

Abstract

Purpose: Awareness of children's decision making has recently increased to enhance palliative care, and policy makers strongly support shared decision-making with children. However, the conceptual framework about decision making for children with cancer remains unclear. Moreover, it is difficult to decide the appropriate care for children to support child-centered decision making. The aims of this study are to clarify the decision-making process of children with cancer regarding their care, treatment, and family and healthcare professional support, and to identify their needs and preferences.

Methods: I conducted a meta-synthesis using meta ethnography. I searched five databases, namely, PubMed, EMBASE, PsycINFO, MEDLINE, and CINAHL, and the synthesized studies following PRISMA-P. **Results:** Of the retrieved 7237 studies, 27 studies met the inclusion criteria. Four themes illustrating experiences of the decision-making process of children with cancer were identified: (a) facing changes brought about by health threat, (b) preparing for action, (c) acting convincingly, and (d) changes from internal and external influences. Decision-making is an initiative process for children with cancer to provide consent and accept their situation, and to act toward their goals. **Conclusion:** Children with cancer initially undergo the decision-making process. To respect their preferences, values and emotions may build trusting relationships with the children and promote their decision-making process. Future research should focus on children's insights particularly those under 10 years old and analyze the decision-making process diversely including child emotions, cognition, development, and interactions with parents and healthcare professionals.