

**FEATURES OF EXPERIENCE AND COPING BEHAVIOR OF PARENTS OF CHILDREN WITH CANCER**

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**Abstract**

The results of the study presented in the article aimed at finding out and empirically investigating the psychological factors of the experiences and coping behavior of parents of children with cancer. The sample includes parents of children with cancer who were treated at the National Cancer Institute of the Academy of Medical Sciences of Ukraine and the Dacha Rehabilitation Center (Kyiv). Number of respondents - 61 person, 58 women (95.1%) and 3 men (4.9%), average age - 38.21 years; used tools: method "SAN" (modification of V. Doskin), method "Self-assessment of emotional states" (A. Wessman, D. Ricks), author's questionnaire to identify objective components of the situation associated with cancer in children; test "Strategies of overcoming behavior" (R. Lazarus, adapted by L. Wasserman and E. Trifonova); G. Eisenko's personal questionnaire (edited by A. Shmelev and V. Pokhilko) and the Test of Meaningful Life Orientations (adapted by D. Leontiev). SPSS 17.0 Statistics for Windows software package was used for statistical processing of the obtained results.

It was found that the current emotional state of the subjects is relatively safe, but unstable; the situation is assessed by them as moderately positive. Aggravating factors in assessing the causes of the disease are fatalism and admission of guilt. The structure of coping behavior revealed the average level of representation of almost all types of coping and its weak differentiation, which indicates the lack of a clear coping model. It is concluded that the experiences and coping behavior of adults in an uncertain situation are closely related and due to a number of objective factors of the situation, correlate with the subjective characteristics and personal characteristics of its participants. Some objective characteristics of the situation and social-economic characteristics of its participants have some influence on the current emotional state and are partly related to the interpretation of the causes of the disease and the attitude to the disease as fate; aggravating factors of experience in assessing the causes of the disease are fatalism and admission of guilt, along with objective reasons; the greatest influence of the studied objective factors on the perception and assessment of the situation and/or the choice of coping strategies has an existence of hobby. Those relatives who use the coping strategy "Escape – avoidance" need the most psychological help - its actualization correlates with a negative emotional state.

**Keywords:** Parents, emotional state, coping strategies, children with cancer.

**Introduction**

A child's cancer can be assessed as an event that is subjectively high relevance for parents, acts as a difficult life situation, and belongs to the traumatic psychological circumstances - such that go beyond normal human experience and radically change the life of the family (S.L. Makarenko, 1983; A.S. Kudryashov, 2016). The problem of mental adaptation of parents to a child's serious illness is especially important in this

situation, because the behavior of an adult and his condition largely affects the psychophysiological and psycho-emotional state of the child and even the course of the disease. By the growing number of cancers in Ukraine, there is a need for psychological analysis of the adaptive capabilities of parents of children with cancer, the disclosure of the patterns of their reactions and regulation of life in the current situation. **The purpose of the article** – is to present the results of an empirical study of psychological factors of experiences and coping behavior of parents of children with cancer.

### **Theoretical background**

**Theoretical basis** of the research consists of: The psychology of life crisis (R. Lazarus and S. Folkman, K. Titarenko, E. Trifonova, N. Belorukova, I. Bulakh, L. Wasserman, T. Kryukova, etc.); transactional concept of stress-coping (R. Lazarus and S. Folkman, E. Isayeva, O. Igumnova, N. Rodina, etc.); psychology of experience (V. Vasyliuk, E. Ilyin, T. Kyrylenko, R. Laing, etc.); child illness as a model of a difficult life situation (R. Hodapp, E. Belinska, Y. Chepyk, N. Mazurova, E. Korin, etc.); research of the value-semantic sphere (V. Frankl, A. Langley, D. Leontiev, E. Yermakova, etc.).

According to the theoretical basis - the experiences and coping behavior of adults in difficult life situations are closely related and due to a number of objective factors of the situation, correlate with the subjective characteristics and personal characteristics of its participants. Summarizing our theoretical analysis, we have identified such elements of experience as the current emotional state, mental representation of the situation, interpretation of causes and assessment of the future. The main semantic units were the following: the level of stressfulness of the situation; assessment of psychological resources; assessment of the certainty-uncertainty of the situation in combination with the assessment of its impasse; level of positive energy; the degree of resolution of the situation and the level of involvement in the situation.

