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**PARENT-CHILD RELATIONSHIP IN FAMILIES WITH A CHILD
SICK WITH BLOOD CANCER**

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Abstract

The article presents the results of experimental studies of the psycho-diagnostic parent-child relationship in 25 families with preschool children (5-6 years), who are patients of acute lymphoblastic leukaemia. The study was conducted using the following methods: PARI, (Schaefer and Bell); "The analysis of family relationships," (Eidemiller and Yustitskis); Rene Gilles, aimed to study the sphere of interpersonal relations of the child and his perception of family relations - "Kinetic family picture," as modified by Burns and Kaufman. The results of our study have shown that 'psychologically affluent' families were ones where affected children (boys) were in a relationship with their families and siblings. The families of the girls indicated "phobia of losing a child" and "conflict between the parents." In families with only one child predominantly, there were "conflict between parents", "emergency intervention in the child's life," and "projection on the child's own undesirable qualities." The threat of the loss of an only child, of course, is a very painful experience for parents, causing a lot of negative emotions and conditions. Analysis of the relationship between the studied parameters in single-parent families has shown that the more a mother takes care of her seriously ill child, the less the child needs to communicate and the more negative the child relates to siblings. Parental conflicts lead to the fact that the child has become an indicator of dominance within the family relation.

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1. Introduction

Child's cancer- is an ordeal for the whole family. Although the effectiveness of the treatment of such children has increased, the statistics remain disappointing in recent years. Families facing severe childhood disease experience the most difficult psychological problems to overcome, and thereby need qualified professionals. The effectiveness of this assistance depends on the understanding of the parent-child relationship in families with seriously ill children. That relationship with parents and support from their side are the basic resources for a child with cancer. Thus, the features of the study of parent-child relationships in families with seriously ill children are of practical importance for the organization of comprehensive assistance to such families.

2. Research Questions

The problem of children who spend much time in the hospital - is socialization. This problem is solved by improving the psychological climate in the family. The sick child's attitude to his father and healthy siblings depends on the mother coping with their educational function. For a sick child, it is important to feel involved in the family process. The most suitable psychological situation in families is educating girls. (Fedorenko & Baranova, 2016; Biktagirova, 2017)

3. Purpose of the Study

The purpose is to study the features and style of family education, parental settings, and relationship of the sick child with other people.]

[Subject of research - psychological characteristics of child-parent relationships in these families and the study of the relationships researched indicators.]

The objects of our study were preschool children (5-6 years), diagnosed with acute lymphoblastic leukemia, and their mothers. In total, 25 families were involved, 18 of which were raising a sick child with siblings, 7 families with single children; 12 of the families are with girls, while 13 families are with boys suffering from blood cancer.

4. Research Methods

The following methods were used for achieving this goal: a questionnaire "The analysis of family relationships" of (AFR) Eydemiller, which is intended for the diagnosis of inharmonious education type, conducive for the emergence and development of pathological changes in the child's personality. The methodology incorporated 20 scales that reflect the basic styles of family education, provides insight into the structural and role-family aspect of life, demonstrates the peculiarities of the system of mutual influences, and shows the work of family integration mechanisms. Stable combinations of various features of education are inharmonious type of education; method of studying the parental plants (PARI – parental attitude research instrument) is designed to explore the relationship of parents towards different sides of the family life. The procedure marked the 23 features of aspects relating to the different sides of parents towards the child and family life. Researching interpersonal relations in the system of "parent-

child" through the eyes of a parent; projective technique of Gilles (TF) (LeTest-Film, Rene 'Gille) to study specific - personal, child emotional relationships with other people, including members of his family. This methodology examines the parent-child relationship through the eyes of a child. The technique makes it possible to describe the system of personal relations of the child, and is made up of two groups of variables: 1. The indicators characterizing the personality of the child-specific relationships with others: 1) the mother; 2) father; 3) both parents; 4) brothers and sisters; 5) grandparents; 6) others (girlfriend); 7) teacher (a teacher or other adult authority for the child); 2. The indicators characterizing features of the child: 1) curiosity; 2) the desire to dominate in the group; 3) desire to communicate with other children in large groups; 4) being separated from the other, the desire for solitude; 5) the adequacy of social behaviour. The method of "Kinetic drawing family" (KDF) by Burns and Kaufman. This test provides information about the subjective family situation of the child, helps to identify the family relationships that cause anxiety in the child; it shows how he perceives the other members of the family and his place among them.]

