CCLG The Children & Young People's Cancer Association

FREE

AUTUMN 2026 | ISSUE 112

contact

MAGAZINE

Resilience

What does resilience mean to different people?
How might it change over time?
What can help build resilience?

+ WHAT ARE COMPLEMENTARY THERAPIES?

+ HOW CAN CHARITIES HELP WITH RESILIENCE?

Family Story

Stacey Bark, whose daughter, Florrie, was diagnosed with leukaemia aged five, tells us how their family navigated cancer and some of the serious complications of Florrie's treatment, how Florrie is the driving force behind their efforts to support others, and what resilience means to them **Page 6**

HOW CHOOSING MY OWN PATH GAVE BACK A LITTLE BIT OF CONTROL

Abby Maxwell, diagnosed with blood cancer at 22, tells us what helped her during her treatment, how her experiences have shaped her career ambitions, and how she volunteers to help others affected by cancer

Page 5

BACK TO BASICS:

Supporting wellbeing during treatment

Small steps that can be taken to support a child or young person during treatment **Page 8**

INSIDE THIS ISSUE... ON RESILIENCE

Autumn 2026

EVERY ISSUE

ON THE COVER

Contact

is a free, quarterly magazine for families of children and young people with cancer.

Contact aims to reduce the sense of isolation many families feel following a diagnosis of childhood or young people's cancer.

CCLG: The Children & Young People's Cancer Association brings together childhood and young people's cancer professionals to ensure all children and young people receive the best possible treatment and care. **Contact magazine was founded by The Lisa Thaxter Trust and CCLG and first published in 1999.**

Past issues of Contact: The wide variety of articles published during the year in Contact adds up to a valuable and informative reference archive. If you would like any back issues, please contact the Editor. Details of key articles in previous editions are listed on our website.

CCLG The Children & Young People's Cancer Association

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KEEP IN TOUCH

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Your messages...

On Contact's last edition on 'Siblings'

"This has been so informative, thank you. It's such a great resource."

Read previous editions of Contact **by scanning the QR code**

From previous editions of Contact...

Katie's story provides hope and inspiration

"Reading this from my daughter's bedside, diagnosed with ALL. You are an inspiration."

"This story really resonated with me. Beautiful words from the people we need to hear it from most."

Gratitude to Kira for sharing how she wants to support others going similar challenges

"Thanks so much for sharing your story, Kira, stay well, I'm sure you'll have a wonderful career."

"Good luck, Kira, on your hairdressing career. I'm sure you'll be amazing and compassionate to help those suffering with their hair and or loss of it during cancer."

Scan the QR code to read Katie and Kira's stories, and those of others, from Issue 110 on 'Body image'.

Hello!

Resilience is something that is tested at different points of a cancer experience. But how can you build and harness resilience, whether that be the mental, physical or emotional kind?

Practising self-care, where you're able, can help, and so can using coping strategies. Taking small, achievable steps to improve holistic wellbeing, for you or your child, can also have huge benefits. Finding distractions or positive things to channel your time and focus into, and surrounding yourselves with the right people – and knowing when to ask them for help – is also important. And, as evidenced in this edition, there's also a lot of charities and professionals who can help carry the burden.

It's important to remember that resilience and strength are different things. You can't – and shouldn't feel you have to – be strong all the time. But hopefully, with the right support, and by finding what works for you, you can adapt to navigate the challenges.

Sam

If you would like to **SHARE YOUR STORY** in Contact or have an idea for a theme for us to cover, please let us know. Email us at **editor@cclg.org.uk**

MEDICAL ADVISER

Dr Ren Manias

Consultant Paediatric Oncologist at Southampton General Hospital and CCLG member

Resilience is a word that's used a lot in cancer care, and it means something different to everyone. It's the capacity to adapt and find a way forward in the face of something extraordinarily difficult – not by avoiding pain, but by moving through it. I see it in the children and families I care for in many forms every day, and it rarely looks how we might expect.

For some, resilience is obvious. It's the teenager who insists on doing their GCSEs from a hospital bed, or the seven-year-old who makes the nurses on the ward laugh as they receive their chemotherapy. For others, it's simply getting through each day, one treatment at a time. All are extraordinary, and none more valid than the other.

For families, resilience often means keeping going when running on empty. Making packed lunches and attending siblings' school plays while carrying a weight that most people can't begin to imagine. Sitting in a clinic waiting room for the hundredth time, preparing to receive news you know may change your life for ever. Families don't always recognise their own strength, but we see it clearly.

The word 'resilience' can be a double-edged sword. Many children, young people and families feel a pressure to be resilient – to stay positive, to cope well, and to hold it together for those around them. It's important to remember that it's okay not to be okay. This journey is one of the hardest things anyone can go through, and there's no right way to feel. Sadness, fear, anger and exhaustion aren't signs of failure, and resilience isn't something you either have or don't have. It's a dynamic process, built and supported over time.

Some of the things we see help most during treatment are surprisingly simple: maintaining 'normality' as much as possible, finding moments of humour and joy scattered throughout the day, staying connected to life outside the hospital, and allowing yourself to feel whatever you feel without judgment. Coping strategies families find helpful include keeping a journal, using exercise, art or music as an outlet or distraction, mindfulness, and finding peer support from others who genuinely understand.

Being resilient doesn't mean being strong all the time. It means that even in the hardest moments – where strength feels impossible and hope feels far away – something in you keeps showing up. And that, without question, is enough.

NEWS IN BRIEF

More immune cells could help prevent relapse

Researchers in Germany have found that giving both adults and children with leukaemia additional immune cells after a stem cell transplant is safe and could help keep the cancer from coming back. Results were strongest when the treatment was given early, suggesting it may work best as part of relapse prevention rather than later treatment.

(Source: Journal of Clinical Oncology)

Local anaesthetic shows promise in blocking childhood cancer spread

Researchers studying neuroblastoma have discovered that a local anaesthetic can significantly suppress the cancer cells' ability to invade surrounding tissue. In a laboratory study, the researchers exposed the cancer cells to tetracaine and observed their behaviour, with the results showing a marked suppression of invasive activity. While it can't be guaranteed that the same effect would occur in patients, the findings offer hope and lay the groundwork for future investigations.

(Source: Basic & Clinical Pharmacology & Toxicology)

Research reveals new treatment possibilities for rhabdomyosarcoma

American researchers have found a protein, called TAK1, in rhabdomyosarcoma cells that helps the cancer grow and survive. This protein is part of a process that the cancer cells rely on for survival. In the lab, medicines which block either TAK1 or the whole process slowed tumour growth and reduced the amount of cancer cells.

(Source: University of Houston)

Trial launches to test new immunotherapy for young people's cancers

A new trial will test a modified CAR-T cell therapy for children and young people with solid tumours, aiming to help the immune system better recognise and attack cancer. This could lead to new treatment options for cancers with lower survival rates.

(Source: Cancer Research UK)

DNA changes from chemotherapy could help predict relapse

Researchers have found that chemotherapy is linked to new DNA mutations in childhood cancers, with these changes being especially common in relapsed cancers. Looking at these genetic changes could help doctors spot treatment resistance earlier and tailor treatment to reduce side effects and improve outcomes.

