

INTRODUCTION

Welcome to *Cancer and school life* – a pack for schools where a child or young person has been diagnosed with cancer. This has been designed to help you talk with pupils about childhood cancer and the different ways that they could help.

This pack is written for teachers and those who work with them in schools. It contains details of a teaching session, which centres around showing pupils a short video. The session has been developed to encourage a child or young person's peers to support them by:

- Understanding more about their cancer
- Learning a little about cancer treatment and its effects
- Knowing how to help them.

Although we understand that Primary and Secondary children will have different needs in terms of what they need to know and what they understand, we have left it to teachers to decide what is suitable and what isn't for their particular class or group.

We're aware that the video may raise more questions for pupils as they watch it, so the pack also contains information to enable you to be more confident in your discussions and answering questions they might have.

You'll find more information about what schools can do to support a child or young person with cancer and their family on our website at clicsargent.org.uk/forteachers

Contents

1. Guidance notes
2. Teaching session
3. Cancer and school life DVD
4. Childhood cancer and treatment – overview for teachers
5. Answering questions about your friend's illness: factsheet for pupils (can be photocopied)
6. The background to this pack
7. Useful resources



GUIDANCE NOTES

Before teaching the session

Before you start, it's important that you:

1. Get permission

Before teaching the session, you should ask the young person who has cancer, and their parents/carers, if they are happy for this information to be discussed with their peer group. It's important that you have their permission as they naturally may also wish to watch the video and find out more about the objectives of the session.

The child or young person might wish to come along and be part of the group discussion

if they are able to, and this should be encouraged where possible. It's advisable to discuss with them beforehand how much they want to participate in the session. It might also be an opportunity in some schools to include their siblings in the session, where appropriate.

2. Inform other parents and carers

Let the parents/carers of other children and young people in the group know in advance about the session and what the aims are. They might want to discuss it with you or prepare themselves for any questions their child might come home with.

Here's an example of the information you could send to parents/carers before the session:

Dear Parents and Carers

We are writing to let you know about a teaching session on childhood cancer we are planning for a group which includes your son/daughter next week on X.

As you may already be aware, a pupil in our school is having treatment for cancer. We would like friends and classmates to understand a little more about childhood cancer and how they might support their classmate. To help us do this we will be running a teaching session next week on the subject of childhood cancer.

The materials we will use in the session have been developed by CLIC Sargent, the UK's leading cancer charity for children and young people, and their families, in response to research they undertook into how childhood cancer can affect a child or young person's education. The class will watch a short video and be involved in a group discussion.

We hope we'll be able to answer all the questions the group might have on the day, but there may be some issues your child will want to discuss with you at home. The best guidance we can give you is to say that we need to be honest but optimistic about treatment for anyone with cancer, and that it's okay to say we don't know the answers to some questions. Information about childhood cancer can be found at clicsargent.org.uk

Please make us aware if your child has a close relative who has cancer, or if a relative or family friend has recently died, so we can support your child appropriately.

You are welcome to contact the school if you have any concerns about this before or after the teaching session.

3. Be prepared

There are two videos on the DVD, a five-minute version aimed at primary schoolchildren, and an eight-minute version aimed at secondary schoolchildren. It's important that you watch the videos before you present one to the group. You know the group best, and it may be that one version is more appropriate than the other for that particular group. Here is a quick overview of what the videos cover:

Big questions: general information about childhood cancer, what it is, how it is treated

My friend had cancer: a child who has had cancer and their school friend talk about what the friend did that helped while they were off school and when they returned, and the difference this made

I'm still me: information about how the child or young person returning to school may have some extra needs, such as leaving class early, attending part-time, or having rest breaks.

4. Think about who else should be there

If the group usually has a Teaching Assistant or Learning Support Assistant with them for part of the week, then ensure that they can be at the session as they may find pupils talk to them about it later on. They are in a good position to check what knowledge the pupils have taken away from the session and if they understood what they were being told. Some schools might also be able to include their school nurse in the session, for extra support.

5. Think about how you might react yourself

The types of cancers that affect children and young people are mostly different from those that affect adults, but you may find that discussing it with the group is not easy because of your own experience of cancer in your family or amongst your friends. If you think you may be upset or personally affected, make sure you raise this with your colleagues as something you would like some help with. It's really important that pupils get a clear message about their classmate who has the diagnosis and don't worry about the anxiety or uncertainty of an adult who is speaking with them.

