Counseling an Adolescent with the Diagnosis of Cancer

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This paper evaluates factors that may be affecting an adolescent cancer patient and the treatment styles used to navigate the challenges that arise from that diagnosis. Taking a person-centered approach, this research paper investigates the multifaceted challenges that may be affecting the adolescent's experience with cancer. Then, building upon the understanding of those challenges, treatment options are identified and assessed.

Component I: Review of Important Information

According to the American Cancer Society (2025) around 5,000 adolescents are diagnosed with cancer in the United States each year and although the survival rate for these diagnoses are relatively high, around 87%, it may still have a significant impact on a teen's development. Similar to other demographics diagnosed with cancer, treatment has been shown to have a mental and physical impact on the affected individual. In the United States around 50% of patients with cancer meet criteria for a psychiatric disorder, the most common being adjustment disorders (11%–35%) and major depression (5%–26%) (Miovic & Block, 2007).

There are a range of factors that affect the mental health of cancer patients, however adolescents specifically, face some unique challenges. The following section will discuss factors including family, identity, and milestones.

Family

Part of a teen's social development is becoming more independent in their autonomy, decision making, and social circles. All of these are areas that are impacted with the diagnosis of an acute cancer. Teenagers under the age of 18 do not yet have the authority to make their own medical decisions and as a result are often accompanied by an adult to the clinical setting. This

hinders the adolescent's ability to gain independence as it reduces the amount of control they have over their autonomy and increases dependence on their caregiver.

The family system itself may also be a point of stress. Adolescents with cancer may feel a sense of guilt from various sources including feeling responsible for upsetting loved ones or feeling like a physical and financial burden (National Cancer Institute, 2025). These feelings of perception may also put them in a position where they feel the need to be "strong" in order to ease the emotional pain of the people around them. Some ways to alleviate these complications in the family system can be by encouraging open communication, finding ways to allow the teen to have their own space, and participating in support groups.

Identity

One of the key developmental tasks in adolescence is to develop a coherent identity (Branje et al., 2021). A main way that adolescents create their identity is by exploring different social roles. A cancer diagnosis inhibits this process not only by limiting the adolescents ability to try new roles, but also the way that they are perceived within the roles that they engage in. The social stigma of cancer is a powerful source of stereotyping and prejudice against people affected by oncological disorders (Trusz & Stępniewska-Gębik, 2021). There are multiple ways these stigmas may present in social settings including awkwardness, over-sympathizing, and avoidance. The consequence of these repeated encounters often lead to disrupted identity development and identity distress which may result in low self-esteem, depression, and anxiety (Bagautdinova et al., 2024).

Another area of adolescent identity development that is impacted by cancer treatment is physical appearance. The development of body image helps shape self-identity and relationships; it is influenced by a variety of historical, cultural, social, individual, and biological factors (Fan

& Eiser, 2009). When the body is physically impacted during the course of cancer treatment it may present as side effects such as hair loss, weight fluctuation, and scarring. The teenage years are also when puberty occurs, so they are already in the biological process of body changes. This is significant because it can leave adolescents with a body that does not feel like their own. Cancer patients undergoing puberty are in a transition from a youthful body to a body that is developing adult features. These adult features can take time for healthy teens to adjust to; imagine what it would be like adjusting to normal changes while also experiencing inconsistent weight, hair loss, and scarring. Cancer treatment can last years so it is also possible patients do not know what their "normal" adjusted body looks like. They may have anxieties around if their body will ever go back to "normal" let alone be something they can match their identity to.

Milestones

Accomplishing age-sensitive milestones can also be inhibited by a cancer diagnosis. Some of these milestones include learning to drive, graduating school, attending prom, etc. Losing the opportunity to join peers in these milestones can be the source of emotional distress.

School is a main challenge that adolescent cancer patients face. First, cancer can be potentially terminal which can understandably impact motivation to pursue it. Second, school requires cognitive thought. Clear cognitive thought can be significantly diminished by the intensity of treatment. "Chemo brain" is a common term used to describe the grogginess that often accompanies the aftermath of receiving treatment. Furthermore, falling behind peers academically can add to the feelings of overwhelm during the course of treatment. For these reasons it is essential to establish content, role responsibility, and psychosocial support services and integrate them into the care plan during the initial weeks following a cancer diagnosis (Dobrozsi et al., 2019). Anticipating and preparing for educational impact can help teens

effectively manage their individual educational program (IEP) goals, stay connected with their peers, and on track for graduation.

Component II: Treatment Approaches

When working with teenage cancer patients counselors there are a couple special factors that counselors should take into consideration. First, using a person-centered approach and treating teenagers like individuals instead of their diagnosis can be an important first step to building report (Boerger-Knowles & Ridley, 2014). Teens with cancer are in a setting where they are surrounded by adults telling them what is best for them and treating them like a patient, it can be refreshing to have someone in the clinical setting that is willing to relate to them on levels outside of their diagnosis. Second, cancer is an intensive process that has a significant impact on a person's ability to think clearly. This means that cognitive approaches that are based in thought processing and connective work may not be an effective approach.