(Source: Nature)

COVER STORY

"Choosing your own path gives you a little bit of control when you don't have much of it"

Abby during training to be a complementary therapist

__Abby Maxwell__ was diagnosed with blood cancer aged 22 in 2023. Here, Abby tells us what helped her during her treatment, how her experiences have shaped her career ambitions, and how she volunteers to help other people affected by cancer.

Before I began my treatment for high-grade non-Hodgkin lymphoma, my biggest concern was losing my hair, but this changed completely once I started chemotherapy. The nausea and sickness were the hardest part of my experience. I still deal with significant anxiety related to this, but I've found ways to cope, including using essential oils and massage to help manage stress, nausea, and anxious feelings.

I had to stay at University Hospital Hairmyres due to the constant sickness before being admitted as an inpatient at Beatson West of Scotland Cancer Centre, where my care was exceptional. Though my treatment affected my energy levels and I was feeling sick for so much of the time, I did my best to try to still enjoy life where possible and do as much as I could. I still went to concerts, still went out with my friends, and even went to college throughout my treatment. There was always a risk of infection, but I thought it was important to do as many 'normal' things as I could, when I was feeling well enough and not in hospital.

I was offered the use of the hospital's psychology services and peer support programmes throughout treatment, but it wasn't something I wanted to do at the time. The medical team were always great at checking in with me to see if I'd changed my mind, but I just wanted to concentrate on getting through treatment. This won't be the same for everyone, and choosing your own path is really important because it gives you a little bit of control at a time when you don't have much of it.

However, since finishing treatment, I've really benefited from these services. It's been a godsend to meet other young people who've been through cancer, and mostly, we just talk about normal young people things.

How contributing to a podcast has also helped

I've been involved with the Radiotherapy Podcast since its first season. The podcast brings together teenage and young adult cancer survivors to talk about their experiences, and this has also really helped in processing my experiences. It was the first example of peer support I'd taken part in, and after that I started going to more peer support events. It's also given me a real boost of confidence. The thought of thousands of people listening to my voice would have terrified me before cancer, but not anymore.

I'm now working behind the scenes, too, helping to come up with and gather ideas about what we want to talk about. In the second series, we were able to bring on our parents and partners, so we've been able to get a lot of different perspectives involved, which has been great.

What life looks like now

I'm almost three years cancer-free, and life feels well balanced right now. I still experience high levels of anxiety, particularly around my health, and I received some difficult news about my fertility last year. However, cancer has made me a more resilient person, and I now know that I'm capable of so much.

I'm now engaged to my partner of nine years, Liam, and I've begun a new career as a complementary therapist. I'm nearing the end of my Higher National Diploma course and have been accepted to university to study Integrative Healthcare. I also volunteer as a complementary therapist for Marie Curie Hospice and with Look Good Feel Better, where I provide skincare and make-up classes for people affected by cancer.

Advice to others

If I could give one piece of advice to a young person diagnosed with cancer, it would be to remember that cancer isn't linear. There'll be days you have never felt worse and some days you feel relatively 'normal'. Everyone's experience is different, so don't let someone else's story define your own.

◀ Abby celebrating her engagement to longtime partner, Liam

▶ Abby prepped for biopsy

“Resilience isn’t about being strong all the time – it’s finding ways to move forward even in the darkest moments”

***Stacey Bark’s** daughter, Florrie, was diagnosed with acute myeloid leukaemia aged five in 2022. Here, Stacey explains how their family navigated cancer and some of the serious complications of Florrie’s treatment, how Florrie is the driving force behind their efforts to support others, and what resilience means to them.*

Watching our daughter, Florrie, navigate cancer, long-term complications and ultimately a life-saving lung transplant has completely redefined what resilience really looks like for us.

Florrie was diagnosed with cancer when she was very young. In an instant, our world changed completely. Life became hospital corridors that soon felt familiar, long days and nights on the ward, and trying to process information no parent ever expects to hear about their child. Those early days were overwhelming and frightening. You go into survival mode, focusing only on what’s directly in front of you – whether that’s the next test, the next treatment, or the next hour – because anything beyond that feels too hard to think about.

Her treatment was intense and relentless at times. Chemotherapy took its toll on her small body, and there were many days of sickness, exhaustion and worry. But even then, Florrie showed something extraordinary that never left us. She faced everything with a quiet bravery and determination far beyond her years. She still wanted to laugh, to play when she could, and to find joy in the smallest, most ordinary moments, even in a hospital room that became our second home.

As a family, we had to adapt quickly to a life we never imagined. We leaned on each other more than ever before. Her brother, Freddie, became an incredible support – patient, loving, protective, and always there in ways that meant everything. We learned to celebrate the smallest wins: a stable blood count, a day without sickness, a smile after a hard treatment, a moment of normality in a very abnormal world. Those moments carried us through the hardest days.

Navigating further challenges

When treatment ended, we hoped life would begin to return to normal. We wanted to believe the worst was behind us. But the long-term effects of treatment, particularly the damage to Florrie’s lungs, became increasingly serious and couldn’t be ignored. Over time, her condition worsened, and we were faced with the devastating reality that she'd need a lung transplant to survive.

Waiting for a transplant is one of the most difficult experiences imaginable. It’s filled with uncertainty, fear, hope, and a strange kind of suspended time where life continues but everything feels on hold. You live with the knowledge that your child’s life depends on the selfless decision of another family, someone going through their own unimaginable loss. That awareness never leaves you and changes how you see everything.

When the call finally came, everything moved so quickly it was almost surreal. Florrie underwent a double lung transplant, a moment that changed everything for our family. It’s impossible to put into words the gratitude we feel for her donor and their family. Their incredible gift gave Florrie a chance at life again, and without it, she simply wouldn’t be here today. That generosity is something we carry with us every single day.

How Florrie drives our efforts to give back

Through everything we’ve experienced, we felt a strong need to do something positive, to give back, to raise awareness, and to help other families facing similar journeys. That’s why we set up Bemorefab Children’s Cancer Charity.

The charity was created to support families affected by childhood cancer, to raise awareness, and to highlight the realities of life during and after treatment. It has given our experience a sense of purpose in the darkest moments. In many ways, it has helped us process what we’ve been through, turning something so painful into something that might help someone else feel less alone.

“One of the most emotional moments of our journey was Florrie receiving a Pride of Britain award. It was incredibly special to see her bravery recognised in that way on such a public stage.”

Florrie is at the heart of everything we do. She inspires it all. Whether it’s sharing her story, supporting fundraising, or simply being herself, she connects with people in a way that words can’t fully describe. Through her, important conversations begin about childhood cancer, stem cell donation and organ donation, and those conversations matter deeply.

Florrie also creates educational videos about medical experiences in a child friendly way. These are called ‘Florence Explains’. Through them, she helps other children understand what hospital life and treatments can look like in a way that feels less scary and more accessible. Our hope is to get these videos into hospitals so they can support other children going through similar experiences.

◀ Florrie and brother, Freddie

Raising awareness is now a huge part of our lives. Before this journey, we didn’t fully understand how vital these things were. Now we know that awareness truly saves lives. If sharing Florrie’s story encourages even one person to register as a donor or support a family in need, then it’s worth every word.