6. Consider pupils who might be affected

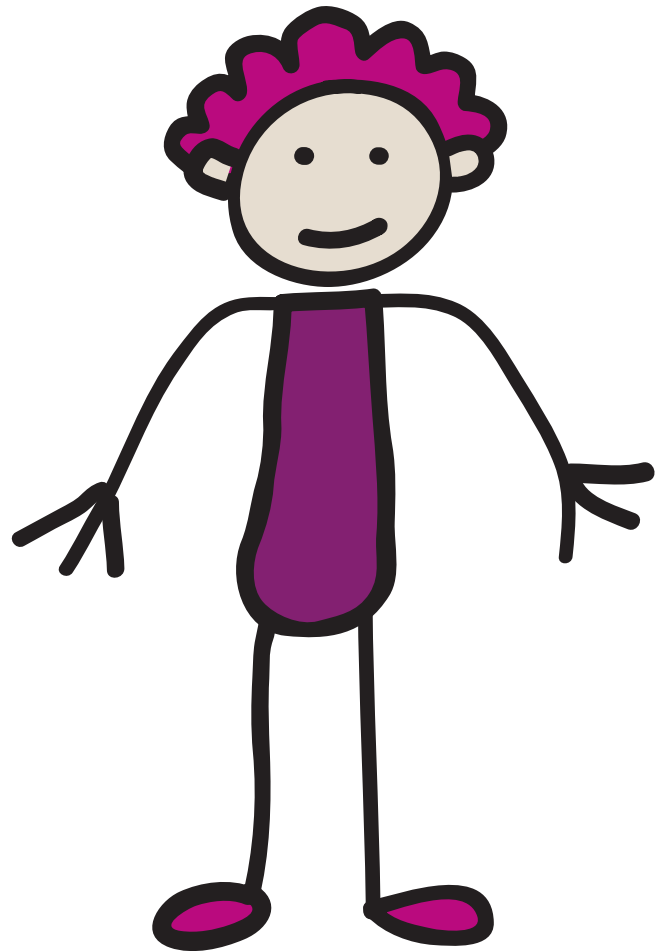
It's important to consider any pupils in the group who might already have been affected by cancer in their family or have experienced the death of a family member, or close family friend.

7. Think about siblings

Siblings in the school may be indirectly affected by the group watching the video. Following the session they may get asked more questions in the playground about their brother or sister's cancer diagnosis, or asked how they are doing. Siblings may wish to be involved in the session, so it's important to think about this beforehand and discuss with the family.

8. Have answers to hand

The videos are short and to the point, so may not cover all the information you need. To help provide you with more background information, you'll find in this pack an information sheet called *Childhood cancer and treatment – overview for teachers*. This includes different terms that might come up in your group discussions. You'll also find in this pack *Answering questions about your friend's illness* – an information sheet for friends of children and young people with cancer. This answers some common questions about childhood cancer and treatment. If you wish, you could make copies of *Answering questions about your friend's illness* to hand out during the session.



Discussing death

There's a possibility someone might ask if the child or young person who has been diagnosed with cancer is going to die. When people think of cancer, death is often at the forefront of their minds, and pupils may already have had discussions with their parents/carers about their classmate's diagnosis.

Your priority in this session is not to give detailed medical information about their classmate, or to talk about the treatment they are having. However, the group may naturally be interested and curious about what their classmate is going through. If the subject of death comes up, and it may not, below are some basics to bear in mind:

Do:

- Reassure them that most children and young people survive cancer
- Let them discuss their fears but make sure the discussion moves on fairly quickly and doesn't dwell on the darker aspects of this subject
- Say that "although a small number of children and young people do die from cancer, the doctors think they can make 'x' better and that is why he/she is having treatment and we are going to help 'x' as much as we can while they have treatment." This explanation means that you can then come back to the class if necessary and say "although the doctors thought they could make 'x' better, the treatment isn't working so they are going to try some stronger medicines so he/she will be away from school again."
- Make sure the group has a clear message about this and understands what you are saying
- Encourage them to discuss any religious questions relating to death with their parents/carers.

