Positive treatment outcomes for childhood cancer survivors have become a priority in medical and nursing pediatric oncology. In addition to cure and disease-free living, treatment outcomes that include psychosocial functioning and the meaning of the cancer experience for this population also have gained importance. A research priority identified by Haase and Phillips (2004) is to understand the meaning that pediatric patients with cancer derive from their disease experience throughout its trajectory, from diagnosis through survivorship. Meaning of the cancer experience for adolescents is constructed from distressing as well as positive experiences. Distressing experiences are those that engender fears of alienation, changes in physical appearance, and dying, as well as general physical pain and discomfort (Hedstrom, Skolin, & von Essen, 2004). Hedstrom et al. reported that positive experiences often result from the adolescents’ interactions and relationships with pediatric oncology nurses and the sense that their needs are being met. This study addresses the meaning of the cancer experience among older adolescent and young adult childhood cancer survivors in the context of being cared for by pediatric oncology nurses during treatment.

**Pediatric Oncology Nursing Care**

In providing effective nursing care to pediatric patients with cancer and their families, acts of caring or giving care result from a nurse’s synthesis of scientific principles, artistry, and a deep sense of being present with patients (Cantrell, 2007). In one study (Doona, Chase, & Haggerty, 1999), nursing presence was found to

- Involve direct contact and being open with patients.
- Require and enable nurses to connect with patients’ treatment experiences on a physical and psychosocial level.
- Include sensing and going beyond empirical data to be perceptive to and accurately interpret cues from patients.

- Involve seeing the patient in the entire context of his or her life, not just from scientific medical data.
- Be exhibited when the patient’s preferences are acknowledged and incorporated into the plan of care.
- Involve being with the patient and engaging in caring activities, such as listening, attentiveness, and technical competence.

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**Purpose/Objectives:** To describe the meaning of being cared for and comforted by pediatric oncology nurses among a sample of childhood cancer survivors.

**Research Approach:** A hermeneutic analysis was conducted to describe the meaning of the phenomenon.

**Setting:** An oncology treatment center in the northeastern United States.

**Participants:** 11 childhood cancer survivors.

**Methodologic Approach:** Four childhood cancer survivors participated in a focus group, and seven were interviewed one-on-one via telephone interviews. The focus groups and the one-on-one interviews were tape-recorded, and the audio recordings were then transcribed into an electronic text file.

**Main Research Variables:** Comfort and caring behavior.

**Findings:** All participants agreed that simple acts of caring by nurses were meaningful to them and provided comfort. The five themes generated from the data analysis were (a) You Just Can’t Pretend to Care, (b) Try to Take the Hospital Experiences Out of the Hospital, (c) I’m Not Just Another Kid With Cancer—There Is a Lot More About Me That You Should Get to Know, (d) Caring for Me Also Includes Caring for My Family, and (e) Nurses Make Treatment Experiences More Bearable Through Their Small Acts of Caring.

**Conclusions:** Pediatric patients with cancer find physical and emotional comfort through nurses’ acts of caring.

**Interpretation:** The findings highlight the significance of caring acts by pediatric oncology nurses that provide comfort for children and adolescents with cancer.