One of the most emotional moments of our journey was Florrie receiving a Pride of Britain award. It was incredibly special to see her bravery recognised in that way on such a public stage. For Florrie, it was an exciting and joyful experience. For us, it was a moment to pause and reflect on everything she's faced and how far she's come despite it all.

▶ Florrie at the Pride of Britain Awards

What life looks like now

Life now looks very different to before. It's slower, more intentional, and focused on what truly matters. Our home is being adapted to support Florrie during her recovery, and we’re working hard to create a safe, calm space where we can simply be together as a family. Because of her transplant, avoiding infection is critical, and life still carries medical boundaries and precautions every day. That brings challenges, but also perspective on what matters most.

Florrie, now 10, loves being at home with us, spending time with Freddie, and being part of family life in simple, ordinary ways. She also loves being involved in raising awareness and understands that her story helps others, which gives her a real sense of pride and purpose.

If there’s one thing we’ve learned, it’s that resilience isn’t about being strong all the time. It’s about continuing even when things feel impossible and finding ways to move forward even in the darkest moments. It’s about holding joy and pain at the same time and allowing yourself to feel everything – whether that’s fear, sadness, hope, or gratitude.

What we’d say to others

To other families going through treatment, life after treatment, or long-term effects, we would say this: take it one day at a time. Try not to look too far ahead because it can feel overwhelming. Celebrate the smallest wins, as they matter more than you realise. And accept support when it’s offered, because you don’t have to do this alone.

And, most importantly, hold on to hope. Even in the hardest moments, there’s always something to hold onto.

Florrie’s journey is far from over. There will still be challenges ahead, but she's already shown us what true resilience looks like. Because of that, we face the future with hope.

Supporting your child's wellbeing during cancer treatment:

Nutrition, play, activity and everyday life

***Debbi Rowley**, Advanced Physiotherapist, **Alice Kay**, Dietitian, **Rachael Bennett**, Advanced Occupational Therapist, and **Rebecca Rodgers**, Play Specialist, all work in the Haematology/Oncology Team at Sheffield Children's Foundation Trust. Here, they share tips and advice on small steps that can be taken to support a child's wellbeing during treatment.*

When a child begins cancer treatment, families often find themselves navigating a world they never expected to enter. Alongside the medical complexities, parents must also manage the emotional, physical and practical challenges that treatment brings. Everyday routines – mealtimes, schoolwork, hobbies, or even simple play – can suddenly feel overwhelming. Yet these familiar parts of life are also powerful tools for helping children feel safe, supported and resilient.

This article brings together insights from dietitians, occupational therapists, play specialists and physiotherapists to offer a holistic guide to supporting your child's wellbeing throughout treatment. While every child's journey is unique, small, compassionate steps can make a meaningful difference.

Supporting your child's nutrition through treatment

For many families, nutrition becomes one of their biggest worries. Cancer treatments such as chemotherapy, radiotherapy and surgery can affect appetite, taste, digestion and energy levels. Children may experience nausea, mouth ulcers, constipation or fatigue, all of which can make eating difficult. It's easy for parents to feel pressure to 'get it right', but dietitians emphasise that perfection isn't the goal. The priority is helping children maintain strength, comfort and energy in whatever ways are manageable.

One of the most helpful strategies is shifting away from the idea of three large meals a day. When appetite is low or unpredictable, eating little and often – every two to three hours – can be far more successful. Small portions feel less daunting, and children may be more willing to try a few bites at a time.

Because treatment increases the body's nutritional needs, high calorie, high protein foods are especially valuable. These don't need to be complicated. Adding grated cheese to pasta, stirring nut butter into porridge, choosing full fat yoghurt, or mixing cream into soups can boost calories without increasing the volume of food. Snacks such as smoothies, flapjacks, crumpets, bagels or custard pots can also help children meet their energy needs between meals.

Hydration is equally important, particularly if vomiting or diarrhoea occurs. Sipping water, milk, diluted juice or even ice lollies throughout the day can help prevent dehydration. Some children find cold drinks more soothing, while others prefer warm, mild flavours. Experimenting gently can help you discover what works best.

Food isn't only fuel, it's also emotional comfort. Allowing children some choice – within limits – can reduce anxiety and give them a sense of control. Offering two or three options at mealtimes prevents overwhelm while still giving them a voice. Familiar routines, favourite foods and relaxed family meals can help maintain a sense of normality during a time when so much feels uncertain.

Above all, remember that appetite will vary from day to day. A registered paediatric dietitian can support you in adapting to these changes and ensuring your child receives the nutrients they need. And be kind to yourself – small successes count.

Maintaining daily activities and independence

Cancer treatment can affect a child's ability to participate in everyday activities, from getting dressed to attending school or enjoying hobbies. Occupational therapists encourage families to identify which activities matter most to their child and to focus on maintaining independence in those areas.

This might mean breaking tasks into smaller steps, using equipment to make activities easier, or choosing times of day when energy levels are higher. For example, a child who struggles with morning fatigue might find it easier to wash or dress later in the day. A favourite hobby might be adapted so they can still participate in a modified way.

Maintaining independence isn't just practical – it supports emotional wellbeing. Being able to do things for themselves, even in small ways, helps children feel capable and connected to their identity beyond illness. It also provides gentle physical activity, which can boost mood, motivation and energy levels.

It's important to understand that these everyday tasks contribute to a child's sense of normality. Even small achievements, such as having a bath, helping set the table, or completing part of a school assignment, can build confidence.

The power of play during treatment

Play is not a luxury, it's a lifeline. For children, play is how they process the world, express emotions and make sense of experiences that feel frightening or unfamiliar. Play specialists work closely with families to use play as a therapeutic tool throughout treatment.

- Preparation is one of the most effective ways to reduce anxiety. Helping children understand what will happen during procedures – using toys, pictures, models or simple explanations – can reduce fear of the unknown. When children know what to expect, they feel more in control and more able to cope
- Encouraging children to ask questions and talk openly in a calm, reassuring environment helps them feel secure. They look to trusted adults for cues, especially when things feel uncertain. Supporting them to express their feelings, whether through conversation, drawing, role play, or storytelling, can make a significant difference to how they manage treatment
- Role play is particularly powerful. Using imaginative scenarios allows children to explore their emotions safely and without judgement. They may act out fears, frustrations or questions they don't yet have words for. Through play, they can rehearse coping strategies and build confidence
- Parents and carers also need support. Techniques used with children – such as mindfulness, grounding exercises or breathing strategies – can be equally helpful for adults. Caring for yourself isn't selfish – it strengthens your ability to support your child

Supporting physical wellbeing

Physical activity may not be the first thing families think about during treatment, but it plays an important role in maintaining strength, mobility and overall wellbeing. Staying active can support muscle strength, bone health, cardiovascular fitness, sleep, mood and social connection.

Of course, some activities may not be recommended depending on the treatment your child is receiving. Your healthcare team can advise you on what's safe. But many forms of movement are not only allowed but are encouraged.