Counseling adolescents with cancer is similar to trauma counseling in that it works with the multifaceted consequences stemming from a specific thing or event. In the case of a cancer diagnosis, the diagnosis itself is out of the client's control so the client is primarily working with the ripples stemming from it. In order to work with these ripples and the impact they have on the mind and body experience, pharmaceuticals and psychological practices are typically used as solutions.

Pharmaceutical Approach

Pharmaceuticals come with benefits and drawbacks when it comes to treating cancer patients. First, medication is a fairly low-effort way to increase serotonin uptake in cancer patients. Higher serotonin can help combat side-effects of cancer treatment by decreasing brain-fog, increase energy levels, and improving sleep and appetite (Zaini et al., 2018). Given the

multitude of benefits associated with antidepressants they are often prescribed outside of the realm of mental illness as a defense against the harmful side effects of treatment. A study reviewed 216 medical charts from Children's Medical Center in Dallas found that antidepressant medication use in pediatric cancer patients (10.2%) was higher than the reported rates of depression (4–8%) (Portteus et al., 2006).

That being said, cancer patients are on a variety of medications throughout the course of their treatment and it is not uncommon for medications to be prescribed unnecessarily. For example, a seperate study evaluated 2,677 patients in the outpatient setting of six major hospitals and found that an average of one unnecessary medication was prescribed per every three patients (Arabyat et al., 2019). Consequences of unnecessary medications include unwarranted side-effects and financial burden. Furthermore, in the United States 21% of cancer survivors take antidepressants compared to the 12% of individuals taking antidepressants without a history of cancer (Zou & Zhu, 2022). This finding raises questions around why the difference in these two groups is so significant.

Holistic Approach

The other treatment approach uses holistic methods, in this case focusing on the psychological approach. A meta-analysis assessed how quality of life is affected by cancer and found that well-being and quality of life can be coped with more effectively by the aid of psychological treatments because they address the different adaptions and contexts that cancer patients face (Singer et al., 2009). This section will discuss somatic therapy, Gestalt group counseling theory, and humor as three effective approaches used for counseling adolescents diagnosed with cancer.

Somatic Therapy

Cancer treatment can put patients through a variety of painful and traumatic physical and mental experiences. These experiences can lead to defenses including dissociation, and lead to further consequences that may manifest later in life. Somatic Experiencing was designed to be effective in cases of dissociation, dysregulations in the body, and neural networks that mediate the survival-oriented fight/flight/freeze responses, and also the reflective, symbolic, and integrative mental functions for the processing of the lived experience (Vagnini et al., 2023). Helping adolescents increase their awareness of their body's current state and learn to meet it with effective coping strategies like breathwork and mindfulness helps reduce pain, regulate emotions, and manage stress of experiences.

Gestalt Group Counseling Theory

Group therapy is especially important for adolescents because as discussed prior adolescents are in a developmental stage where they are gaining more independence and forming their own identity. Participating in a counseling group containing adolescents with similar experiences is beneficial because it gives them space to relate and process their experiences with people who share a similar perspective.

Gestalt Theory specifically would be an effective approach with adolescent cancer patients because it focuses on the present experience and helps patients become more aware of their thoughts, feelings, and behaviors relate to what is currently happening. During traumatic events, especially ones that may be terminal, thinking about the future can be difficult. Additionally, Gestalt Theory helps patients gain autonomy, self-awareness, and coping skills within their current situation. Some techniques Gestalt theory uses are role play and guided fantasy. These techniques can be helpful for individuals who are going through difficult

situations, allowing them to walk through different processes and experiment with what different versions of themselves may feel like.

While there are limited studies on Gestalt Group Therapy on adolescent cancer patients, Gestalt Group Therapy has been proven to be an effective treatment for women with lung cancer (Alrazaq et al., 2022). Gestalt therapy is also recognized for being adaptable, effective with kids, and used in trauma work. Given the listed credentials, Gestalt therapy would be an effective counseling approach for adolescents with cancer because it would provide social support, effective coping strategies, and situational acceptance.

Integrated Humor

This paper would not be complete without the mention of humor as a tool for healing. Humor is a powerful coping tool providing benefits from stress and pain reduction to increased resilience. There are many studies highlighting the importance of humor when dealing with stressful situations and the benefits that appropriate use of humor (i.e. clinician attitudes and movies) can have on the body and mind (Christie & Moore, 2005). Building upon these findings, it may be beneficial for counselors to take time to figure out different ways to integrate humorous experiences into their therapeutic approach for treating adolescents with cancer.

Conclusion

Working with adolescent cancer patients requires counselors to step into the shoes of each individual patient and acknowledge the challenges they may be facing. This paper explored some of those challenges and met them with both pharmaceutical and psychological treatment approaches. The foundation of counseling approaches maintained a here-and-now approach and valued social interaction, somatic experiencing, acceptance, fantasy, and humor.

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