### **Methodology**

**Research methods.** To study the experiences of adults associated with severe illness of a child, used the method of "SAN" (modified by V. Doskin), the method of "Self-assessment of emotional states" (A. Wessman, D. Rix) and the author's questionnaire to identify objective components of the situation associated with cancer of the child; to study coping behavior used the test "Strategy of overcoming behavior" (R. Lazarus, adapted by L. Wasserman and E. Trifonova); a personal questionnaire of G. Eisenko was used to study the personal resources of adults (edited by A. Shmelev and V. Pokhilko) and Test of meaningful life orientations (adapted by D. Leontiev). SPSS 17.0 Statistics for Windows software package was used for statistical processing of the obtained results. **Sample** - parents of children with cancer who were treated at the National Cancer Institute and under the care of the Dacha Rehabilitation Center for Children with Cancer (Kyiv). Number of respondents: 61 people, 27% of them - residents of Kyiv and 73% - residents of different cities of Ukraine; 58 women (95.1%) and 3 men (4.9%). Age of respondents: up to 30 years - 7 people (11.5%), 31-40 years - 43 people (70.5%), from 41 years - 11 people (18%); the average age is 38.21 years.

### **Results**

**Emotional condition.** To study the experiences of adults associated with severe illness of a child, used the method of "SAN" (modified by V. Doskin), the method of "Self-assessment of emotional states" (A. Wessman, D. Rix) and the author's questionnaire to identify objective components of the situation associated with cancer in children.

51% of respondents rated their emotional state as negative rather than positive (pessimistic); on the average 46% of the subjects the general emotional tone is positive; 2% highly value their emotional state (overall tone is positive); 1% - extremely negative. On the scales "depression", "helplessness and confidence" there is an average emotional state, there is no clear predominance of one of the poles. At the same time, the scales "anxiety – calm", "fatigue – energy" determine a small advantage of the negative pole (associated with tremor, fear, complexity, indecision, timidity, nervousness, tension, timidity). Thus the emotional state of parents is relatively calm. Since a life-threatening illness of a child belongs to a traumatic situation, this emotional state can be correlated with the stages of grief. There is a loss of former life and the destruction of hopes, accompanied by stages of bargaining, attempts to reach an agreement with fate, acceptance, reconciliation, enlightenment; hope. At the same time, other reactions are possible for 2% of respondents: shock, loss of strength; rejection, denial, rejection of reality, anger, protest, indignation, fear, depression, loss of interest in life (E. Kubler-Ross, 2001). Parents learn to live with this for a long time of illness. They are aware of their role in supporting the child and try not to show their negative mood to her and others. Strong emotions (despair, tears, anger, etc.) they show mostly at the time of meeting with the diagnosis, surgery, as well as the first relapses of the disease. Then comes a turning point in the perception of the situation, internal restructuring, after which the struggle for recovery of the child and his life become "habitual" experiences, and the hospital - part of the lives of these families, a kind of home where they usually continue to live new life. When a child reaches remission, many parents say that it is difficult for them to immediately return to normal life. For most of them, it is important to maintain the usual connections with those with whom they had to go through a lot, in the time of the child's illness. They try to maintain close relationships with other parents and hospital staff. There is a feeling that they are comfortable in this environment, that such a relationship can act as a resource in overcoming a difficult life situation.

**Coping behavior.** To test coping behavior was used the test "Strategy of overcoming behavior" (R. Lazarus, adapted by L. Wasserman and E. Trifonova).

In tabl. 1 shown indicators of coping behavior of respondents of our study and normative sample according to E. Isaeva (2009, normal life situation, n = 1627) are presented. Significant differences were found in all coping strategies, except for "Distancing".

The coping strategy "Escape – avoidance" prevails (aspirations and behaviors aimed at avoiding the problem by evasion - manifested in denial, fantasizing, unreasonable expectations, distraction, etc.).