Activity doesn't need to be structured exercise. Everyday movements count – walking to school, climbing stairs, getting on and off the floor to play, riding a scooter, kicking a ball in the park, or playing balloon tennis in the living room. Small amounts of movement help keep children active without overwhelming your child. Further information on physical activity can be found in the CCLG booklet '**Keeping your child active during and after treatment**'.

Setting small, achievable goals can be motivating. A goal might be as simple as walking to the end of the garden, doing a few minutes of stretching, or playing outside for 10 minutes. As your child's energy allows, these goals can be gradually increased. If you're unsure how to set appropriate goals, a member of your healthcare team can guide you.

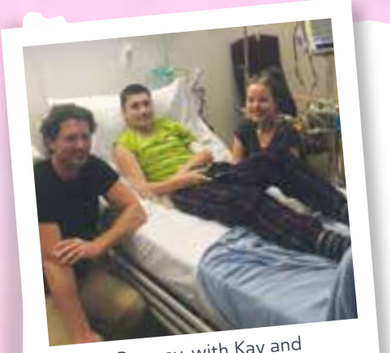
"Children thrive when they feel heard, supported and understood."

Celebrating the small wins

Supporting a child through cancer treatment is one of the most challenging experiences a family can face. But you're not alone. A whole team of professionals – dietitians, occupational therapists, play specialists, physiotherapists, nurses and doctors – are there to help you navigate each step.

Children thrive when they feel heard, supported and understood. Whether it's choosing a favourite snack, completing part of a daily task, expressing feelings through play or being active, every small achievement matters. These moments build confidence, resilience and a sense of progress.

Every little counts. Together, nutrition, activity, play, independence and emotional connection form a foundation of support that helps children feel safe, empowered and cared for throughout their treatment.



Ramsey, with Kay and his dad, Khalifa

"Take it a breath at a time, step by step"

***Kay Hunter Saber's** son, Ramsey, was diagnosed with leukaemia aged 14. Here, Kay explains how they navigated Ramsey's treatment, and how a question from his nurse led to her writing a book which she hopes will help others.*

In April 2016, our youngest son, Ramsey, was diagnosed with, Philadelphia-positive acute lymphoblastic leukaemia. From that moment onwards, everything we knew as a family changed.

What followed was two years of intensive chemotherapy in Spain, and then a bone marrow transplant in London in 2019. My husband, Khalifa, and I took it in turns at Ramsey's bedside, alternating every 48 hours until we were too exhausted and had to go down to every 24 hours.

Over the course of treatment, he was put under general anaesthetic 23 times. We learnt to feel his skin for fever, which is one of the first things you learn. You learn to stay alert, even when your own body is begging for sleep. There's no 'off switch' when you're caring for your child through such an intense experience. You live in survival mode.

This medical protocol meant weeks, and sometimes months, at a time in hospital. To enable us to get through these endless days and nights we created healing spaces in his hospital rooms. We prioritised keeping everything super clean, often using essential oils where permitted, finding natural light where we could. We sourced bone broth and nutrient-dense foods and explored complementary approaches, like breathing techniques, and physical exercises both in and out of bed.

Writing about our experiences

After his transplant, our cancer nurse specialist, Filippo, asked me a question I've never forgotten. He wanted to know what we'd done that meant Ramsey could leave hospital early and, more importantly, not come back with a secondary infection. Up to 75% of patients develop a significant infection post-transplant. Ramsey didn't. Filippo had seen the hospital rooms we stayed in, how we managed the space, and he felt it was something worth sharing.

For seven years I've avoided writing about it. Procrastinated. I thought Ramsey's story belonged to him and isn't for me to tell. But Filippo's question stayed with me and eventually I sat down and began to put together what would become 'Step by Step: A Parent's Guide to Caring for a Child with Cancer'.

It's not a medical book. It's a practical, holistic guide, carer to carer, covering things like creating healing spaces, using food as medicine, building your support network, looking after yourself as the caregiver, advocacy, and emergency preparedness. All the things I wish someone had handed me on day one. It's small enough to fit in a handbag, with note pages at the end of each chapter so you can write down your own questions and concerns to take with you when you see your medical team. I'm hopeful that something in it will be of help. Even one tip, one piece of advice, if anything in these pages can help one other family, then Filippo's question was worth answering. I want it to reach families when they need it and give them something practical to hold on to.

Stepping back into the light

Ten years on from diagnosis, Ramsey, who is about to turn 25, is here. We're no longer going to hospital for daily, weekly or monthly blood tests. For the first time since 2016, we feel 'off the leash'. After all these years, I'm only now just feeling that we're stepping back into the world of light. I don't know how long that takes, and it has taken us a very long time, but we're getting there.

If you're reading this and you're somewhere in this journey, I want you to know that you're stronger than you realise. Trust your instincts. Be your child's advocate. Look after yourself, too, learn to accept help when offered, and on the difficult days, take it a breath at a time. Step by step. Paso a paso.

Step by Step: A Parent's Guide to Caring for a Child with Cancer is available from **www.amazon.co.uk**

A free PDF can be found at **www.theoilchemist.com**

Finding freedom on two wheels

***Chris Badcock's** son, Sam, was diagnosed with a brain tumour in 2019 aged 11. Here, Chris tells us how exercise played a crucial role in Sam's recovery from treatment, and how something as simple as being gifted a bike can make a profound difference to a child or young person's recovery and quality of life.*

When Sam was diagnosed with a right frontal high-grade neuroepithelial tumour, we quickly found ourselves adjusting to a new reality of hospital appointments, treatments and uncertainty. Like many families, we focused on getting through one day at a time and helping Sam maintain as much normality as possible.

Sam's treatment was successful, but recovery brought its own challenges. Following neurosurgery, radiotherapy and chemotherapy, he was left with significant long-term effects like chronic fatigue, and remains dependent on steroids. Activities many teenagers take for granted became much more difficult. His strength, stamina and confidence all needed rebuilding.

How cycling helped Sam

Exercise became key to Sam's recovery. Initially, this meant using an exercise bike indoors while supervised by rehab specialists. Then, as confidence grew, he started to exercise at home. It was a safe way for him to build fitness and regain strength at his own pace. Progress was often slow, but every minute on the bike felt like an achievement.

Over time, those indoor sessions began to pay off. Sam gradually developed the confidence to cycle outdoors again, starting with short rides with family members and then longer adventures. Cycling gave us something incredibly valuable: the chance to spend time together doing something positive that wasn't centred around hospitals, treatment or recovery.

For Sam, cycling represented more than exercise. It offered independence, allowing him to explore, challenge himself, and experience being outdoors. One memorable day came shortly after receiving his new bike from Cyclists Fighting Cancer (CFC). As a family, we completed a 13-kilometre ride along a former railway line, through a tunnel, and into Tintern for ice cream. Sam was tired afterwards but felt proud of what he'd achieved.

Another special milestone came when Sam was able to support a cause close to our family's heart. During a fundraising challenge for Brain Tumour Research, I set myself the goal of cycling 274 miles throughout one August. Sam joined me for parts of the challenge, which not only showed how much physical progress he'd made, but also his determination to help others.

One of the most significant milestones, however, was when Sam felt confident enough to start cycling with friends. Being able to join his peers on bike rides was huge and showed he was regaining confidence in himself.

