

Title: Bereaved Parents and Siblings Continue Bonds with Children who Died of Cancer

Authors: Terrah L. Foster, PhD, RN, CPNP,<sup>1</sup> Mary Jo Gilmer, PhD, MBA, APRN, CNL,<sup>1</sup> Betty Davies, RN, PhD, FAAN,<sup>2</sup> Maru Barrera, PhD,<sup>3</sup> Diane L. Fairclough, DrPH,<sup>4</sup> Kathryn Vannatta, PhD,<sup>5</sup> and Cynthia A. Gerhardt, PhD<sup>5</sup>

<sup>1</sup>Vanderbilt University, <sup>2</sup>University of California San Francisco, <sup>3</sup>Hospital for Sick Children, <sup>4</sup>University of Colorado Denver, <sup>5</sup>The Research Institute at Nationwide Children's Hospital

Learning Objectives:

- 1) Describe the concept of continuing bonds.
- 2) Describe how bereaved parents and siblings maintain bonds with children who died of cancer.
- 3) Describe the effects of continuing bonds on bereaved parents and siblings.

In the United States, 55,000 children die annually. Negative consequences for bereaved families include mortality, marital disruption, and mental illnesses. Continuing bonds have been studied in families following death of an adult but seldom in families following death of a child. It is uncertain how bereaved family members continue bonds with deceased children and if continuing bonds help families cope with children's deaths.

The purpose of this study was to examine how bereaved family members continue bonds with children who died from cancer.

Participants included 107 bereaved parents (n=66) and siblings (n=41, ages 8-18) of 41 children who died from cancer. Families were recruited 3-12 months after the death (M=12.61, SD=5.77) from three children's hospitals in the United States and Canada. Researchers conducted semi-structured home interviews, asking open-ended questions with each family member separately. Content analysis identified emerging themes.

Parents and siblings identified two major categories of continuing bonds. Participants purposely chose triggers to remember deceased children (e.g., keeping visual representations, keeping personal belongings, visiting locations children occupied, engaging in activities to honor children, communicating with children, doing things children liked). Second, grieving family members experienced nonpurposeful triggers that reminded them of deceased children (e.g., dreams, signs/visits from children, feeling children's presence). Most parents and siblings experienced comforting effects from purposeful and nonpurposeful memories; they chose to avoid reminders when discomforting effects occurred.

This study contributes to the knowledge about continuing bonds. Findings suggest that continuing bonds may be a helpful coping strategy for bereaved family members.

Practice implications include promoting awareness of the nature of continuing bonds among both families and healthcare providers and facilitating opportunities for bereaved

families to continue bonds with deceased children; both are strategies for optimizing aftercare for surviving family members. Future research will examine relationships among continuing bonds and coping strategies in bereaved families.