Don't:

- Give any promises about what the outcome of the child or young person's treatment will be
- Raise the subject of death if the group doesn't, as it may give the wrong impression of what is happening.

TEACHING SESSION

You can run the session with the whole class, or you might choose to do it with smaller groups. Many of the activities are intended to be discussions, so smaller groups might be more appropriate, depending on the pupils.

These notes are intended as guidance to give you an idea of how to use the video. To help you, we've also included a summary of the session, including timings and a list of the resources you'll need, on page 6. Depending on your group or class, you may choose to run the session differently but please read this guidance in full before starting.

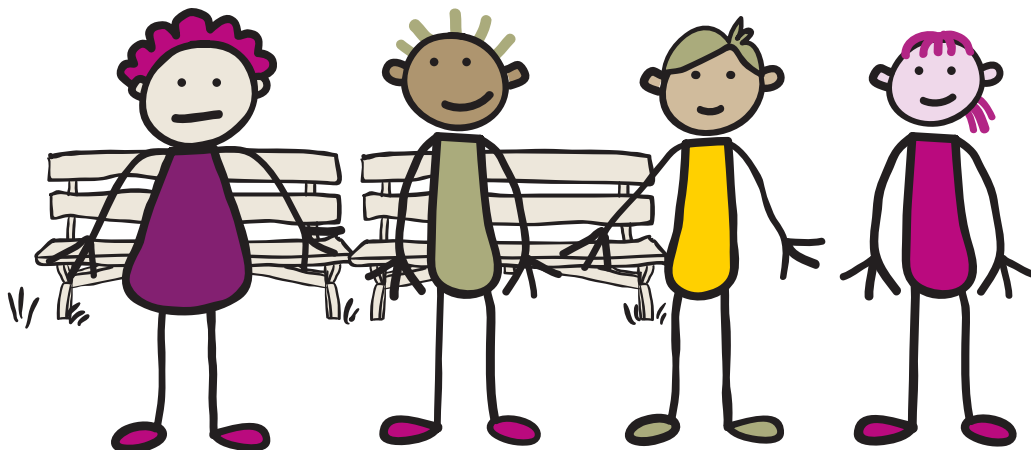
Recommended: use these materials with a small group if possible, so that there is an opportunity for all pupils to fully participate. With older children, it's usually best if it's just a group of the young person's friends, rather than the whole class.

It might also be appropriate in some schools to use these materials during a small after-school session for pupils and their parents/carers, especially if the pupils are in the younger age group.

Learning objectives:

To understand some basic information about childhood cancer and its treatment

To establish a practical solution to some of the issues (eg how to help their classmate keep in touch with school or what they could do to help them when they get back to school).



1 Introduction

5 minutes: establish ground rules for the session. It might be that your class won't need this, but if this is a group that has come together to watch the video and might not know each other very well, then spend a few minutes at the start of the session making it clear why they are here as a group, what they are going to be discussing and why their attention is important.



2 Watching the videos

The videos last between five and eight minutes depending on which one you show. Each video has three clear sections so can be split into three sections for discussion if you wish to pause it. In this plan, we have assumed the video will be paused, but it doesn't have to be.

A BIG QUESTIONS: 10 minutes Discussion and notes on board

Check the pupils' understanding of what is outlined in this section about childhood cancer. Some of the group may have personal stories about members of their family who have died after cancer treatment (this may even extend to discussion about pets' cancer), but the discussion needs to stay firmly on more general issues about the illness as much as possible. Some may want to share what they know about treatment.

Try to ensure that the group understands any new words, but a great amount of detail about treatment is probably unnecessary here.

Main points

- Childhood cancer is very rare
- Most children and young people with cancer survive
- Cancer can't be caught or passed on
- The cancers that affect children and young people are mostly different to those that affect adults
- Treatment for cancer can last a long time.

B MY FRIEND HAD CANCER: 10 minutes Discussion and notes on the board

Discuss in small groups and feed back, or have a whole class discussion from the start. These discussions are to get the group to think about and empathise with their classmate who is ill, whether they are at home, in hospital or returning to school. Most pupils will have thoughts on this, even if they haven't been at home or in hospital for any length of time.

You can ask:

What's it like to be away from school when you are ill? What do you miss? What's it like being in hospital?

Main points

- Missing friends
- Being bored
- Getting behind with work
- Missing school generally.