Table 1

**Comparison of indicators of coping behavior of the studied sample with normative ones**

The coping strategy	General sample (n=61)		Normal life situation (n=1627)	
	Average	Deviation	Average	Deviation
Escape – avoidance	53,46	9,47	45,2	±0,5
Search for social support	50,97	10,56	62,8	±0,6
Positive reassessment	50,17	10,14	56,1	±0,5
Distancing	48,14	11,28	49,4	±0,6
Problem Solving Planning	48,04	10,46	67,8	±0,6
Confrontation	47,31	9,04	50,7	±0,7
Self-control	47,20	9,93	63,7	±0,5
Acceptance of responsibility	45,67	10,12	62,9	±0,7

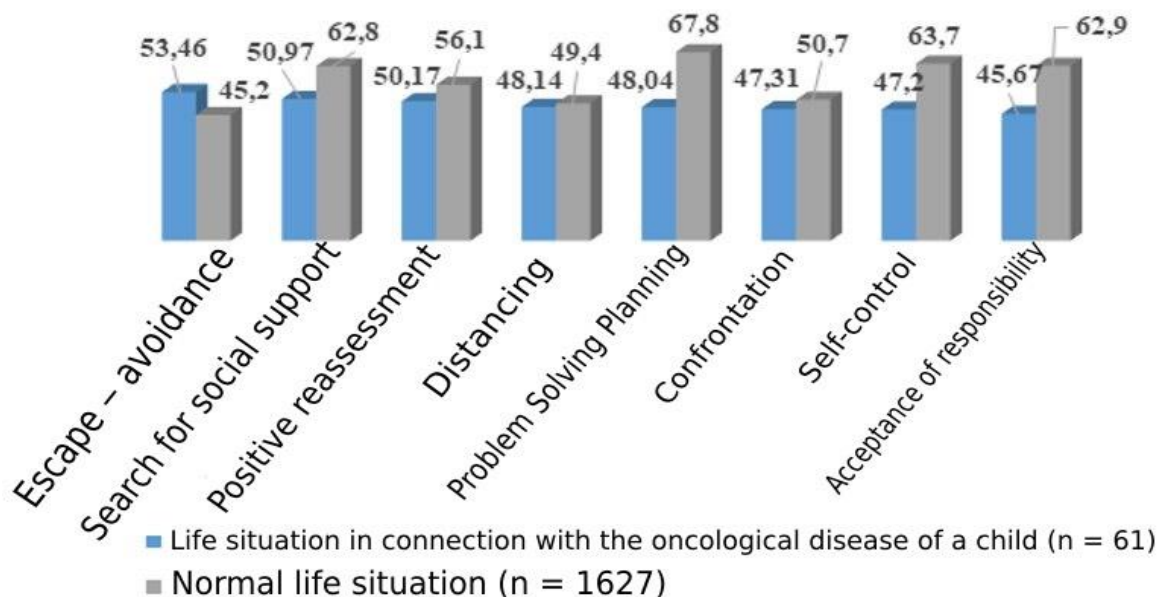
This is followed by "Search for social support" (expectation of support, specific effective assistance; attempts to solve the problem by attracting external resources, finding informational, emotional and effective support). In third place - "Positive reassessment" (focus on the superpersonal, philosophical understanding of the problem situation, its inclusion in the wider context, work on self-development.). This is followed by "Distancing" (overcoming negative experiences due to the subjective reduction of the significance of the problem and the degree of emotional involvement in it). "Planning to solve the problem" (attempts to overcome the problem through targeted analysis of the situation and possible behaviors, strategy development, planning their own actions based on objective conditions, past experience and available resources) takes the following position. This strategy is considered to be the most constructive, but it is largely limited by the nature of the situation: the ability to solve it, manageability, stress and so on. The least pronounced coping strategy "Acceptance of responsibility" (recognition of the subject's role in the problem and responsibility for its solution, may be accompanied by self-criticism and self-blame) - if it makes positive sense in this situation, then only for a limited period.

Because a child's cancer is long-lasting, the Escape-Avoidance coping strategy helps to dispel the idea that a child has a life-threatening disease. Given the low level of control over the situation, this strategy helps parents cope with feelings, "stay afloat". Thus, the actualization of this coping may indicate the depletion of psychological reserves and the need to live with the problem despite the high uncertainty of the situation (lack of the clear ideas about the degree of threat in life and well-being of the child, ability to control).

The dominance of the "Positive Revaluation" coping strategy may indicate habituation and restructuring. Obviously, in a hopeless situation, this strategy can be considered as one of the most constructive (see the study of Y. Chepik, 2014).

