

## **Sigma's 30th International Nursing Research Congress**

### **Concept Analysis of Double-Protection in Parent-Child Communication in Childhood Cancer Context**

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#### **Purpose:**

A diagnosis of childhood cancer is one of the most challenging experiences a family can face. This event initiates a trajectory that involves the entire family and disturbs family functioning, including communication (West, Bell, Woodgate, & Moules, 2015). The concept of double protection is used to describe a communication process of avoidance used by parents and their child or adolescents with cancer in attempts to protect the other against disease-related stress and emotions resulting from communication about the cancer, its treatment, thoughts about the future (Last, 1992). This theme in parent-child communication has the potential to develop negative patterns at the individual and family level (Bell et al., 2018; Jankovic et al., 2008; Kreicbergs, Valdimarsdóttir, Onelöv, Henter, & Steineck, 2004; Nuss, 2014). This concept has received limited attention in the research literature. Therefore, the purpose of this paper is to clarify use of the concept of double protection in parent-child communication in the childhood cancer context and contribute to an explanation of its defining characteristics, applicability, and significance. In addition, this paper distinguishes the concept's unique meaning and usefulness compared to other related terms.

#### **Methods:**

Rodgers' evolutionary method of concept analysis provided the framework for this analysis. Data were retrieved from the Cumulative Index of Nursing and Allied Health Literature (CINAHL) and MEDLINE databases (PubMed) and the PschyINFO database. The literature review was conducted to search the phenomenon of interest, rather than finding the exact concept, because there has been lack of use of the concept of "double protection" in parent-child communication in the context of childhood cancer. The literature search used the keywords "parent," "child/adolescent," and "cancer." The sample included 12 papers published in English between 2007 and 2018. In addition, to provide empirical data to enhance the concept of double protection, additional data were collected through an ongoing pilot study using qualitative descriptive study design, including semi-structured interviews with 10 dyads of Korean adolescents with cancer and their parents. The findings from this descriptive study supported the concept of double protection. Data were then collected from the sample of retrieved literature and interviews on antecedents, attributes, and consequences of double protection. Mutual pretense as a related concept was also explored for purposes of comparison and to situate the understanding of double protection in context.

#### **Results:**

Over two decades, the concept of double protection hardly changed and rarely documented. Exploration of its defining attributes revealed that double protection may be characterized as: bi-direction, intention of protecting each other against unexpected distress from engaging in communication about cancer-related topic and involvement of self-disclosure. Antecedent embodied the knowledge of parents and children concerning the child's cancer diagnosis and the belief that communication about topics related to that cancer would cause distress. The consequences of double protection were major impacts on the family at the individual level on the entire family system. Individually, children and adolescents with cancer suffer from isolation, loneliness, fear, and did not receive necessary interventions to relieve their psychological suffering. In addition, when parents failed to engage in open and clear parent-child communication, those

parents also suffered from life-long regret. Finally, the failure to engage in parent-child communication because of double protection prevented development of family cohesion and adaptability.

**Conclusion:** The concept of double protection has been found to be a relevant challenge in communication. The concept has persisted for decades and not been limited to any specific culture. Rodgers (1989) stated that a concept's ability to assist in resolving problems is an important criterion for judging significance. The concept of double protection highlights the nature of the urgent communication issue in families of children with cancer and provides us with insight on how to manage this issue. However, considering that concept is evolving, application and continued analysis in communication in the context of childhood cancer is required. In addition, this concept should be analyzed in the broader context of chronic illness rather than being limited to childhood cancer.