Or

What is it like returning to school when you have been off? What do you look forward to? What do you worry about?

Main points

- Feeling nervous
- Seeing friends
- Getting back to routine
- Being behind with schoolwork
- Feeling left out
- People asking questions.

Then

Discuss what the children and young people in the video did to help their friend. Ask if the group have any other ideas which would help their classmate. If the pupil with cancer is in the session, they may have experiences or ideas they want to share, or they may just want to listen to the discussion.

Main points

- Your friend is still the same person and it's good for them to do as many normal things as they can
- Be there for your friend
- Keep in touch with them through visits, text, Skype, FaceTime, email and social networks
- Make sure they know how to get in touch with you
- Check with them how they would like you to be around them (eg some children and young people don't mind talking about their treatment, while others prefer not to)
- Understand that just because they don't want contact one week they might the next when they feel better
- Always ask your friend before you pass on any information to other people, and be especially thoughtful about sending texts to other friends and posts you might put on social networking sites.

C I'M STILL ME: 10 minutes Discussion and planning as a group

What you cover here will depend on whether the child or young person is back at school. Here are two suggested activities, but this part of the session will depend very much on the individual needs of the child or young person and the group.

If the pupil is out of school:

Can we do something as a group/class to help our friend? Discuss ideas for keeping in touch, even though their friend may not be well enough to respond. These ideas are best coming from the group, but they need to be feasible and also sustainable. So keep it as realistic as possible.

Cancer and school life

Discuss what their friend might like to hear about, what they will be interested in from the class or the group. It might also be important to discuss what they won't want to hear about.

Some ideas that might be possible are:

- Regular emails from the class with someone responsible for sending the email each week
- A book they can all write in and send home, for the child to write back, so it can go to and from school (easier if there is a sibling at the school)
- Letters sent through the post (especially if their friend is in hospital for a long period of time and might not have access to the internet)
- Photographs of what the class have been doing, with comments
- A scrapbook of class activities, with comments so that their classmate can 'catch up' when they return to school if they have been away for a long period of time
- Regular Skype calls (although their friend might not want to be on the screen themselves)
- A noticeboard, or section of it, with a photo of the child or young person and any correspondence from them (check with them and their parents/carers first that they are happy with something so public)
- For younger children, a teddy which comes to school during the week and then goes home at the weekend with work to do or notes from the class.



If the pupil is in school or starting to come to school:

What is appropriate here will depend very much on the age of the pupil, their individual needs and the school situation. These are only suggestions about ways to help. It's best if the group can make the suggestions themselves, but here are some practical solutions that other schools have used:

- If they are likely to feel tired, their friends could look out for them and, if necessary, go with them to the school office or medical room, or tell a teacher for them
- Arrange a buddy or buddies to help the child to get around the school, carry bags and to give them some protection from the rough and tumble of school corridors and playgrounds. These arrangements should be led by the wishes of the child, their mobility and other considerations such as the school timetable and accessibility of the school grounds
- If the child can't go out at break time, one of their friends could stay with them
- If they aren't in school each day, someone could make sure any work for them is put to one side, notes are photocopied, left in their tray, kept in a special folder at school or emailed home
- If they are worried about unkind comments from pupils who don't know them, friends can sometimes do the explaining about their illness for them (agreeing before what is appropriate and what they would like them to say)
- If they are concerned about walking into school for the first time, a friend could arrange to meet them outside school.

Very few children and young people will want any fuss at this point and too much attention can be counterproductive. Peers may need to be reminded what it's like when they have been the centre of attention when they haven't wanted to be, or an occasion when they have felt everyone looking at them.

3 Ending the session

5 minutes: ideally the session should end with a short plan of who is going to do what. Obviously this will depend on the age of the pupils in the group and how much responsibility they can deal with. But it's a positive end to the discussion if pupils can see what they can do to help. For example, if the child is off school, the plan might be simply agreeing to meet with a smaller group of volunteers to discuss further and report back, or it might be something as simple as an exercise book that they all write in.

Be careful not to give any one pupil too much responsibility as it can be difficult to keep this going. It's easier for a group to take on responsibility for taking things forward with some adult support.

Lastly, the teacher will need to feed back to the child or young person and/or their family so that they are able to contribute to any plan or suggest their own ideas for support in school. They might have different ideas to those that their friends have discussed and need to have the final say in what happens.