[Beyond the qualitative assessment of the results, all the indicators get their quantified concept with the help of Microsoft Excel and STATISTICA 7.0 application package program (calculation of data average, correlation analysis, differences in reliability criteria).]

[All diagnostic procedures were carried out under the supervision of a psychologist. Parents gave written consent to participate in the experiment, and the participation of their children suffering from leukaemia.

5. Findings

5.1. Comparative analysis of the correlations between the studied parameters in all families:

PARI Indicator methodology «The feeling of self-sacrifice" has a direct connection with the indicator techniques TF «to the Father» ($r = 0,48$, at $p < 0,05$) and a strong direct link with the index methodology FP «anxiety» ($r = 0,60$, $p < 0,05$). If the mother, in a situation of a child's illness, feels like a victim, the anxiety of the sick child will increase, but the relationship with his father will improve.

Indicator of the PARI method «husband escape" has a direct connection with the strongest indicators of the TF method "Dominance" and "Communication» ($r = 0,65$, $r = 0,73$ at $p < 0,05$). If she appreciates her husband as indifferent to family problems, it will develop indicators of sociability and dominance of the sick child. Index methodology the PARI "from family dependence" has a direct link with Rene Zhil's index methodology "relationship with the mother and father as the parental couple," The more a mother feels dependent on the family, the more her feelings of self-sacrifice, the more a child with leukemia feels that the father is not a family member, and the higher the child feels "Anxiety" and "closure". The more parents are taking care of a sick child, the less his desire to communicate with their peers, with sisters and brothers.

Interestingly, the children measure the RG "Attitude to a friend" has an inverse correlation with indicators of the PARI "disinterested husband" "The suppression of sexuality", "Dominating mother» ($r = -0,53$, $r = -0,50$, $r = -0,46$, with $p < 0,05$). If the family's mother takes over the duties of her husband, suppressing his sexuality, the child's relationships with friend become worse.

Indicator "emergency intervention in the world of the child" PARI methodology has a direct correlation with the indicator techniques of cattle "conflict in the family" and "hostility in the family situation," the opposite - with an indicator "A sense of inferiority in the family situation» ($r = 0,48$, $r = 0,46$, $r = - 0,40$, at $p < 0,05$). In other words, interference in the internal world of the child perceives as hostile to the conflict within the family and at the same time it reduces the feeling of inferiority in the family. Also, the rate of "hostility to the family situation 'is directly linked with the parent index" Suppression of aggression »($r = 0,40$, at $p < 0,05$). Despite the fact that the parent will try to suppress their aggression, the child will perceive the situation in the family, as hostile.

Indication cattle "Anxiety" is directly linked with indicators "Suppression of will", "The feeling of self-sacrifice" and "Fear of offending" the parent technique PARI ($r = 0,39$, $r = 0,60$, $r = 0,52$, at $p < 0,05$). That is, if the mother feels like a victim in a situation where a child is seriously ill, it suppresses her will, for the fear of offending a growing infant anxiety.]

5.2. Comparative analysis of the correlations between the studied parameters in groups of families with siblings and those with single children, diagnosed with blood cancer:

[The PARI «Indicator methodology excessive concern" has a feedback with indicators of the RG method "relationship with brothers and sisters", "Curiosity" and "Dominance» ($r = - 0,44$, $r = - 0,39$, $r = - 0,44$, at $p < 0,05$). Thus, the more a mother will care for a sick child, the worse this will relate to other siblings, and the less the sick child will be curious and less possess leadership qualities.

The indicator of parental techniques AFR "the minimum sanction" has a direct relationship with the RG indicator "relationship with brothers and sisters", and inversely "of the teacher (the authoritative adult)" and the index methodology cattle "Anxiety» ($r = 0,42$, $r = - 0,43$, $r = - 0,47$, at $p < 0,05$). Thus, a sick child's indulgence leads to a deterioration of relations with siblings, when family relations situation is not perceived by the child as alarming. But when the index rises AFR "Phobia of loss of the child" and "undeveloped parental feelings," then rising rate of cattle "Anxiety» ($r = 0,43$, $r = 0,43$, at $p < 0,05$). Indicator "Underdevelopment parental feelings" is directly related to the RG indicator "to the Father" and back to the indicator "relationship with brothers and sisters» ($r = 0,45$, $r = - 0,48$, at $p < 0,05$). The more the mother blunted the feelings of parents, the better the relationship with the father of the child, but the worse with siblings.]

