

Supplemental Table S1. Coding Definitions, Adapted from VR-CoDES Manual

<b>CODE</b>	<b>DEFINITION</b>
<b>Cue/Concern (Clinician-elicited [CE] or Parent/Child -initiated [PI])</b>	
Cue CE	A verbal hint which suggests an underlying unpleasant emotion and would need a clarification from the clinician; solicited, explored, or facilitated by the health provider
Cue PI	A verbal hint which suggests an underlying unpleasant emotion and would need a clarification from the Clinician; patient initiative or active struggle to direct clinician's attention to specific worries
Concern CE	A clear and unambiguous expression of an unpleasant current or recent emotion where the emotion is explicitly verbalized with a stated issue of importance or without; solicited, explored, or facilitated by the clinician
Concern PI	A clear and unambiguous expression of an unpleasant current or recent emotion where the emotion is explicitly verbalized with a stated issue of importance or without; patient initiative or active struggle to direct clinician's attention to specific worries
<b>NOT EXPLICITLY referred to the cue/concern with the function of REDUCING SPACE</b>	
Ignore	Cue or concern appears to be completely ignored; no reference whatsoever is made to either the content or the emotion of the cue/concern in the clinician's response
Shutting Down	A response which actively shuts down or moves away from the cue/concern expressed by the patient, without making specific reference to it
Information-advise	Clinician informs, gives advice or offers reassurance without referring explicitly to the cue/concern, in a generic and non-specific way, with the function of non-inviting further disclosure
<b>NOT EXPLICITLY referred to the cue/concern with the function of PROVIDING SPACE</b>	
Back Channel	Provides space for the patient to say more or encourages further disclosure, through using a minimal prompt, or word, but not full statement; does not make explicit reference to the content or the emotion/affect mentioned in the cue or concern
Acknowledge	Provides space for the patient to say more about a cue or concern by "non-specifically" acknowledging what has been said; the response cannot explicitly mention the content or emotion of the cue or concern, but must nonetheless acknowledge it has been said; it should not explicitly seek further information, but just provides space for more to be said if the patient so wishes
Active Invitation	Explicitly seeks further disclosure or new information from the patient about the cue or concern, without making explicit reference to the content or the emotion/affect mentioned in the cue/concern
Implicit Empathy	Provides space for further disclosure through having an empathic function, without asking explicitly for further clarification or specifically mentioning the nature or the emotion of the cue or concern
<b>EXPLICITLY referred to the cue/concern with the function of REDUCING SPACE</b>	
Switching	Clinician uses one of a number of behaviors which have the function of changing the frame of reference of the cue/concern; the content or emotion of the cue or concern <b>MUST</b> be clearly referred to
Postponing	Clinician suggests explicitly that further exploration of the cue or concern is delayed; further talk about the cue or concern is not consented now but an explicit statement is made to make clear that there is an intention to return to the subject

Information-advise	Refers to an explicit response to the cue or concern, which gives information or advice, or offers reassurance; the response explicitly acknowledges the cue or concern, but does not invite further disclosure about the cue or concern
Active Blocking	Expresses an explicit refusal on the part of the health provider to talk further about the cue or concern, accompanied by a devaluation or disconfirmation of the patient or a refusal of what was said; this could be either on the factual or affective level; it may also include any statement that is minimizing or disapproving the cue or concern
<b>EXPLICITLY referred to the cue/concern with the function of PROVIDING SPACE</b>	
Acknowledge Content	The clinician explicitly refers to the factual content or topic of the cue or concern by allowing space for further disclosure without specifically seeking it and without referring explicitly to the emotional element
Explore Content	The clinician engages in behavior which refers to the factual content or topic of the cue or concern; it does not refer explicitly to the emotional element; the clinician explicitly requests further information about the content or topic area of the cue or concern, actively seeking to gain more information
Acknowledge Affect	The clinician explicitly refers to the emotional aspect of the cue or concern in the response; the health provider response allows space for further disclosure but does not specifically seek it (for example, by echoing or reflecting back)
Explore Affect	clinician behavior which explicitly picks up or refers to the affective or emotional aspect of the cue or concern; there must be evidence that the health provider is actively seeking more or new information about the cue or concern
Empathy	Health provider behavior which empathizes with the patient predicament; the provider legitimizes or shares the patient's emotion, with or without reference to provider's own feelings

Supplemental Table S2. Coding Definitions for Content of Emotional Cues and Concerns

Content of Cue/Concern	Definition
Ambiguous	The parent is clearly demonstrating an emotional cue or concern, but the underlying source is unclear or ambiguous
Emotional Well-being	Referring to emotional and psychological stressors and concerns as the underlying cause of emotional distress. This should be distinguished from physical symptoms leading to anxiety, depression, etc.
Healthcare Systems or Providers	Referring to inadequacies of the healthcare system or healthcare providers and related barriers
Information Overload/Unfamiliarity	Referring to information overload or unfamiliarity with cancer or sequelae of disease
Physical	Referring to physical manifestations and consequences of the cancer, its diagnosis, or its treatment
Prognosis	Referring to parental cues/concerns initiated by worries about prognosis/mortality of their child. This includes fears of relapse
Social	Referring to difficult family dynamics, socioeconomic situations, or cultural barriers