4 Follow up after the session

It's a good idea to come back to this session a week or so later, maybe a month later, to discuss as a group again. If there is a 'communication group' in the class it can give you a good reason to raise the discussion again. As things change, for example if the child or young person having treatment is going to start back at school, it could be a good time to discuss the situation with the class again. With some groups it might be possible to keep their awareness going with regular updates if their classmate is able to keep in touch with the class, or with a few friends.

Again, keep the communication going with the child or young person and their family about the best ways to support them.



SUMMARY OF THE TEACHING SESSION

Timing: 30–60 minutes

Group: class or group of pupils who know the child or young person with cancer

Resources: whiteboard, or large pieces of paper and markers

Timing	Activity	Discussion	Outcome
■ 5 minutes	Establish ground rules for the session	Make it clear why they are here as a group, what they are going to be discussing and why the session is important	The group understands what the session is about
■ 3 minutes video ■ 5–10 minutes discussion	Watch: 'Big questions' section of video	Discuss the information seen in the video and questions about this	The group is clear about the information on cancer
■ 3 minutes video ■ 5–10 minutes discussion and notes	Watch: 'My friend had cancer' section of video	What is it like to be away from school ill? or What is it like to return to school? Discuss ideas from the video	Notes about what it's like to be away from school or to return to school
■ 2 minutes video ■ 10–15 minutes discussion and notes	Watch: 'I'm still me' section of video	Make a plan of what the group will do to keep in touch with/help their friend when they are back at school or Discuss some practical ways that they might be able to help their friend at school	Plan agreed

CHILDHOOD CANCER AND TREATMENT OVERVIEW FOR TEACHERS

What causes childhood cancer?

Children and young people very rarely get cancer. There are lots of ideas about what causes childhood cancer, but there isn't one definite answer. Many scientists believe that the most likely reason children and young people get cancer is down to chance. For example, being born with a faulty gene, or when a cell divides inside their body and makes a mistake.

As we get older, there are lots of external factors that can increase the risk of cancer. These can include smoking, not doing enough exercise and a bad diet. However, it's very unlikely that these factors cause cancer in children and young people. Adults are more likely to be affected by these things because they have been in contact with them much longer.

Treatment

Children and young people with cancer aged 0–18 are treated in specialist treatment centres. Often this will be many miles from where they live, though they may receive some of their care closer to home.

When a child or young person is diagnosed with cancer, their medical team will put together an individual treatment plan that takes into account:

- The type of cancer they have
- Its stage (such as how big the tumour is or how far it has spread)
- Their general health.

The three main ways to treat cancer are chemotherapy, surgery and radiotherapy. A treatment plan may include just one of these treatments, or a combination of them.

Children and young people may be in hospital for long periods of time, or they may have shorter stays and be out of hospital quite a bit. It depends on the type of cancer and treatment they have, and how their body reacts to treatment. Some are able to attend school while treatment continues.

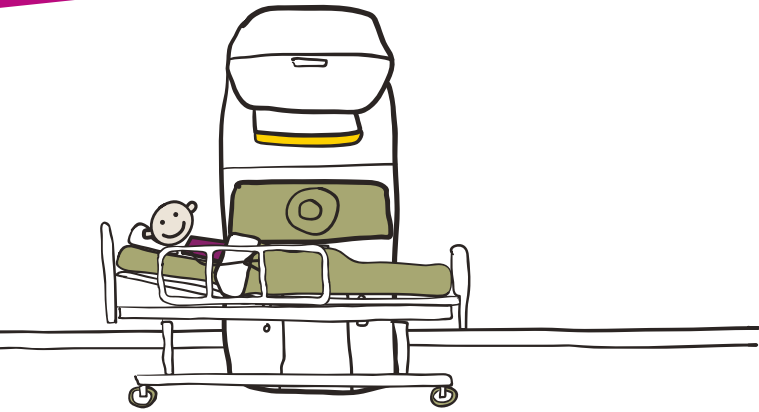
When the cancer is under control, or in remission, children and young people usually feel well and rarely show any signs of being unwell. If cancer comes back after a period of remission, this is known as relapse.

