Parenting at a Challenging Time (PACT)

FOR MANY CANCER PATIENTS, their first thought when they receive their diagnosis is not about themselves, but their children. Parenting at a Challenging Time (PACT) is a new program, offered free of charge to patients at Smilow Cancer Hospital. Its purpose is to help these parents help their kids. (One in five adults with cancer has children.)

PACT opened its doors in July 2010, under the co-stewardship of Andrés Martin, MD, Riva Ariella Ritvo Professor of Pediatric Oncology Psychosocial Services, Yale Child Study Center, and Bonnie Indeck, LCSW, manager, Oncology Social Work. Dr. Martin had seen a similar program at Massachusetts General Hospital—his former employer—and sought to adapt it for Smilow. He had the full support of Thomas J. Lynch, Jr., MD, Smilow’s physician-in-chief and director, Yale Cancer Center. Lynch also came from Mass General, where he was instrumental in building the program there and witnessed its powerful effect.

“The beauty of PACT is that we don’t refer these children to see therapists or outside experts. Instead, we see the patients as the experts on their own children. Their parenting skills remain intact, but as they go through this difficult and traumatic experience, they need help. It’s a proactive and preventive approach. We give them guidance in dealing with their children in age-appropriate ways, whether it’s about a new diagnosis or about end-of-life issues,” explains Dr. Martin.

The PACT team consists of eight oncology social workers, one psychiatrist (Dr. Martin) and one psychiatric fellow. This team meets weekly to discuss the details of each patient’s particular situation, working together to plan the best course of action.

PACT guides parents on how best to frame discussions concerning their illness and its consequences—down to specifics on what language to use. For example, PACT recommends naming the illness. “Calling it a boo-boo can confuse the child. The child might start to think she needs chemotherapy if she has a boo-boo. Often the child will hear the truth from someone else eventually. It’s better and less frightening if it comes from the parent,” says Indeck.

Other suggestions include maintaining children’s daily routine, protecting family time and scheduling regular visits to the parent after explaining what they can expect to see at the hospital. Most important, PACT encourages parents to take care of their own needs. Many feel they have to be strong for their children, so they are reluctant to ask for help for themselves. “Children feel more secure and hopeful when they know their parent is receiving excellent care, and parents benefit from the practical framework that PACT provides,” says Dr. Martin.

Indeck adds, “Our long-term goal is to help the children remain emotionally healthy so the parents can focus on getting treatment and getting well. We want to alleviate their anxiety that they aren’t helping their children enough.”

Patients meet with members of the PACT team for as long as necessary. To date, PACT has helped over 100 patients and their families, and the results have been powerful. Michelle Fagel, who, with her husband, Devon, consulted with PACT when Devon was diagnosed with oral cancer, reports, “I don’t know how we would have gotten through this without PACT. [See accompanying story.] We felt fully supported emotionally because we knew that PACT was always there. It made a huge difference in our lives and our children’s lives.”