Our appreciation for CFC

Receiving a bike through CFC has been about much more than the bike itself. It was an investment in Sam's physical recovery, mental wellbeing, and independence, and gave him a reason to keep exercising and improving. It encouraged him to set goals and celebrate progress. Most importantly, it helped him rediscover activities that he enjoyed and could share with family and friends.

Recovery from childhood cancer is rarely straightforward, and resilience is built through many small victories rather than one defining moment. For Sam, now 18, cycling has provided many of those victories. From exercising indoors to family rides and supporting a fundraising challenge, and eventually confidently cycling with friends, each stage has helped him rebuild confidence and independence.

Sam's next steps

Today, Sam's just finished his A-levels and is preparing for the next chapter of his life. Despite the challenges he's faced since his diagnosis, he has worked hard academically and remains determined to achieve his goals, including studying Law at university.

As parents, we're incredibly proud of his resilience, dedication and determination, and everything he's achieved.

◀ Sam at the CFC shop collecting his second bike

In Sam's own words:

"Post treatment, being able to cycle confidently with friends and family was a goal that meant a lot to me. CFC's support helped me to achieve that confidence and now allows me to have the freedom to go out and cycle independently or with friends and family."

Apply for a bike by scanning the QR code

Amber

“Do what you can, when you can, and take advantage of every second that you have”

***Amber** was diagnosed with acute lymphoblastic leukaemia aged nine in June 2022. Now 14, she tells us about the biggest challenges of her treatment and what helped her and her family this time, and offers advice to others.*

For me, some of the biggest challenges of my treatment were all the things that I had to miss out on or couldn’t do because of check-ups or in case I got ill, particularly days out with my friends. I remember being told I shouldn’t play contact sports at school or go on the trampoline at sleepovers and always being upset because I loved to be active. I used to hate feeling too ill to do things, but when I could, I’d go back to school after chemo and blood transfusions to play netball or football. I was nervous to go to school without my wig on at first but then we had an ‘express yourself’ day and I decided to be brave and go in without my wig. Looking back, I think I’d say to people now to always do what you can, when you can, or you might miss out.

Reading books helped me because if I was having an off day, I could take myself to another place and forget everything. I remember sitting in the garden for hours and just reading while my parents worked. Friends helped me a great deal, especially having people who stayed the same when so much else was changing. Playing or chatting with friends is great because it can help distract you or make things feel normal even if they aren’t.

How charity support helped my whole family

Momentum Children’s Charity is a charity that offers tailored support to families across London, Surrey and Sussex, and they helped me immensely by giving me fun things to do and organising for me to meet other people in the same situation. This really helped because treatment could be a lonely experience, so I really wanted to meet other children going through something similar to me.

> “Reading books helped me because if I was having an off day, I could take myself to another place and forget everything”

Momentum also helped my family by including my siblings in activities, like going on their riverboat, which I did with my whole family and particularly enjoyed. We also got to go to their respite cabin together, which helped us get away from everything for a few days, and my mum also went to coffee mornings organised by Momentum where she met other parents.

Life after treatment

My life now is different to before cancer in so many ways. In treatment, one thing I discovered was a love of football and I’m so glad I did. I couldn’t really play at first because of my portacath, but once it was out, I began to play every second I had spare and probably drove my parents crazy! I love football now and play at a high level, which I never thought could be possible for me. I just won the league cup with my team and have made so many new and amazing friends as well that will last a lifetime.

After I started at secondary school, I was asked about what resilience means to me in an English lesson and I talked about my treatment. I didn’t find this easy because it’s a big thing to share with people you don’t know. However, I’m so glad I told them because they’ve helped me when I needed it.

My advice to others

The advice I’d give to others is to find something you enjoy and do it whenever you can and spend time with people you love. Do what you can, when you can, and take advantage of every second. Finally, there’s always a light at the end of the tunnel and sometimes it’s brighter than the one you left behind.

www.momentumcharity.org

Resilience, resourcefulness and a drive to help others

The Waugh family

***Mat Waugh’s** daughter, Kirsty, was diagnosed with a brain tumour in 2024 aged 10. Here, Mat explains the mindset he and his family have taken while navigating her illness and treatment, how Kirsty has shown resilience through her determination and dedication to helping others, and her achievements in doing so.*

“Take it one day at a time.” We heard that advice from almost everyone we met after our daughter, Kirsty, was diagnosed with a brain tumour. Unlike the herbal remedies, prayers and stories of Great Aunt Maude’s miraculous recovery, this was good advice. Naturally, we ignored it.

Kirsty having a blood transfusion

The other wisdom Maude might have given us is "Count your blessings". And guess what? We’ve discovered the power of self-administered combination therapy. Just like the medical type, it doesn’t always work. But it’s the best we’ve got.

To count your blessings in public is to risk sounding smug, complacent, or both, but we’ll do it anyway. By most measures, we’re extraordinarily lucky. Kate and I have three funny, beautiful daughters. Kate’s boss is sympathetic; mine is a tyrant, but as I’m self-employed, I can tell him where to go! Where we once holidayed abroad, we now travel – almost – as happily in the UK. We live close to a great local hospital and within reach of the world-leading Royal Marsden. Kirsty is at school, there by virtue of the test she passed just as her eyesight was failing. This smart, feisty, creative girl will be home later, moaning about homework. I wish every parent of a child with a brain tumour could say the same.

But here’s the other version. Kirsty’s tumour is large and inoperable. The drugs available to her haven’t changed in 50 years. Any growth of her benign tumour could impact her vision and hormones, just as it did before. Unlike last time, when minor shrinkage brought her eyesight back, this might be permanent.

Even typing that makes me feel sick. It’s the reality, but who benefits when we turn it over and over in our heads? We choose the first version. And we look for any way we can to boost our blessings.

Kirsty’s determination to help others

After Kirsty’s eyesight came back in spring 2025, we wanted to repay the help that we’d received. Kate and I chose a sponsored cycle, while Kirsty chose crochet. In six months, Kirsty raised £120,000 for Children with Cancer UK. Every day brought life-enhancing moments for Kirsty and us, from the support from our community and the UK’s crochet army, to the thrill of meeting celebrities and attending events.

But, by November 2025, Kirsty’s chemo was no longer working. Times like that require you to confront reality. We considered the poor options available. By January, Kirsty was on a new, stronger treatment. By February, we’d got the hang of it.

So, at that point, we thought "Could we capture lightning twice?" and raise some more money. One big problem was that we’d run out of donors. Unconcerned by practicalities, Kirsty suggested: "Let's find all the people called Kirsty and ask them!" A lot of late-night tinkering with ChatGPT later, we were ready to try and mynameiskirsty.com was born.

This time, Kirsty wanted to fundraise for research into better, kinder treatments. She chose OSCAR’s Paediatric Brain Tumour Charity. They’re 250 miles from us in York, but very close in their understanding of families like ours. We’ve now found nearly 14,000 people called Kirsty or Kirstie across 53 countries and all seven continents (hello, Antarctica!), with 2,000 Friends of Kirsty also joining her interactive map. She’s raised over £100,000 and has been interviewed worldwide. Does she feel lucky? In many ways she does, and so do we.