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**Title:**

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**Keywords:**

Childhood cancer, Double protection and Parent-child communication

**References:**

- Bell, C. J., Zimet, G. D., Hinds, P. S., Broome, M. E., McDaniel, A. M., Mays, R. M., & Champion, V. L. (2018). Refinement of a Conceptual Model for Adolescent Readiness to Engage in End-of-Life Discussions. *Cancer Nursing, 41*(2), E21-e39. doi:10.1097/ncc.0000000000000465
- Jankovic, M., Spinetta, J. J., Maser, G., Barr, R. D., D'Angio, G. J., Epelman, C., . . . Eden, T. (2008). Communicating with the dying child: an invitation to listening—a report of the SIOP Working Committee on Psychosocial Issues in Pediatric Oncology. *Pediatric Blood and Cancer, 50*(5), 1087.
- Kreicbergs, U., Valdimarsdóttir, U., Onelöv, E., Henter, J.-I., & Steineck, G. (2004). Talking about death with children who have severe malignant disease. *New England Journal of Medicine, 351*(12), 1175-1186.
- Last, B. F. (1992). The phenomenon of double protection. In B. F. L. a. A. M. v. Veldhuizen (Ed.), *Developments in Pediatric Psychosocial Oncology*(pp. 39-51). Amsterdam/Lisse: Swets & Zeitlinger Publishers.
- Nuss, S. L. (2014). Redefining parenthood: surviving the death of a child. *Cancer Nursing, 37*(1), E51-60. doi:10.1097/NCC.0b013e3182a0da1f
- Rodgers, B. L. (2000). Concept Analysis: An Evolutionary view. In B. L. Rodgers, Knaf, Kathleen A., (Ed.), *Concept Development in Nursing; Foundations, Techniques, and Applications*. (2 ed., pp. 77-101). Philadelphia: Saunders.
- West, C. H., Bell, J. M., Woodgate, R. L., & Moules, N. J. (2015). Waiting to Return to Normal: An Exploration of Family Systems Intervention in Childhood Cancer. *Journal of Family Nursing, 21*(2), 261-294. doi:10.1177/1074840715576795

**Abstract Summary:**

The concept analysis of double protection in parent-child communication in the context of childhood cancer enhanced our understanding of parent-child communication issues and provided us insight to resolve the urgent issue of parent-child communication in the context of childhood cancer.

## **Content Outline:**

1. **Introduction**
2. Background of the issues in parent-child communication in the context of childhood cancer.
3. Need for concept analysis of double protection in the context of childhood cancer.
4. Purpose statement
- 5.
6. **Body**
7. Main Point #1 Defining context and relevant terms
8. Supporting point #1 Defining context
9. a) Discuss the importance of defining context of the applied concept
10. b) Discuss the concept in communication and childhood cancer
11. Supporting point #2 Mutual pretense as relevant terms
12. a) Discuss similarities of the concept of double protection and mutual pretense
13. b) Discuss differences between the concept of double protection and mutual pretense
- 14.
15. Main Point #2 Describe attributes
16. Supporting point #1 Bi-direction
17. a) Discuss the concept of bi-direction between parents and children as a characteristic of double protection
18. Supporting point #2 Intention to protect others
19. a) Discuss the concept of intention to protect others as a characteristic of double protection
20. Supporting point #3 Self-disclosure with depth
21. a) Discuss the concept of self-disclosure as a characteristic of double protection
22. Supporting point #4 Empirical evidence from qualitative design study-Interview quotation
- 23.
24. Main point #3 Describe antecedents
25. Supporting point #1 Knowledge of parents and children regarding the child's diagnosis of cancer
26. a) Discuss how the knowledge of parents and children regarding the child's diagnosis of cancer influences on development of double protection
27. Supporting point #2 Belief of parents and children that sharing their thoughts and feelings related to cancer cause emotional harm to each other
28. a) Discuss how their belief that sharing their thoughts and feelings related to cancer cause emotional harm influences on development of double protection
29. Supporting point #3 Empirical evidence from qualitative design study-Interview quotation
- 30.
31. Main point #4 Consequences
32. Supporting point #1 Describe consequences of double protection.
33. a) Identify and discuss the consequences of double protection with evidence from interview quotation.
- 34.
35. Main point #5 Model Case
36. Supporting point #1 Present a model case to demonstrate the concept of double protection.
37. a) Interview quotation of dyads of parent and adolescent with cancer will be presented to enhance understanding of concept of double protection in communication in the context of childhood cancer

## **III. Conclusion**

1. Highlight the identified gaps in the current research on the concept of double protection
2. Discuss areas for future research on concept of double protection.

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**Author Summary:** Heeyeon Son is a second year Ph.D student at Duke University School of Nursing. Based on her clinical experience, she has developed interest in improving the quality of life of pediatric cancer patients and their families, Her current research focuses on improving family communication in the context of childhood cancer.

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**Author Summary:** Dr. Docherty's research is aimed at improving outcomes for children, adolescents, young adults and families undergoing intensive treatment for life-threatening and chronic conditions. She studies how to improve care models, symptom management, and decision making from diagnosis through end of life. She has methodological expertise in the use of qualitative, mixed-methods, trajectory science and visualization methodologies for complex data exploration, and intervention development and testing.