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Impact of COVID-19 on Families with a Child in Cancer Treatment

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IRB Number: 678

Describe role of Submitting/Presenting Trainee in this project (limit 150 words):

I led the data management, data analyses, writing the abstract, and will lead the manuscript. I was able to learn about the data collection process, as it is ongoing, and hope to continue to contribute to data collection in the future.

Background:

A new diagnosis of pediatric cancer diagnosis is a sudden and tremendous stressor to families (Long & Marsland, 2011). The COVID-19 pandemic presented an acute, universal stressor that impacted daily life around the world (Brooks et al., 2020). The impact of the COVID-19 pandemic on children with cancer and their families is not yet known.

Objectives/Goal:

The current study is a pilot investigation of COVID-19 exposure and impact among a sample of families with a child being treated for cancer.

Methods/Design:

Primary caregivers (N=22) of a child (M age=7.4, $SD=4.6$) who was diagnosed with cancer within the last 18 months ($M=10.3$ months, $SD=4.7$) and on active treatment completed surveys between August-September 2020. Children were in treatment for leukemia (68%), lymphoma (9%), and CNS or solid tumors (22%). COVID-19 exposure and impact were assessed by the COVID-19 Exposure and Family Impact Survey (CEFIS, Center for Pediatric Traumatic Stress, 2020). Caregiver distress was assessed by the Psychosocial Assessment Tool 2.0 (Pai et al., 2008).

Results:

Pearson correlations revealed positive associations between COVID-19 impact and exposure ($r(20)=.49$, $p=.022$). Independent samples t-tests showed that significantly greater COVID-19 impact was endorsed by caregivers of children with leukemia ($M=32.87$, $SD=10.4$), when compared to other types of cancer

($M=19.71$, $SD=6.15$; $t(18.5)=3.70$, $p<.01$). Additionally, greater COVID-19 impact was endorsed by caregivers of children who were diagnosed *less* recently (i.e., >10 months ago, $M=34.27$, $SD=10.55$), in comparison to those diagnosed more recently (i.e., within 10 months, $M=23.09$, $SD=8.75$, $t(20)=-2.70$, $p<.05$). There were no significant variations in COVID-19 exposure based on demographic or disease characteristics. COVID-19 impact did not vary significantly based on child age, ethnicity, or caregiver PAT2.0 score.

Conclusions:

These preliminary results suggest that the impact of COVID-19 on families of children with cancer may vary based on the timing and type of pediatric cancer diagnosis.