children tend to regress (act younger) when they are under stress. Adults often do the same. A child who has just become toilet trained may start having accidents. A child who has gone off to kindergarten quite happily may become upset when they have to be away from the parent. Kids who have problems paying attention in school might have even more trouble than before. Even older children may regress. This may show itself in separation anxiety with a reluctance to leave the parent(s). Sleep disturbances are also common at all ages. Children may have trouble sleeping or alone or have nightmares.
The child’s level of trust will show up in their behavior.

In most cases, children who are truthfully told what’s happening from the very start will be less anxious than children whose parents try to avoid answering questions. Being honest with your children during this time can help build trust. This doesn’t mean you should tell them everything all at once. For younger children, it’s best to give out the information in small doses, ask them if they have questions, and then answer their questions. If you don’t know the answer to a question, tell them you will have to find out, and then get back to them. You can keep them up to date as events progress.

Cancer treatment will bring out new and different responses from children.

Telling children about your cancer diagnosis is different from helping them deal with the daily reality of treatment. As you get ready to move into cancer treatment, you might want to see Helping Children When a Family Member Has Cancer: Dealing With Treatment. It has helpful tips and information about talking with children of different ages about cancer and its treatment.

What If My Child Asks If I’m Going to Die?

The question, "Are you going to die?" needs to be answered—even if it’s not asked. Whether or not you openly talk about it, you can be sure that your loved ones are worrying and thinking about death. We share some ideas in this section for ways you can respond to questions about death.

This question causes the most distress for families. It’s a good idea to rehearse how you are going to respond to this, either with someone else or just to yourself. There are some things you should know before you decide how to answer this question. First, admit to yourself that this is a scary question for you as well as your family. It’s a hard question for children to ask, and they may never have the courage to ask it outright. Plan a time to bring it up to them even if they don’t ask.

When talking to a child about whether the parent will die from the cancer, there are a
number of different messages. Here are some examples of what other parents have said:

Sometimes people do die from cancer. I’m not expecting that to happen because the doctors have told me they have very good treatments these days, and my type of cancer usually does get better with treatment.

The doctors have told me that my chances of being cured are very good. I’m going to believe that until I have reason to believe something else. I hope you can believe that too. I’ll tell you if I find out anything new or different.

Right now, there’s no way to know what’s going to happen. I’ll know more after the first treatments are finished. When I know more, I’ll be sure to tell you.

There’s not a lot known about the kind of cancer I have. But I’m going to give it my best shot and do everything I can to get well.

My cancer is a hard one to treat but I’m going to do everything I can to get better. No one can know right now what will happen down the road. What you can be sure of is that I’ll be honest with you about what’s going on. If you can’t stop worrying, please tell me so that we can work on that together.

Clearly, what people tell their children depends on how they understand their type of cancer and its possible outcome. Even with an uncertain future, patients still need to work on what they must do to live with their illness. Children need to do the same. No matter what words are used, one of the most important things for parents to get across to their children is their desire to tell them the truth. This does not mean that parents should tell their kids everything they know as soon as they know it. It means that children should be given truthful information when they need it in order to cope well from day to day. A parent might say, for example:

I don’t want you to worry about the future at this point. Let’s think about what’s going on right now. If that should change, I promise you I’ll tell you. I will always try to tell you the truth. I want you to ask me any questions you have and I’ll do my best to answer them.

How Can I Reassure My Child That
Everything Will Be Fine?

Parents probably cannot offer the kind of overall reassurance they would like to when they first learn they have cancer. This is because no one really knows at that point how treatment will go and whether everything really will be OK. You don’t want to say this if it isn’t true, because you can lose the child’s trust. There are things that parents can do to help their kids cope.

Parents can reassure children that no matter what happens, they will always be cared for. Children may want a specific plan. If the parent is feeling sick, they will arrange for someone else to fill in. Telling children, "If something were to happen to me then..."

Children of single parents may worry in particular who will care for them if their parent dies. The most important issue for children of any age is their own sense of security and safety. A parent’s cancer can make families feel that their lives are totally out of control. Though it may be difficult to discuss the worst case scenario, children need to know that there is a plan and that they will be cared for no matter what happens.

Parents should try to keep as much of their children’s lives the same as possible. Children especially young children thrive on routine and predictability. This may sound like a tall order, but preparing children and accepting help from others can help life run more smoothly.

When you talk about your diagnosis and treatment, it’s a good idea to prepare children for the fact that certain changes will need to be made in the family routine. Parents will need to call on others to fill in for them during periods of active treatment. Loved ones, friends, neighbors, and even the parents of your children’s friends can be a great help in keeping daily life as normal as it can be.