5.3. Comparative analysis of the correlations between the studied parameters in groups of families raising girls and those boys with blood cancer:

[Comparison of significant correlations for the two samples t-test showed that there is no difference in terms of: a technique the PARI "The feeling of self-sacrifice" and methods of cattle "Anxiety" $t = 0,42$, ($r = 0,71$, $r = 0,77$, at $p < 0,05$). This means that both girls and boys will be equally anxious to rise in response to the mother's sense of self-sacrifice. If a father runs away from child's upbringing, the boy or girl will react to this by increasing dominance in the family. Index methodology the PARI "runaway husband" directly correlated with indicators of the RG method "Dominance" and "Communication», $t = 0,25$, ($r = 0,73$, $r = 0,64$, at $p < 0,05$). Also both girls and boys will seek to dominate if the mother's rate of sexual repression increases. Indicator methodology PARI «suppression of

sexuality" is directly connected with the index methodology RG «dominance» $t = 0,15$, ($r = 0,67$, $r = 0,62$, at $p < 0,05$).

The PARI index 'non-self' Mothers of girls has feedback RG Index «Attitude to a friend" and the "desire for solitude» ($r = -0,76$, $r = -0,84$, at $p < 0,05$), while the boys, this figure has a direct relationship with the RG indicator "relationship with brothers and sisters", "communication" and indicator methodologies cattle "favorable family situation» ($r = 0,77$, $r = 0,57$, $r = 0,61$, at $p < 0,05$). That is, the less autonomy the mother shows in the family, the more unsociable girl becomes, unlike the boy who, on the contrary, will be more self-sufficient in the manifestation of masculinity, more responsibility to take the family in relation to the brothers and sisters and all family situation.

Indicator methodology AFR"acquiescing" in girls has an inverse correlation with the index methodology cattle "favorable family situation» ($r = -0,76$, at $p < 0,05$). In boys, the figure is directly related to performance "to the Father" and "Relationship to other" techniques RG ($r = 0,56$, $r = 0,68$, at $p < 0,05$). Parental indulgence in raising girls will lead to the fact that the family environment is not perceived as favorable, unlike boys, for whom indulgence improve relations with his father and friends.

6. Conclusion

The situation of cancer and it's difficult and long treatment cause some changes in child's, parents' and his siblings' relationships, influence his personal qualities and these lead to special methods of upbringing and special parent-child relationship. Families that have a child with cancer often face different psychological problems. It can cause failure or destruction of family relationships. Healthy children in families with sick children suffer as they don't get necessary development and parents' attention (Afanasyev & Fedorenko, 2016). As it was discovered, mothers who bring up a disabled child have emotional breakdown and negative attitude towards divorce and also give husband possibility to be the main figure in the family more often than other mothers who bring up a healthy child, while hypochild protection takes place more seldom. They understand that their child needs the help of qualified professionals, but most are not satisfied with communication with them to underestimate their own role in the rehabilitation (Kocherova, 2006).

Thus, Japanese authors (Yamazaki et al., 2005) compared the quality of life those mothers whose children are sick with leukemia and those, who are not. Quality of life (SF-36), mothers (97 people), whose children are sick with leukemia, compared with indicators of the quality of life of mothers (240) whose children are not ill with it. Mothers of children with leukemia who need hospital care, have low ph, especially with respect to mental health and social functioning, and are at greater risk of depression. These results indicate that the current system for the treatment of leukemic diseases of children in Japan should also include careful monitoring of maternal mental health, as well as ensuring the proper treatment and psycho-social support.

The following article authors confirm that parents whose children have cancer suffer post-traumatic stress, which does not stop even if the child survives. Besides, parents of sick children have two problems, being in hospital with their children: it is the lack of information about what is going on with their child and the lack of emotional support, while the mother is in dire need of it (Axia et al., 2006).

In Taiwan (Yeh, 2002) 164 couples whose children have cancer were examined. It turned out that mothers have higher levels of stress, depression and anxiety. It was concluded, that all family members are in need of counselling at the time of making cancer diagnosis. Permanent psychosocial support should be integral components of the treatment program

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