What has worked for us

Our approach to Kirsty’s illness is a bit like mindfulness. Anyone who’s tried it will know it’s about ‘noticing and returning’. When our thoughts take us somewhere dark, perhaps as we sign into hospital or after a call, we try to ‘notice and return’. We cushion the blows for Kirsty, now 12, and guide her back. That way, hopefully none of us will hit rock bottom.

▲ Speaking to Kirsty Allsopp, on BBC Breakfast

Vicky Inglis

Caring for the carers: The coaching programme that supports parents' and carergivers' wellbeing

***Vicky Inglis** is Head of Family Support Services at Solving Kids' Cancer UK. Here, she tells us how its bespoke coaching programme for parents and carers of children with cancer is helping to support their physical, mental, emotional and social wellbeing.*

When a child's diagnosed with cancer, the focus is rightly on treatment, care and hope. But behind that is another story – of parents and carers carrying fear, exhaustion and uncertainty, often with little space for their own mental wellbeing. During my own son's treatment, someone supporting our family asked me a question that stayed with me: "Who cares for the carers?"

Too often, parents' and carers' emotional wellbeing is overlooked. Life during treatment is relentless, and when treatment ends, families can be expected to return to normal while still carrying its emotional impact. For bereaved families, grief can affect every aspect of life.

Through our work with families and community survey findings here at Solving Kids' Cancer UK (SKC UK), a clear support gap emerged: parents and carers often struggled to access mental health support when they needed it most. While the child's needs understandably remain the priority during and after treatment, parents' and carers' emotional wellbeing can receive less attention. In response, with generous support from TNL Community Fund, we developed a compassionate coaching programme to provide tailored support to empower parents and carers to navigate their experiences with greater resilience and confidence.

Focus groups with post-treatment and bereaved parents, held in consultation with our charity partner Life After Cancer, helped shape the programme – grounding it in lived experience and designing it around parents' and carers' needs.

To respond to these needs, two bespoke programmes were developed – one for parents post-treatment and one for bereavement. These free, confidential online group sessions run weekly for six weeks, with each two-hour session facilitated by professionally trained SKC UK life coaches with lived experience. Coaches remain available for an hour after each session, and participants receive a wellbeing pack on registration.

Post-treatment support

The post-treatment coaching programme supports parents as they adjust after treatment, with a focus on improving emotional wellbeing and day-to-day functioning. Over six weeks, sessions explore topics such as re-establishing routines, managing anxiety, strengthening family relationships, promoting self-care, building peer support, and setting future goals.

"I learned some great coping mechanisms and tips along the six weeks and genuinely feel so much more bright and positive about our future. Thank you for all you have done for me and my family."

Post-treatment coaching participant

Bereavement support

The bereavement coaching programme offers a safe and compassionate space for parents to explore grief, share experiences and develop practical coping strategies. Across the sessions, parents reflect on themes such as self-care, relationships, work, purpose, and honouring the memory of their child, while also building resilience and reducing isolation.

Building on the positive impact of last year's bereavement coaching programme, we've extended this by working in partnership with Alice's Arc Children's Cancer Charity so that more bereaved parents and carers can benefit from this support.

"The connection and time to talk and engage with other bereaved parents is incredible, and to be able to share about our own and hear about other heroes is amazing. The structure was great for bringing topics to mind, and was at times challenging emotionally, in a good way. It's all too easy to push away feelings all the time, so it's good to give some of the harder thoughts some space."

Bereavement coaching participant

Prioritising the wellbeing of parents and carers is a fundamental part of trauma-informed family support. Whether families are adjusting to life after treatment or living with bereavement, coaching offers a compassionate space to process experiences and build resilience. If we're truly asking, "Who cares for the carers?", the answer must be that we all do – by listening, responding and recognising that their wellbeing matters, too.

A parent's view...

Why finding the right support for you is so important

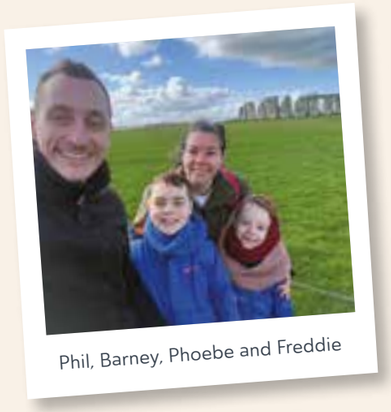
Phoebe Scaife's son, Barney, was diagnosed with bronchial mucoepidermoid carcinoma in 2024 when he was eight. Here, she tells us why it's important to reach out for, find, and accept the right support, and how this can help.

Barney and Phoebe

In June 2024, we received the news that a tumour had been found in our son Barney's left lung. This came just a few months after he'd been rushed to hospital with pneumonia. After a biopsy, it was confirmed that he had a bronchial mucoepidermoid carcinoma.

The preferred treatment was surgery, and with it, came huge risks. A week after the results, he went into surgery to remove his lung. This ensured all the cancerous cells were removed, to reduce the chance of the cancer returning.

The majority of Barney's journey was spent at home. I'd take him to and from hospitals for appointments, tests and scans. With no family nearby and his dad, Phil, working in London, a huge amount of planning would go into each appointment to ensure someone was always at home for our youngest, Freddie. Phil and I are both self-employed and if we weren't working, we weren't earning. Work and home life had to carry on around our new world of childhood cancer.



Phil, Barney, Phoebe and Freddie

Five days after his surgery, Barney was discharged from hospital and told that it would be "life as normal". We were now in charge of nursing him back to his new life. I was terrified and completely overwhelmed. He was weak, recovering from major surgery. We started to create a new life built on what we felt comfortable with. We just had to guide ourselves through it, which came with its own scary baggage.

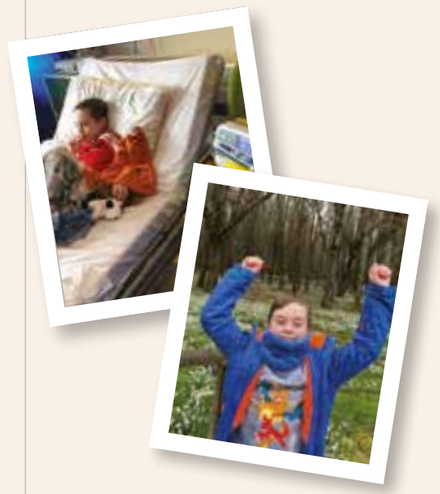
Finding the right support

From February 2024, when Barney was first taken to the hospital with suspected pneumonia, our family life changed overnight. Barney and Freddie had never spent a night apart before then. We effectively went into another lockdown. Barney was too weak and got too tired easily and couldn't do much. We'd go out for a short time and then return home so he could rest.

There was so much love and support when Barney went into surgery from friends and family, which we greatly appreciated and helped us so much. But when he was discharged, life carried on as normal for everyone else, while we were still in the thick of it. I felt so lonely and exhausted trying to keep everything going. I had no one to talk to who would understand. That is, until our support worker from Young Lives vs Cancer, Sarah, got in touch.

