Childhood Cancer International

Myths and Misconceptions about Childhood Cancer Survivors[1]

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1 MYTH

Children with cancer and childhood cancer survivors pose a health risk to other children/adolescents. They are disease carriers.

FACT

Childhood cancer is not contagious. It is not an infectious disease. Neither is it a virus that can be transmitted or transferred by interaction. Thus, it is safe for other children and teens to play, socialize, interact with kids with cancer and childhood cancer survivors.

The reality is that children/adolescents with cancer who are immuno-compromised (i.e. have a weakened immune system during treatment), are at risk for catching the colds, measles, mumps, chicken pox, other common childhood illnesses from other kids.

This is why you see some of them wearing masks—to protect themselves. This is also why parents or carers oftentimes isolate their kids from large groups or public gatherings, when they know their kids are vulnerable.

2 MYTH

Childhood cancer survivors are “genetically inferior” and are unable to have children.

FACT

While some childhood cancer survivors may face fertility and reproductive health challenges, this is not the case (is not true) for the majority of childhood cancer survivors.

The type of childhood cancer that they were treated for and the treatment protocols that were followed will influence the impact of childhood cancer on the survivors’ fertility and reproductive health.

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[1] **Developed by Childhood Cancer International for the 2015 Childhood Cancer Survivors Month.**

3

MYTH

Childhood cancer survivors have a short life.

FACT

Studies have shown that childhood cancer survivors are at increased risk for late effects and secondary cancers; however, reductions in life expectancy depend on: a) how timely the cancer diagnosis was; b) what the initial treatment was; and c) the appropriateness of the treatment received. The nature and severity of the subsequent late effects will also influence life expectancy.

4

MYTH

Childhood cancer survivors generally do poorly in school and during employment.

FACT

While research has revealed that 2 out of 3 childhood cancer survivors suffer from “late effects,” these late effects do not necessarily affect cognitive and learning capacities.

Anecdotal reports indicate that childhood cancer survivors are determined and motivated to do well. There are many inspiring stories around the world of childhood cancer survivors who are successful, high performing achievers and/or make noteworthy contributions to their communities, despite life-threatening or life-limiting conditions.

5

MYTH

Childhood cancer survivors are socially challenged and generally have poor interpersonal and relational skills.

FACT

In most countries, during treatment, children/adolescents with cancer are separated from their peers and unable to engage in regular schooling and other activities. However, numerous studies have shown that as a consequence of the challenges they faced and their experiences, survivors tend to have better coping and increased resiliency. This is most true in countries where there are psychosocial support programs for children with cancer and childhood cancer survivors and/or where there are programs and services that help create a supportive and nurturing environment for children undergoing treatment for cancer.

It should be noted however that there have been emerging exploratory studies indicating that some childhood cancer survivors exhibit behaviour associated with PTSD (post traumatic stress disorder). This further emphasizes the need for robust follow up care, safe spaces (e.g. places where the kids can “hang out“ and be with peers who accept and understand them etc.) and strong circles of support for kids with cancer and childhood cancer survivors. This is why a number of childhood cancer foundations and patient support organizations provide alternative education facilities, in hospital or in their offices.

6 MYTH

Childhood cancer survivors are cured and no longer need continuing, follow up care.

FACT

Continuing follow up care is very important for childhood cancer survivors. Studies have revealed that childhood cancer survivors are at higher risk for a secondary cancer, or a debilitating health condition related to their initial cancer treatment. Therefore, vigilance and regular monitoring are critical for early identification and treatment of any health challenge or impairment.

Childhood cancer survivors and their families should be informed about the facts and details of their cancer, the expected health and lifestyle consequences of their treatment and the required monitoring/regular follow up.

Childhood cancer survivors should be provided with age appropriate information and enabled to understand their conditions. Teens and young adults need to feel empowered and able to take charge of their own health.

7 MYTH

Childhood cancer survivors will have a miserable, sad and dismal future. They can never have a normal life.

FACT

Most childhood cancer survivors return to normal school life and activities after treatment. They effectively reintegrate with their family, friends and communities. In other cases, the survivor and their families adapt and modify their lifestyle to achieve the “new normal.”

Adjustment to the “new normal” - life after cancer, becomes much easier more fulfilling and happier, with a circle of care provided by an understanding and supportive network of family members, teachers, carers, community of peers and friends.

8 MYTH

Childhood Cancer Survivors will always carry the stigma of cancer in their adult life. They will always be discriminated against and looked down on for marriage, employment and in social circles.

FACT

In most countries, childhood cancer survivors are looked up to and viewed as heroes and warriors who courageously overcame cancer. Childhood Cancer survivors are living proof and testimony that childhood cancer is curable. They are the best ambassadors to bring hope, motivate and inspire other survivors, new patients and their families.

In countries where discrimination and stigma still exist, survivors and their supporters need to stand up and speak out. They need to challenge the stigma, share their stories and show the reality of their new lives.

Studies have shown that education, information and real life stories are powerful tools to break stigma and eliminate discrimination.