Parenting Experiences With Adolescent Daughters When Mothers Have Breast Cancer

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**Purpose/Objectives:** To examine maternal parenting during the time when a mother is diagnosed with and treated for breast cancer from the mothers’ and adolescent daughters’ perspectives.

**Research Approach:** Empirical phenomenologic.

**Setting:** Sites in Indiana and Arizona.

**Participants:** 8 mothers and 1 of their adolescent daughters. The mothers were aged 37–46 years at the time of diagnosis, had stage 0–IV cancer, and had completed treatment 1–12 years earlier. Participants had one to four children ranging in age from 13–24 years at the time of the intervention. Ages of the adolescent daughters at the time of diagnosis ranged from 10–15 years with an average of 13.5 years.

**Methodologic Approach:** An open-ended, audiotaped interview was conducted with each participant.

**Findings:** Six major theme categories were found: (a) a battle to be fought on many fronts—what is at stake if the battle is lost, (b) I tried to tell her, (c) standout moments in our family’s cancer journey, (d) mobilizing to protect self while preserving parenting, (e) voices of fear, and (f) after treatment is over, you are not done.

**Conclusions:** Mothers set a high priority on parenting and experienced difficulty in setting priorities to meet their own needs and those of their families, including those of their adolescent daughters. Mothers need assistance learning ways to help their daughters through the breast cancer experience, particularly related to maintaining their relationship and communicating.

**Interpretation:** Mothers should be given assistance with strategies for realizing their own needs and finding positive ways to deal with the needs of their families. Nurses can play an integral part of this development.

In 2007, an estimated 178,500 women were diagnosed with invasive breast cancer and an additional 62,000 women were diagnosed with breast cancer in situ (American Cancer Society [ACS], 2007). Because approximately half of the women were 61 years or younger (ACS), many would still be bearing or raising children. If each of the women had one to two children, about 100,000 children could have a mother newly diagnosed with breast cancer at any given time.

Research indicates that these mothers experience treatment-related symptoms that can impair their ability to parent and that children of mothers with breast cancer are more likely to have behavioral issues, emotional distress, and negative self-perceptions than children whose mothers are healthy (Cummings & Davies, 1994; Goodman & Brumley, 1990; Panaccone & Wahler, 1986). Parenting needs, as well as responses to having a mother with breast cancer, likely differ based on a child’s developmental phase. Most research on parenting for mothers with breast cancer has focused on preschool or school-age children. Little is known about parenting an adolescent during a mother’s breast cancer diagnosis. In this article, findings related to mothers’ experiences of parenting adolescent daughters are reported. The data are part of a larger study of mothers’ experiences of parenting and adolescents’ experiences of being parented during the mother’s diagnosis and treatment for breast cancer.

**Background**

Being diagnosed with and treated for breast cancer can affect a woman’s family in many ways, particularly during the childbearing and child-rearing years. Chemotherapy-related

**Key Points . . .**

- Scant research has focused on mothers who have adolescent daughters and the concerns they face when the mother is diagnosed with and treated for breast cancer.
- Mothers with breast cancer frequently try to protect their adolescent daughters by keeping their lives as normal as possible, often at the expense of the mother.
- Mothers with cancer need assistance early in diagnosis and treatment to help them understand what family members are dealing with and ways to assist communication.
- Further research is recommended on how mothers can resume effective parenting once treatment is completed and on potential interventions to help mothers and daughters regain a sense of normalcy in survivorship.