Sarah was there when we were desperate for someone to talk to, someone who understood what we were going through as a family. She also pointed us in the direction of other charities that offered support and helped us when we couldn't get hold of answers at the hospital. Sarah also helped with Barney's gradual return to school, contacting them with information about childhood cancer and how they could support Barney. She'd listen when I was trying to figure things out in my mind and always checked in on us when he was due a scan or tests.

I soon realised that, when crisis hits, I put my head down and go into strategy mode, pushing emotion to the back. This was how I coped but it's exhausting and, at some point, emotion will hit. I needed to add balance back into my life. I love running and had put this on the backburner. So, I started running a mile a day to get some structure back in my life, and I also started therapy. I couldn't support my family if I didn't look after myself.



What I've learned more than anything is that finding your support network is such a huge help and that's why you shouldn't be afraid to reach out. People want to help but often don't know how or what to say. As we continue our journey, I make sure I'm there for my family, especially Barney, who's now 11. When he's due a scan or appointment, I keep my diary clear so I can not only be present but give myself the headspace for the emotion that comes with it.

Jasmine Jones

Helping to ensure no family in Wales has to carry the weight of childhood cancer alone

***Jasmine Jones** is Head of Operations at Latch Welsh Children's Cancer Charity. Here, Jasmine tells us how Latch supports families in Wales to carry the weight of a childhood cancer diagnosis with its bespoke emotional, practical and financial support.*

At Latch, we understand how overwhelming a cancer diagnosis can be for children, and for their families, and how much resilience it takes to face it head on. To support families, we're here with practical support like hospital-based accommodation, a team of social workers offering emotional support, and a wide range of financial grants for families facing the unexpected financial toll of childhood cancer.

The activities we provide are a vital part of our support because they give families the chance to step away from that environment and spend meaningful, joyful time together. These moments help restore a sense of normality and give children and their loved ones something positive to hold on to during an incredibly difficult time.

While children are staying at the Children's Hospital for Wales, we arrange activities such as balloon modeling, science sessions, music therapy, and more. We host weekly coffee mornings on the ward, giving families a regular space to connect, share experiences, and receive peer support in a familiar and supportive environment. We offer monthly wellbeing sessions, too, which include therapies such as massage, reflexology or reiki to help parents and carers manage stress and improve wellbeing.

Outside of the ward, we organise cinema trips just for families supported by Latch, where children undergoing treatment can safely enjoy films without worries around infection or illness as a result of being in a crowded space. We also arrange socials for teenagers, including nights out, adventure golf and pizza making.

For bereaved families supported by Latch, we have three annual events – a coffee morning, a morning memory walk, and a meal. We also provide free holidays for Latch families – something they often find difficult to afford or arrange due to the pressures of caring for, or grieving, a child with cancer. Over the past year, Latch has supported free holidays for over 300 children who are receiving or have recently completed treatment and their family members. In the same period, more than 850 children and family members attended our events. We couldn't be here for families affected by childhood cancer in Wales without our amazing supporters, and we're incredibly grateful for all they do.

Jo's story...

One bereaved family that Latch has supported is that of mum-of-five Jo, whose youngest daughter, Sharelle, was diagnosed with acute lymphoblastic leukaemia in April 2020 when she was three years old. After two years of intense treatment Sharelle went into remission but then developed another type of leukaemia – acute myeloid leukaemia – in March 2024. Very sadly, after aggressive treatment, Sharelle died in February 2025, just after her eighth birthday.

Later, Jo and her family went on a free holiday provided by Latch, where they spent quality time together and were able to remember Sharelle.

Jo said: "Our Latch Worker, Hayley, called and asked if we wanted to go on a last-minute family holiday to the Bluestone National Park Resort. It was a quick decision and the best we've made. We hadn't been on a family holiday for years. Sharelle would always be admitted to hospital when we tried.

"We always include Sharelle in what we do and, thanks to Latch, all the girls packed her teddy bear in their bag when we went to Bluestone. Latch gave us vouchers for the Build-a-Bear shop and we used them to make special bears in Sharelle's memory. They've all got Sharelle's voice inside them. She tells the girls that she loves them and to have a good day.

"It was peaceful at Bluestone and made a world of difference. To not have to worry about the expense and have these things provided is amazing. For the children and families who have gone through so much trauma and so many medical procedures and complications, you can never put a price on happiness or quality time."

Sharelle

Identifying new treatment options for Burkitt lymphoma that doesn't respond to treatment

Dr Simon Bomken

- **PROJECT TITLE:** Identifying new treatment options for therapy resistant Burkitt lymphoma
- **LEAD INVESTIGATOR:** Dr Simon Bomken
- **INSTITUTION:** Newcastle University
- **AWARD:** Approx. £215,000 (funded by The Little Princess Trust and administered by CCLG)

Most children diagnosed with Burkitt lymphoma in the UK are cured by our current chemotherapy. However, for children whose lymphoma comes back (relapses), treatment becomes very challenging. Our research is seeking to identify new treatments to attack these most resilient of cancer cells.

For many years, children diagnosed with Burkitt lymphoma have received very intensive treatment with chemotherapy. More recently, many have also received an antibody treatment called rituximab. With this approach, we now expect to cure 95% of all patients. Despite this excellent outcome, we recognise two big ongoing challenges. Firstly, many children experience very unpleasant side effects during treatment and often spend long periods in hospital. Secondly, our current 'second line' treatments for relapsed Burkitt lymphoma aren't good enough and many children don't survive following relapse. This means that while we'd love to reduce the intensity of treatment for newly diagnosed children, we don't want any increased risk of relapse.

What are we doing?

We've previously shown that lymphomas which carry a fault (mutation) in the important cancer related gene TP53 can develop resistance to chemotherapy and relapse. While that risk is small, this finding allows us to ask an important question: "How do TP53 mutations result in therapy-resistance?"

This is important because, despite many years of trying, we don't yet have medicines which work effectively against mutated TP53. So instead, in this project we've tried to identify other ways in which TP53 mutated lymphomas can develop resistance to our current chemotherapy.

"Our research is seeking to identify new treatments to attack the most resilient of cancer cells."

Using a powerful laboratory technique called CRISPR we've gone in search of genes or groups of genes (we call these 'pathways') which are essential to how Burkitt lymphoma cells survive chemotherapy. In particular, we're looking for pathways which are especially important in TP53 mutated lymphomas. To do this, we grow cells in the laboratory, treating them with the same chemotherapy drugs given to children. The clever bit is that the CRISPR then scans the entire genetic code to pinpoint those genes which are essential for the lymphoma to survive chemotherapy treatment.

What have we found and what's next?

Our CRISPR experiments have given us a list of possible new treatment targets, but we know that some of these will have arisen by chance. For our work to benefit children, new targeted treatments must be tested in a clinical trial. It's important that we only try to do this with medicines that have a good chance of being effective, so for now this work continues in the laboratory.

We're going through the list, using a range of different approaches to choose which are the very best targets to continue to study. Ultimately, though, our hope is that we can recommend a new drug to be investigated for children with relapsed Burkitt lymphoma to improve their chance of being cured.