Regarding coping "Search for social support", it should be noted that it can act as a direct determinant of the mental state of the individual and as a buffer that mitigates the impact of a stress (S. Grabovska, 2010). Most researchers recognize the positive role of social support in maintaining physical and mental health. Relatives of cancer patients, including children who sought social support, adapted better to the disease, more successfully overcame stress, showed a higher level of psychological well-being compared to those who try to cope with problems independently and isolate themselves in everyday communication (A. Akimenko, 2016, E. Belinskaya, 2015, E. Karabulutlu, 2014).

The degree of expressiveness of coping strategies of parents of children with cancer in comparison with the sample of parents of healthy children is clearly shown in Fig.1.



**Fig.1. The degree of expressiveness of coping strategies in the study group in accordance with the normative sample.**

In the general sample, where a different situation and a different specificity of the response unfolds, the coping "Planning a solution to the problem" attracts attention. The general sample is dominated by the escape-avoidance coping strategy. There is also a big gap between the use of coping "Planning to solve the problem" in a normal situation and the situation of the child's illness. Thus, the coping strategies "Escape-Avoidance", "Positive Revaluation" and "Planning for a Problem" in the situation we are studying are perhaps the most situational.

**The relationship between the experiences and coping behavior of parents in a situation of child cancer.** It was found that coping strategies "Escape – avoidance", "Positive reassessment", "Planning to solve the problem" are most related to emotional well-being, perception and assessment of the situation, and "Confrontation" - with the current emotional state of the individual. Coping strategies "Distance", "Search for social support", "Acceptance of responsibility", "Self-control" did not reveal links with

the studied parameters of experiences. The coping strategy "Escape – avoidance" is actualized at a high level of stress and is associated with malaise, low mood, low activity, depression, anxiety, insecurity. "The positive revaluation" coping strategy is closely linked to the perception of the situation as resolvable, associated with a sense of belonging and significance. This coping is associated with a more favorable emotional state (self-confidence, activity, elation). Coping "Planning to solve the problem" is relevant to those who assess the situation as positive and encouraging, it is correlated with a more favorable emotional state (elevation, energy, activity). Perhaps this coping is used only when the situation is perceived as encouraging, which causes a whole range of positive experiences and willingness to act. The coping strategy "Confrontation" is correlated with an unfavorable emotional state (depression and low mood). It correlates with impulsive behavior (sometimes with elements of hostility and conflict), the difficulty of planning actions and predicting their outcome, unjustified persistence, acting as a mechanism for responding to negative emotions (see Table 2).

Table 2

**Mean values and significance of differences in coping behavior in groups with different levels of general emotional tone**

Coping strategies	The general tone of emotional state is rather positive (n=32)	The general tone of emotional state is rather negative(n=29)	The value of the t-standard
	Mean value	Mean value	
Escape – avoidance	49,46	55,58	3,6**
Positive reassessment	53,03	47,10	3,2**
Search for social support	48,51	52,12	2
Problem solving planning	51,14	45,70	2,9**
Confrontation	47,08	49,48	1,5
Distancing	48,78	46,26	1,2
Self-control	48,53	46,58	1,1
Acceptance of responsibility	45,70	46,74	0,5

Relationship between objective factors of the situation and social-economic characteristics of respondents with experiences and coping behavior. The age factor revealed negative correlations with the parameters "Fatigue – energy" and the coping strategy "Distance". Parents over the age of 30 are encouraging. Perhaps older respondents are easier to adapt to a difficult life situation, more likely to rethink it. Also, the older the respondents, the more pronounced their fatigue. Younger respondents perceive the situation of a child's cancer as hopeless and uncertain. They tend to overcome negative experiences by subjectively reducing the significance of the problem (methods of rationalization, switching attention, elimination); at the same time they are characterized by high energy. Perhaps this is due to their lack of some life experience, underestimation of the importance and ability to effectively overcome problematic situations. This is offset by the greater energy and strength they feel when facing and overcoming difficulties. It is noteworthy that to a greater extent the high spirits are

characteristic of respondents who note the presence of a hobby. They are less prone to boredom, sadness, fears; have a more positive emotional state and higher self-esteem. They feel less anxious, less tired, and more active and active; less depressed and more energetic, mobile; less helpless and determined, independent (see Table 3).

