One of the biggest challenges that Korean adolescents with cancer and their families face is engaging in family communication. The resilience in illness model (RIM) defines family communication as the ability to share thoughts and feelings openly and clearly in stressful situations (Haase et al., 2014). Family communication plays a critical role in the positive adjustment of adolescents with cancer by developing resilience and self-transcendence (Haase et al., 2017), and works as a critical predictor of adolescents' satisfaction within their family (Akhlaq et al., 2013). Specifically, the ability to share emotional needs has been reported as essential for developing healthy coping strategies in children and adolescents (Ackard et al., 2006; Acuña & Kataoka, 2017; Gentzler et al., 2005) and in relieving physical and psychological distress after receiving a cancer diagnosis (Zebrack et al., 2010).

Despite its pivotal role, little attention has been paid to parent–adolescent communication in the context of Korean childhood cancer. Researchers have studied Asian cultural patterns related to protecting an ill family member from knowledge of their life-limiting condition (Kim et al., 2014). However, most studies of family communication have been conducted in Western countries. Existing studies have examined the effect of family communication on the relationships between Korean parents and healthy adolescents (Kim, 2018; Kim & Lee, 2019; Lee et al., 2018). Therefore, the purpose of this qualitative descriptive study was to examine the extent to which Korean adolescents with cancer and their parents verbally share feelings and concerns related to the adolescent’s cancer diagnosis with one another, and how emotional communication affects parent–adolescent relationships and the family’s coping abilities.

PURPOSE: To examine the family communication experience of Korean adolescents with cancer and their parents, including how adolescents and their parents verbally share feelings and concerns related to the adolescent’s cancer diagnosis with one another, and how emotional communication affects parent–adolescent relationships and the family’s coping abilities.

PARTICIPANTS & SETTING: 20 participants (10 adolescents with cancer, aged 13–19 years, and their parents) at a university-affiliated hospital in Seoul, South Korea.

METHODOLOGIC APPROACH: Individual, semi-structured interviews were conducted and analyzed based on a qualitative descriptive approach. Conventional content analysis was employed to analyze the data.

FINDINGS: The overarching core theme developed from the content analysis and theme generation was “I cannot share my feelings.” This core theme is represented by three main themes: (a) restricted topics that I can share; (b) being closer, but a lack of depth; and (c) effects of restricted topics on their coping.

IMPLICATIONS FOR NURSING: Increased need for nursing awareness and culturally relevant assessment of emotional family communication needs between Korean adolescents with cancer and their family caregivers are necessary.

KEYWORDS Korean; family communication; adolescents with cancer; coping skills

ONF, 47(6), E190–E198.

DOI 10.1188/20.ONF.E190-E198