Scan the QR code to read about Identifying new treatment options for Burkitt lymphoma that doesn't respond to treatment

60 SECONDS WITH

Ginny McGivern

Complementary Therapy Nurse Specialist at Nottingham Children's Hospital

Q: Tell us a little about your career so far?

A: I trained as a registered general nurse in Warwick in 1981, as a midwife in Solihull in 1987, and as a children's nurse at Great Ormond Street Hospital in 1990. I then moved to the oncology/haematology ward as a junior sister at Nottingham Children's Hospital in 1991.

In 1996, I privately trained as a holistic complementary therapist, with diplomas in aromatherapy and massage, guided imagery, and baby massage instruction. Complementary therapies are therapies that can be used alongside orthodox treatments to support wellbeing, quality of life and symptom relief.

I spoke to my manager about providing a complementary therapy service for children and young people at the hospital, the first of its kind in the country to offer a nurse-led complementary therapy service for children and young people with various illnesses and conditions. Amazingly, it's now in its 30th year, and it's still the only complementary therapy unit in the UK to offer this service by a nurse to all children and young people who are inpatients.

For six years, I divided my time between complementary therapy and nursing duties on the ward, until deciding I needed to make a choice. In 2003, I chose complementary therapy. The Nottingham Hospitals Charity funds the Complementary Therapy Nurse Specialist role three days a week.

Q: Tell us about your role supporting children and young people with cancer and their families?

A: At Nottingham Children's Hospital, I offer massage, relaxation and baby massage instruction three days a week to young patients suffering with cancer and many other illnesses. Children whose quality of life has been reduced by their illness/disease deserve some tender, loving care and something to look forward during a traumatic time. Discomfort due to the side effects of chemotherapy and post-operative pain can be relieved with massage therapy by assisting them to relax.

Complementary Therapies can be particularly beneficial for children receiving palliative care. It offers pain relief through gentle massage techniques but also shows the child and family that healthcare professionals are still available to continue to care for them and are still there to give them the love and attention they deserve in a gentler, less invasive form.

We also offer a free weekly complementary therapy service for parents and carers who are staying in hospital with their child. This has been hugely popular with all our families and helps them feel valued and cared for.

Q: How does complementary therapy help build resilience for children and young people with cancer?

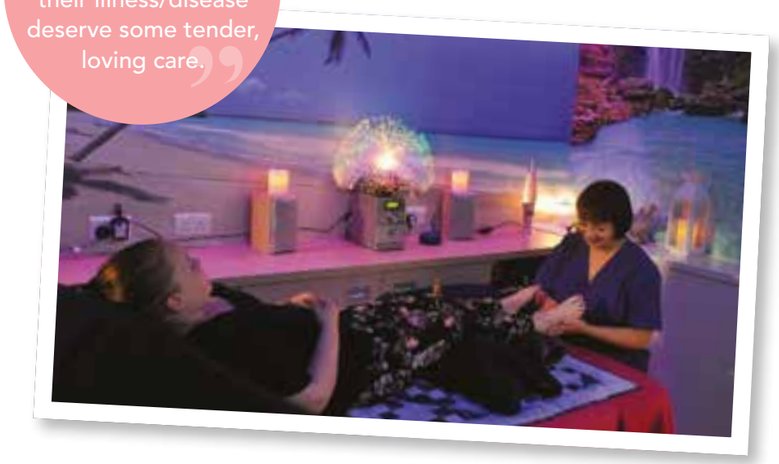
A: During complementary therapy sessions, we discuss what has worked in the past to ease pain, nausea and anxiety, and to help with relaxation. We look at various tools like massage, breathing techniques, aromatherapy and relaxation music. The child or young person can then hopefully cope better with stressful situations, either in hospital or at home.

Q: How do people get this support?

A: Any child or young person who is a patient under a paediatric consultant at the Nottingham Children's Hospital can access the Complementary Therapy service. Any member of the multidisciplinary team can make a referral.

For those in other centres wanting to access complementary therapy while going through treatment for cancer, ask your nurses and consultant if there are any services available.

> "Children whose quality of life has been reduced by their illness/disease deserve some tender, loving care."



ASK THE

Expert

Dr Olivia Walker, Clinical Psychologist at Health in Mind, Birmingham Women's and Children's NHS Foundation Trust

What is 'resilience'?

Resilience is the ability to adapt or respond to difficulty. This will look different for different people. It might be about acknowledging how hard and scary cancer is yet being determined to overcome it. Or continuing with treatment even when it's making you feel worse. Or it could be offering emotional support to your child even when you're frightened yourself.

What if I don't have a choice?

Some people don't like the word resilience because they don't get to choose to be resilient. Sometimes people are described by those around them as resilient when they're simply doing what they need to do to survive a difficult experience, like turning up for treatment every day.

If this is how you feel, that's okay. Resilience is not about pretending those more difficult emotions don't exist. It's perfectly normal to feel angry, worried, frightened, resentful, or sad. We don't get to choose how we feel. But we might be able to think about how we can manage some of those emotions so that they don't control us. What we do get to choose is what we can do to make tiny moments of our day, that little bit brighter, even if they only last a short while.

How can I cope with the demands of treatment?

Focus on what matters to you

Treatment can be long, painful and relentless and sometimes can even lead you to question things about your old life. Try and think about things that were important to you before you, as a child or young person, or your child if you're a parent, started treatment. What qualities do you hope other people value in you? This could be authenticity, humour, honesty, kindness. These are things that make you, you.

Connect with others

Spending time with people who make you feel good, has heaps of benefits. But it's also okay to give yourself permission not to force contact with the people who don't do this! If you find that people are asking you lots of questions that you can't answer, see if somebody else can talk to them instead. Prioritise the relationships that feel easy. Consider what support you need from other people and let them know.

Notice what's around you

It's perfectly normal for difficult thoughts or worries to be racing around your head. When this happens, it can be helpful to focus on the present moment. What can you see? What can you hear? What can you feel? What can you smell? What can you taste? If you're able, try this outside – can you hear the birds? Smell any flowers? Touch the grass? This is one small example of how mindfulness can bring us back to the present moment. The more you practice mindful behaviours when you feel okay, the easier they will be to use when you don't.

Look after your body

If you're a child or young person going through treatment, looking after your body can feel difficult especially if you're experiencing gruelling side effects from treatment. While you may not be able to do much physical activity, are there things you can do? Try your best to follow the advice of professionals like doctors and physiotherapists, but don't be too hard on yourself if you struggle with some areas. There are lots of people around you who can help.

If you're a parent or carer of a child or young person with cancer, remember that looking after yourself isn't selfish, it's essential – you can't pour from an empty cup.

> "We don't get to choose how we feel. But we might be able to think about how we can manage some of those emotions so that they don't control us."

Honour your loved one with a Special Named Fund

Our **Special Named Funds** are a meaningful way of honouring a child or young person affected by cancer, bringing together family, friends and your wider community to create a brighter future for others.

You choose where your fundraising will make the greatest difference – whether that's funding pioneering research, or supporting trusted information for families facing a diagnosis – and we'll be with you every step of the way.

Together, we can change the future for children and young people with cancer.

Scan the QR code to find out more about creating a Special Named Fund

CCLG The Children & Young People's Cancer Association

www.cclg.org.uk @cclguk

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