Table 3

**Average values and significance of differences by "hobby" factor**

Parameters	Absence of Hobby	Presence of Hobby	The level of significance
"Mood" ("SAN" method)	4,92	5,51	0,019
"Anxiety-calm" (method of A. Wessman, D. Ricks)	4,61	5,30	0,017
"Fatigue – energy" (method of A. Wessman, D. Ricks)	4,70	5,59	0,001
"Depression – sublimity" (method of A. Wessman, D. Ricks)	4,89	5,64	0,004
"Helplessness – confidence" (method of A. Wessman, D. Ricks)	5,37	6,34	0,005
"Planning to solve the problem" (R. Lazarus test)	9,06	9,28	0,021
"Positive revaluation" (R. Lazarus test)	10,55	11,89	0,003

Analyzing the factor "work" (employment) as a determinant of emotional well-being and coping behavior of respondents, significant differences (0.019) were found only in the parameter of the current emotional state "Helplessness-self-confidence". Working respondents feel more confident than non-working respondents (whose self-esteem shows timidity and weakness). The factor "Social activity" forms positive connections with the parameters "Fatigue-energy", "Feeling" and coping strategy "Positive reassessment"; Negative connections - with the idea of the causes of the child's disease "Illness as an accident" (trauma) and "Illness as fate" (fatalism). Thus, the higher the social activity of parents, the probably easier they adapt to the difficult life situation of their child. No significant differences were found in the "city of residence" factor (see Table 4).

Table 4

**Relation of respondents experiences and coping behavior with objective characteristics of the situation**

Factors	Connections		
	Causes of the disease	Current emotional state	Coping behavior
Age		+	+
Hobby		+++++	++
Work		+	
Social activity	++	++	+
Childs age	+		

**Personal factors of coping behavior and experiences of respondents.** The subjects have average scores on the factor "extraversion-introversion" and high - on the

factor "neuroticism" (nervousness, low adaptation, tendency to rapid mood swings, feelings of guilt and anxiety, distraction, instability in stressful situations).

**Consciousness of life.** In the table. Figure 4 are presented indicators of the parameters of consciousness of our study and the normative sample (normal life situation, n = 200) according to D. Leontiev (Leontiev, 2000), table 4. Characteristic lower values were found for all measured parameters.

Table 4

**Mean values and standard deviations in the parameters of life consciousness in the study group and in the normative sample.**

Parameters	General sample (n=61)		Normal life situation (n=200)	
	Mean value	Statistical deviation	Mean value	Statistical deviation
«Objectives»	31,03	7,25	31,14	6,08
«Process»	27,51	6,38	29,94	5,29
«Result»	21,47	4,32	24,38	4,62
«Locus control - I»	19,21	4,41	19,85	4,07
«Locus control - Life»	26,83	6,81	29,42	5,95
«Overall rate (OR) »	96,12	17,89	99,43	15,78

Significant differences were found in the parameters "Process" and "Result", as well as the aspect of the locus of control "Locus control - Life" (see Table 4). Which indicates the presence of specificity in the parents of children with cancer in the assessment of the past period of life: reduced sense of its productivity and consciousness of the lived part of it; in the perception of the process of his life as less interesting, emotionally rich and full of meaning; in the feeling of uncontrollability of one's own life, fatalistic attitude to it. At the same time, the parameter "Goals" has approximately the same values, which characterizes the presence or absence of goals in the life of a person in the future, which give life meaningfulness, direction and time perspective.

In other words, our subjects are less satisfied with the process and outcome of life, they are less likely to see themselves as the subject of their lives, while characterized by a fatalistic attitude to life. Given the situation in which they find themselves, these results seem quite natural.

**Relationships of indicators of life consciousness with the characteristics of experiences.** The "Goals" parameter revealed positive relationships with the "Depression-Elevation", "Activity", "Mood" parameters. On one side, they show a more favorable emotional state (positive mood, activity, elation). On the other hand, it is possible that a more favorable background of experiences and assessment of the situation contribute to a more meaningful life planning. The Result parameter showed positive relationships with the Anxiety-Calm and Activity parameters. The "Process" parameter found positive relationships with the parameters "Self-doubt - confidence", "Depression - elation", "Fatigue - energy", "Anxiety - calm", "Feeling", "Activity",

"Mood". At the same time, the most positive experiences and such an assessment of the situation can lead to greater satisfaction with the life process.

