

The Electronic Surviving Cancer Competently Intervention Program (eSCCIP) - a Psychosocial Digital Health Intervention for English- and Spanish-Speaking Parents of Children With Cancer

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Parents and caregivers of children with cancer (PCCC) are at risk for negative psychosocial sequelae following their child's cancer diagnosis, yet few evidence-based options exist for improving psychosocial outcomes. PCCC who are of Latinx descent are at especially high risk for negative psychosocial sequelae because they are overrepresented in the United States in terms of being affected by multiple, negative, systemic, and sociodemographic factors, including low socioeconomic status and limited English proficiency. Parental distress is closely linked to overall family functioning and child maladjustment over the entire cancer treatment trajectory. Providing evidence-based psychosocial support to parents and caregivers of children with cancer is a clear, actionable strategy to prevent adverse outcomes and improve individual and family functioning following a pediatric cancer diagnosis. Providing this support as a digital health intervention is a promising avenue to increase access and reduce barriers to participation.

The theory and content of eSCCIP were adapted from two in-person interventions for PCCC. To provide PCCC with the accessibility and flexibility of a digital health intervention, eSCCIP was initially developed in 2015 using best practice methodology from the digital health literature. Preliminary studies evaluating the eSCCIP intervention have demonstrated high acceptability and feasibility, as well as preliminary evidence of efficacy. A Spanish-language adaptation of eSCCIP, El Programa Electronico de intervencion para Superar Cancer Competentemente (eSCCIP-SP), was also developed using best practices for cultural and linguistic intervention development.

The objective of this study is to test eSCCIP/eSCCIP-SP in a multisite randomized controlled trial compared to an internet-based education control condition. Three hundred and fifty eligible PCCC will be randomly assigned to the intervention (eSCCIP/eSCCIP-SP) or an education control condition. Data will be collected at 3 time points: pre-intervention (prior to randomization), immediately post-intervention (after 6 weeks), and at a 3-month follow-up (from baseline). Participants randomized to either condition will receive study material in English or Spanish, based on the primary language spoken in the home and participant preference. The primary study end point is a reduction in acute distress from baseline to postintervention, with secondary end points focused on reductions in symptoms of posttraumatic stress and anxiety, and improvements in coping self-efficacy and cognitive coping. An additional exploratory aim will be focused on implementation strategies and potential costs and cost-savings of eSCCIP/eSCCIP-SP.

Recruitment began in March 2023, with the first year of funding (2022) dedicated to building, refining, and testing the intervention platform. To date, 73 PCCC have been enrolled. Fifty-two have completed pre-intervention surveys, 24 have completed post-questionnaire surveys, and 4 have completed 3-month follow-up complete. Recruitment and enrollment data, as well as limited preliminary data, will be presented. Detailed information about the intervention platform, including images, will also be presented.