When these changes in family routines are explained to children, they offer a powerful message that Mom or Dad is still in charge and the child’s needs have not been forgotten. Life will go on as normally as possible given the crisis the family is facing. The children will not be left on their own. Parents should confirm that no one is happy that life seems turned upside down right now, but it won’t last forever. In the meantime, tell children over and over again you love them and that you are working to be sure they are cared for.

Sometimes kids react strongly to changes in routine and parents may feel frustrated and even angry as they try to meet everyone’s needs. Keep in mind that it’s no one’s fault when a parent gets cancer and nothing can be done change this, but people do have
choices about how to handle the situation. Find something in the situation that the child has a choice about, for example whom they would like to meet them at the school bus, or what they’d like to take with them when they go to a neighbor’s after school. Children are not expected to like it when their routines are disrupted—adults don’t like it either. Parents can admit this to their children, along with the fact that they have a right to feel angry and upset right now and they can also model healthy coping for the children.

**Children want to be useful**

Teens present special challenges because they tend to test their need for independence. It makes sense to ask them to be there to fill in more for an absent or ill parent. But sometimes there may be a fine line between asking for help from a teenager and giving them too much responsibility. It can help to assure them that you know they need their own time and space in spite of the fact that a parent is ill.

Even younger children may want to feel useful by helping more around the house or caring for the sick parent. It’s important to recognize this desire in children and teens without overburdening them. It may also help to set up family meetings in which parents and children can review how things are going in the family and decide what should be different or stay the same.

Some families find it hard to ask for help. We know from experience that people who try to manage cancer alone will have a harder time. Try to remember that usually people really do want to help, and if you let them, they feel useful and needed. You will need to tell them exactly what you and your family need from them. If no one is available to help, patients or their loved ones should ask to talk with the hospital social worker or the nurse in the doctor’s office about any community agencies that can help.

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**What if My Child Needs Extra Help?**

Deciding if your child needs professional help can be confusing as parents try to sort out what’s a "normal" response to a new cancer diagnosis and what’s not. Parents already have experience with how their child has dealt with other stressful events. Most parents can tell exactly how each of their kids acts when they are upset. Children, especially young ones, are often unable to identify their feelings and talk about them, so they show us by their behavior. Some children will become withdrawn, while others may fight, whine, and complain. The most important thing to look for is how extreme the change is
and how long it lasts.

Depression in children can look different from depression in adults. For instance, a common sign of depression in a child is a change in behavior, like suddenly getting poor grades in school or losing friends. Most children whose parents have cancer seem able to cope, but there may be times when it gets to be too much. If a child seems to be having trouble, it may mean a more serious problem than the normal, sad response to cancer. Extra help is needed if a child:

- Is unable to handle the feelings of sadness
- Feels sad all the time
- Cannot be comforted
- Admits to thinking of suicide or of hurting herself or himself
- Feels extra irritable
- Becomes very angry very quickly
- Has changing grades
- Withdraws or isolates himself or herself
- Acts very differently from usual
- Has appetite changes
- Has low energy
- Shows less interest in activities
- Has trouble concentrating
- Cries a lot
- Has trouble sleeping

When a child shows 1 or 2 of these symptoms, it may help to offer more support, but if the usual methods of handling these problems are not working, or if the problem goes on for more than 1 or 2 weeks, the child may need extra help. (If the child or teen talks about wanting to hurt him or herself or wanting to die, seek professional help immediately. A mental health professional can do a suicide risk assessment.)

It may be useful to talk with the child’s pediatrician, school counselor, or with the social worker or counseling staff at the hospital where the parent is being treated. Since these experts know how other children have reacted in situations like this, they may be able to offer a useful way of looking at the problem. They can evaluate the child and make sure that any needed help is given. They can also suggest books, videos, and children’s support groups that may help. A referral to a play or art therapist who works specifically with children or teens may be helpful. Occasionally, a child or teen may need to see a psychiatrist.
Finally, if one of the child's parents or main caregivers becomes depressed, the child is more likely to have problems. Sometimes the child’s problem may not look very serious because the child or teen may say very little and hold everything inside. If you or other family members start to feel overwhelmed or distressed, see a mental health professional to get an idea of what kind of help you and your family may need. You can talk with your cancer team to find out where to start. Ask your doctor or nurse, "Who can we talk to if one of us feels overwhelmed or depressed? I am worried about how this will affect the children." For more information on adult depression, see Anxiety, Fear, and Depression

References

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