The "Locus Control - I" parameter found positive relationships with the parameters "Self-doubt - confidence", "Depression - elation", "Fatigue - energy", "Anxiety - calm", "Feeling", "Activity", "Mood". ". This means that the idea of oneself as a strong person is associated with the perception of the situation as a resolute, optimistic, more defined and more comfortable, as well as a favorable emotional state (calm, energy, exaltation, self-confidence; well-being, activity and positive mood). On the other hand, it is possible that a more favorable background of experiences and this assessment of the situation supports the belief in their ability to control the events of their own lives.

The General Life Consciousness Indicator (GLCI) found positive relationships with the parameters Self-Confidence-Confidence, Depression-Exaltation, Fatigue-Energy, Anxiety-Calm, Well-Being, and Activity , "Mood". This means that the higher level of consciousness of life in a situation of a child's cancer is demonstrated faster by those who perceive this situation with great hope and faith in a favorable outcome. And also consider this situation so that it can be solved (see table. 5).

Table 5

#### Correlation of life consciousness indicators with characteristics of experiences

Parameters	Goals	Result	Process	Locus control - I	Locus control - Life	GLCI
"Feeling"			,317**	,348**	,438**	,343**
"Activity"	,193*	,343**	,516**	,452**	,479**	,501**
"Mood"	,462**		,391**	,406**	,482**	,395**
"Anxiety - calm"			,281**	,273**	,430**	,326**
"Fatigue - energy"			,334*	,237**	,283**	,282**
"Depression - exaltation"	,218*	,194*	,383**	,321**	,425**	,363**
"Self-doubt - confidence"			,244**	,259**	,305**	,229**

#### Discussion

According to the results of our study, the coping strategy "Escape – avoidance" predominates among parents of children with cancer. This confirms the conclusions of some authors that coping strategies by type of avoidance can be considered the best, because they can overcome an acute crisis at the initial stage with the least loss of emotional well-being. In turn, the effectiveness of passive emotionally oriented ways of overcoming stress is manifested in the case of a low level of control over the situation (G. Fink, 2016). At the same time, according to other researchers, "Denial" may interfere with the treatment of children with life-threatening diseases, as well as compliance with prescriptions (A. Fedorova, O. Chernenko, 2012). According to N. Mazurova (2014), the use and predominance of "Escape-Avoidance" may indicate a low level of adaptation, along with a pronounced "Distance" and "Search for social support", but only in a situation with severe illness of a child that does not threaten his life .

Moreover, the detected majority of coping "Positive reassessment" may indicate habituation and restructuring of the motives of parents of children with cancer. Research by Yu. Chepik (2014) confirms that in a hopeless situation this coping strategy can be considered as one of the most constructive on the principle: "I give my difficulties a special meaning, overcoming them, I improve myself."

The study also found a weak differentiation of ways to respond to a serious illness compared to a normal life situation. This may be the result of the confusion experienced by the child's parents due to the unpredictability of the situation, the ambiguity of the prognosis, and is also a consequence of the variability of events that unfold during this period or are expected in the future. Weak differentiation of response methods may also reflect the individual characteristics of the "work of grief" due to the loss of a past life, the collapse of plans for the future and the threat of losing a sick child.

The results of our study revealed positive links between the factor "social activity" and the parameters "Fatigue-energy", "Feeling" and the coping strategy "Positive reassessment". This complements the findings of scientists that the higher the social activity of adults, the probably easier they adapt to this difficult life situation. This is consistent with the conclusions of V. Nebilitsyn, who believes that the most important characteristic and resource of the individual is activity. "Activity is the core of the functional state of man and is the motivating force of the motivational status of man" (V. Nebylitsyn, 1976, p.162). That is, despite the uncertainty of the situation due to the uncontrolled disease and the inability to influence many things, an active life position probably allows parents to feel the strength and energy to overcome, albeit not all, but a number of difficulties in this situation. consider difficulties as an incentive for personal growth.

As follows, the results of the study revealed that in general external activity in its manifestation (hobbies; social activity as an active life position; availability of work) contributes to a positive emotional state of parents. These data are consistent with the results of other studies: "Successfully overcome the difficulties of those people who, in a difficult life situation, are able to find a job (occupation, hobby), from which they get pleasure that fascinates them" (Shumakova, 2009): 43).

The data obtained in the study are partially consistent with the conclusions that the factors of individual vulnerability of parents in the period of cancer in a child may be considered the "age of the parents" (A. Kudryashov, 2016).