Chemotherapy

This is when medicines are used to kill off cancer cells. The doctor may use one medicine or a combination. These medicines are usually given by injection into the bloodstream (intravenously). Sometimes they can be given as a liquid or tablet, or by other types of injection.

Chemotherapy is usually given in cycles. This means having several days or weeks of treatment, then a rest period, and so on. Usually children and young people do not need to stay in hospital for all the treatment and can go home, and often back to school, between cycles.





Radiotherapy

This uses high-energy X-rays, which are directed at the site of the cancer to kill the cancer cells, while doing as little harm as possible to healthy cells. Radiotherapy doesn't hurt but children and young people might experience some soreness and sensitivity afterwards. The treatment only lasts a few minutes, but it's important to stay very still while it's being given. It is usually given Monday to Friday, with breaks at the weekends.

Proton beam therapy is a special type of radiotherapy that can be used to treat some types of cancer. Families will often travel abroad to receive the high energy version of this treatment, although centres are now being developed in the UK.

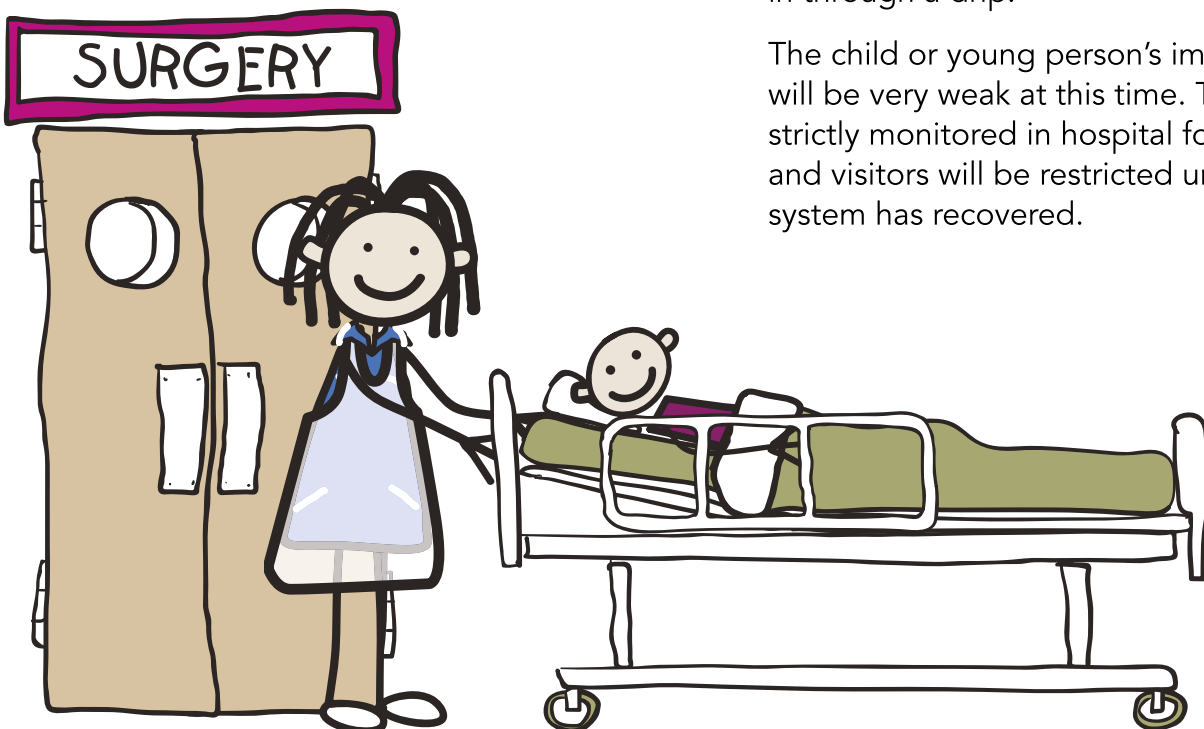
Surgery

Many childhood cancers are treated with surgery. Chemotherapy or radiotherapy may be given first to shrink a tumour and increase the chances of successful surgery. Chemotherapy or radiotherapy may also be given after surgery if the cancer has not been completely removed or to make sure it's all gone.

Stem cell transplant

This treatment is mainly used for leukaemia but can be used for other cancers as well. A stem cell transplant is usually carried out after a child or young person's stem cells have been destroyed through high doses of chemotherapy or radiotherapy. Replacement stem cells are put in through a drip.

