

The Impact of the Diagnosis of Breast Cancer on the Mother-Child Relationship – An Updated Systematic Review

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Objective

- To systematically review evidence from literature on the impact of breast cancer (BC) on family life, parenting, and the mother-child relationship.

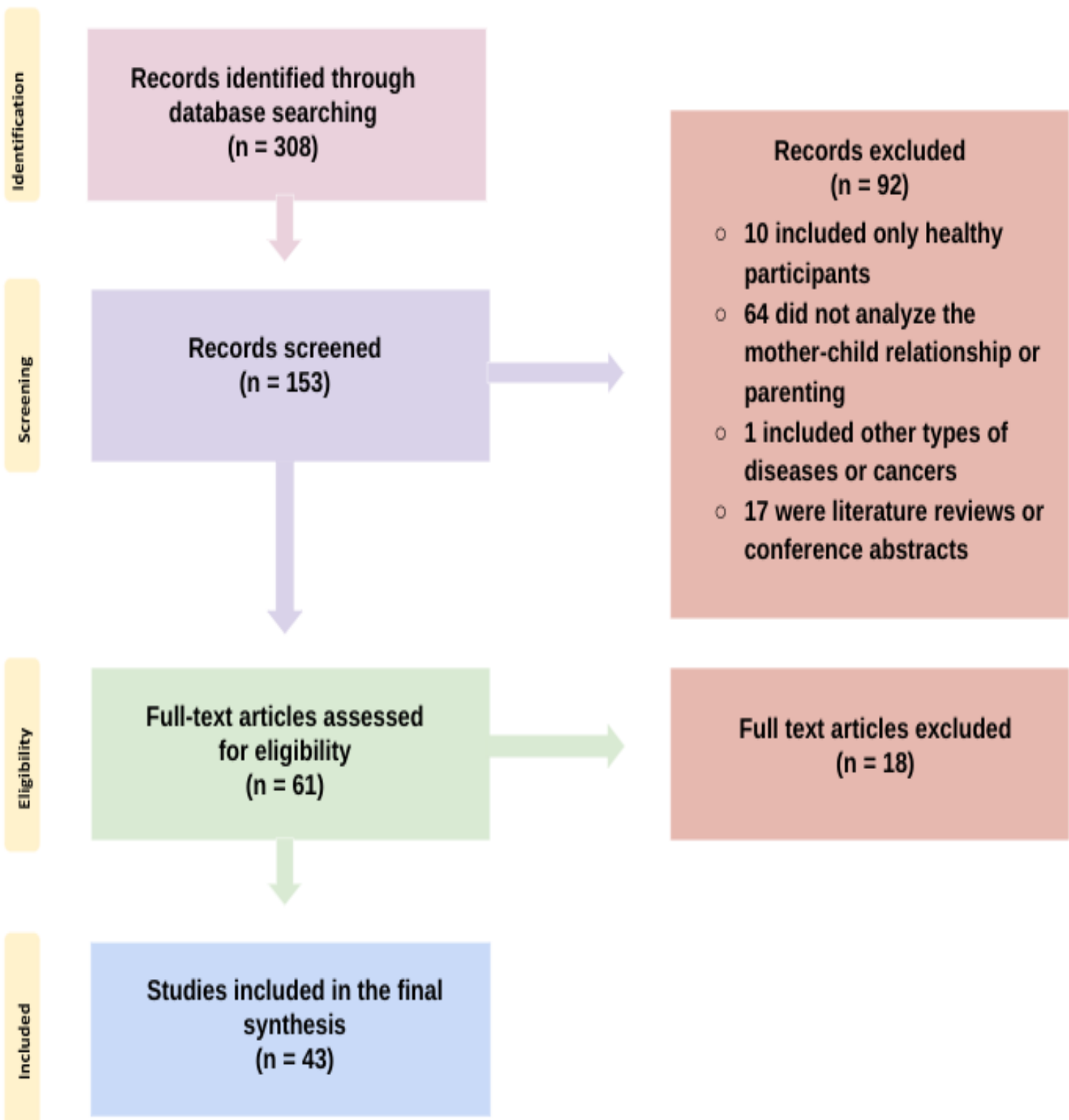
Materials and methods

- Study Design:**
 - This study is a systematic literature review that focuses on the mother-child relationship in the context of breast cancer.
- Inclusion Criteria:**
 - Studies that focused on the mother-child relationship in families where the mother had breast cancer were included. Only English-language studies were used, and the review covered research from the beginning until December 2024.
- Exclusion Criteria:**
 - Studies were excluded if they focused only on father-child relationships, on other types of cancer, on male breast cancer, or if they didn’t study the mother-child relationship in the context of breast cancer.
- Databases:**
 - Ovid, Embase, and Cochrane CENTRAL.
- Search Terms/Keywords:**
 - Keywords included “Mother-child” OR “Parent-child” AND “Relation” OR “Relationship”, “Motherhood”, and “Parenting”. To narrow it down to breast cancer, terms like “Breast cancer”, “Breast neoplasm”, “Breast carcinoma”, “Carcinoma of breasts”, “Invasive ductal carcinoma”, “Invasive lobular carcinoma”, and “Mammary carcinoma” were used.
- Systematic Review Process:**
 - First, database searches were done using the keywords. Then title screening was done to remove unrelated studies. After that, abstracts were reviewed based on the criteria. Finally, full articles were checked in detail to decide which ones to include in the review.

Description of Studies

- A total of 308 studies were identified.
- 61 studies were screened in full.
- 43 studies met the inclusion criteria, including:
 - 29 qualitative studies.
 - 10 quantitative studies.
 - 4 mixed – method studies (Figure 1).

Figure 1. Flowchart of literature search



Results

Theme 1 Mother-Child Relationship and Parenting After Diagnosis

- 8 studies found that some relationships strengthened; others experienced tension.
- 13 studies reported that mothers often hid emotions to protect children and maintain routine.
- 12 studies described feelings of guilt over reduced involvement in parenting tasks.
- 17 studies highlighted that support from family or community helped balance roles.
- 9 studies show that mothers focused on building resilience and independence in children.

Theme 2 Priorities and Concerns of Patients

- 21 studies found that mother's prioritized their children's needs over their own treatment.
- 18 studies reported mother's experienced guilt, sadness, and fears of being a "bad mother."
- 17 studies described mother's being worried about how to inform children and the emotional impact on them.
- 9 studies show that some mothers delayed treatment to avoid disrupting family life.
- 12 studies report that mothers felt unsupported by health professionals in managing communication with children.

Theme 3 Decision-Making About Sharing the Diagnosis

- 16 studies state that mother's made decisions based on protecting children's well-being.
- 13 studies showed mothers chose to share the diagnosis to promote trust and reduce confusion.
- 11 studies showed that mothers avoided disclosure to prevent emotional distress.
- 14 studies identified factors influencing disclosure: child's age, family dynamics, personality, and beliefs.
- 15 studies noted that communication was often tailored to the child's developmental level; older children often received more details.

Conclusion

- Breast cancer significantly alters mothers' roles and priorities
- Disclosure of diagnosis is a complex, personal decision shaped by emotional, cultural, and relational factors.
- The mother-child relationship may improve or become strained, depending on the support systems and coping strategies.
- There is a strong need for tailored psychosocial support for both mothers and children, especially in communication and emotional coping.