We associate the lack of differences in the factors of "family ties" with the child, "gender" of adults and "city of residence" with the inequality of groups (mothers - 95.1%, parents - 4.9%; Kyiv residents - 27% and visitors - 73%%), as the data in the literature confirm the opposite (Bulakh, 2015). O.A. Черненко, B.A. Chulkova (2014) singles out among the objective factors "the movement of mother and child to another city for treatment." According to their observations, mothers who are forced to go to another city to receive their child are at risk of developing post-traumatic stress disorder.

The results of the study revealed the relationship of the consciousness of life with all the elements of experience, and consciousness is higher in a situation of more positive perception. A positive sign may indicate that meaningfulness is a personal

resource for overcoming a difficult life situation, but at the same time, perhaps, raising awareness is the result of experience (the concept of F.E. Vasilyuk, 1984), but only if this experience is relatively positive. A higher level of awareness of life and in general, a more positive outlook on life is also associated with a predominant representation in the behavior of coping strategies "Positive reassessment" and "Planning to solve the problem" in abandoning the coping strategy "Escape - Avoidance". Many empirical data confirm that these copings can be considered as the most constructive ways out of a difficult life situation and as they contribute to personal growth and human development (A. Kovalenko, 2011, O. Igumnova, 2020, Y. Chepyk, 2014). The obtained data can also be correlated with the conclusions of A. Afonina (2013), I. Vetrova (2008), etc., which link the level of consciousness of life with the ability to effectively emerge from a situation in which a person is faced with the possibility of non-existence, death, loss, inability to remain unchanged).

In our opinion, the general profile of the sample according to the Life support system scales, which shows lower values of the total sample compared to the normative data, indicates that in a situation of severe illness of a child many life attitudes can undergo significant changes. This is confirmed by empirical studies of other researchers (see, for example, studies by N. Mazurova (2014), M. Hilgeman (2007) and others). The reduced results probably indicate that at the time of the survey, the situation with children was characterized by a high level of uncertainty and the old semantic attitudes could lose their relevance (if new ones are not formed). The more negative the situation (the lower the general emotional background of the current state), the lower the level of consciousness. However, this conclusion needs further confirmation and research.

Thereby, taking into account the objective characteristics of the difficult life situation associated with a child's cancer, we can more accurately plan work to provide psychological assistance to parents of those children, identifying risk groups that require closer attention. This knowledge can be useful in predicting some of the most likely trends in adult behavior that contribute to or hinder the constructive and effective experience of the situation.

### **Conclusion**

The experiences and coping behavior of adults in an uncertain situation are closely related to each other and due to a number of objective factors of the situation, correlate with the subjective characteristics and personal characteristics of its participants. The study of psychological factors of experiencing an uncertain situation found that some objective characteristics of the situation and socio-economic characteristics of its participants have some influence on the current emotional state and are partly related to the interpretation of causes and attitude to illness as fate. It was found that aggravating factors in assessing the causes of the disease are fatalism and admission of guilt, along with objective reasons. It is shown that the greatest influence of the studied objective factors on the perception and assessment of the situation and/or the choice of coping strategies has a hobby. The latter has a positive effect on both the emotional state and the choice of coping strategies. This suggests that the hobby may initially act as a coping resource, and later - as a strategy to overcome. It has been found that temperament properties can be important determinants of current emotional state

and coping behavior. And awareness of life is correlated with a more positive perception of the situation, a more favorable current emotional state. The structure of coping strategies highlights those that are situationally determined and relatively neutral to the content of the situation. Coping strategies such as “Escape – avoidance”, “Positive reassessment”, “Problem solving planning”, “Distancing” are singled out as situationally determined. It was found that the greatest need for psychological help are those of relatives who use the coping strategy "Escape – avoidance" - its actualization is correlated with a negative emotional state.

Summarizing theoretical and empirical research, we have identified the following targets (tasks) for psychotherapeutic support of parents of children with cancer: stabilization of psycho-emotional state; work with guilt; finding resources for self-support; formation of effective coping strategies, new values and meanings of life.

To address these challenges, we offer Acceptance Commitment Therapy (ACT). This is one of the newest directions of behavioral therapy based on the principles of awareness and aimed at reducing the strategy of avoiding contact with experience (thoughts, feelings, actions, feelings) and encouraging the client to develop behavior aimed at realizing personal values (life meanings).

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