The child or young person's immune system will be very weak at this time. They will be strictly monitored in hospital for a few weeks and visitors will be restricted until their immune system has recovered.



Side effects

Treatment for cancer can cause various side effects. Different treatments cause different side effects – which ones a child or young person experiences will depend on their cancer and treatment.

Below is a little information about some of the side effects children and young people having treatment for cancer may experience.

Feeling and being sick

Chemotherapy and radiotherapy can both cause nausea, and chemotherapy can cause vomiting too. Sometimes anti-sickness medicines, also called anti-emetics, are given to help relieve this side effect. Any nausea and vomiting should be resolved before the child or young person returns to school.

Fatigue

Both chemotherapy and radiotherapy can cause significant tiredness, both during treatment and for several months afterwards. This can affect mood as well as energy levels. Fatigue can make it harder for children and young people to concentrate and rest is important. Cancer and treatment can often cause sleeping problems too.

Hair loss

Although chemotherapy kills cancer cells, it can kill other fast-growing cells too, including hair cells. This means that chemotherapy can make hair fall out – including eyebrows, eyelashes and body hair. With radiotherapy, hair loss only happens to the area that's being treated.

Hair usually grows back once treatment has finished, though it may not grow back in an area targeted by radiotherapy. Hair can look different after it grows back, and it may be curlier, finer, or a different colour.

Eating difficulties

Treatment can cause changes in appetite and weight, and other side effects, such as a sore mouth. It can also affect eating habits and can cause increased hunger or a loss of appetite, and weight gain or loss.

Some children may return to school with a nasogastric (NG) feeding tube in place if they are finding eating and drinking difficult.



Cancer and school life

Other changes in physical appearance

Some drugs used in cancer treatment can cause swelling or puffiness of the hands, face, feet and ankles. This should reverse once treatment is finished.

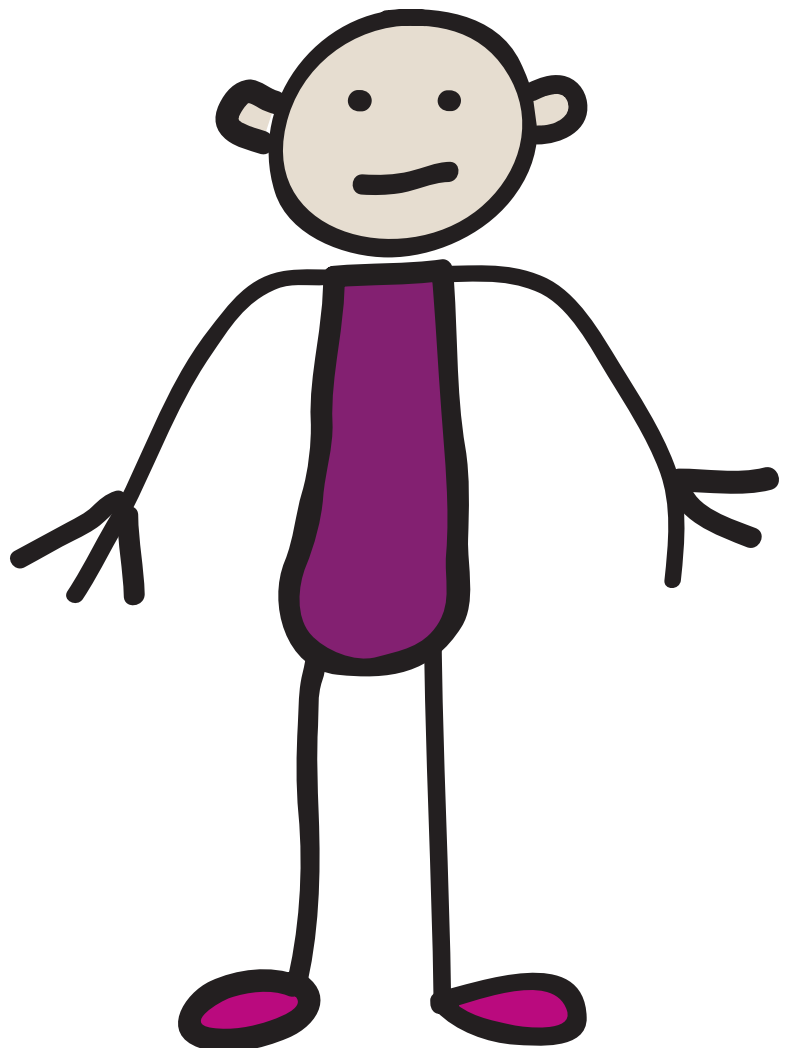
In some cases, a child or young person may return to school having had a limb amputated or with scars from surgery.

Reduced resistance to infection

Treatment can temporarily reduce a child or young person's immunity, making them more susceptible to infections. At times they may need to avoid crowded places like cinemas, parties or even school.

When at school it's particularly important that they avoid contact with pupils who have chickenpox, shingles or measles.

Cancer affects more than a child's health. It can disrupt family life, and impact a child or young person's emotional wellbeing. For more information about childhood cancer and how it affects families day-to-day, visit clicsargent.org.uk



ANSWERING QUESTIONS ABOUT YOUR FRIEND'S ILLNESS YOUR FACTSHEET

Finding out your friend has cancer may have left you feeling worried. You probably have lots of questions and things that you're wondering about, like what you can do to help them.

This information sheet answers some common questions about how cancer affects children and young people. We hope it helps you understand what's happening to your friend and how you can support them.



What is cancer?

Our bodies are made up of millions of cells, which make the things our bodies need, like blood, muscle and bone. These cells are always dividing to make new ones. This helps us grow and develop, or they just replace older cells that have worn out. Sometimes when they divide, something goes wrong and the new cell doesn't behave properly. Normally when this happens the cell destroys itself.

Sometimes though, these cells survive and get out of control. They carry on dividing themselves into more cells that do not behave properly and have the ability to spread to other parts of the body. This is called cancer.

Your friend may have leukaemia or a tumour:

- Leukaemia happens when some of the blood cells do not work properly and keep dividing into more cells that don't behave properly
- Solid cancers (or tumours) happen when the damaged cells form a lump – on a bone, in a muscle or in a lymph node for instance.

What causes cancer?

Children and young people very rarely get cancer, and we don't really know what causes childhood cancer.

The types of cancer that children and young people get are mostly different to those that affect adults.

Can I catch cancer?

No. Cancer can't be passed on, like a cold or 'flu' can. You can spend as much time with your friend as you want – it won't give you cancer.

Is my friend going to be okay?

Everyone with cancer reacts differently to treatment, but it usually helps most young people to get better



Cancer and school life

How is cancer treated?

There are three main types of treatment for cancer – chemotherapy, radiotherapy and surgery. Your friend may be having one of these, or a combination.

Chemotherapy is a medicine treatment that kills cancer cells. The medicines used in chemotherapy are very strong. They may be given to your friend as a tablet, liquid medicine, injection or through a drip.

Radiotherapy is a type of high-energy X-ray. It kills cancer cells in the part of the body where the cancer is, while doing as little harm as possible to other cells.

Surgery means having an operation in hospital. If your friend has a lump or tumour they may need a small operation called a biopsy first. That's when the doctors take out a small piece of the tumour to find out more about it and decide how to treat it.



Treatment for cancer can last a long time – sometimes two or three years. Children and young people with cancer are usually treated in hospital. Your friend may be in and out of hospital, possibly for long periods.

Do these treatments hurt?

These treatments don't hurt, but they're not very nice.

- Chemotherapy and radiotherapy may cause side effects, like sore skin, sickness, tiredness or hair loss
- If your friend needs surgery they will have a general anaesthetic. They will probably be given painkillers afterwards
- If they are having chemotherapy, they may receive their treatment through a 'portacath' or 'central line' (see section later). This allows medicine to be put into their bloodstream. It means they don't have to have as many injections
- If they're having radiotherapy, they will have to keep totally still for a few minutes while the treatment is given.

The doctors and nurses will be making sure that your friend gets the best type of treatment for them, and that any side effects are handled as well as possible.

What is it like in hospital?

Your friend may spend long periods of time in hospital while they are on treatment. They will be able to do lots of normal things there, like watching television, using computers and playing video games. Most hospitals will have a schoolroom, to help children and young people keep up to date with school work. Some schoolrooms provide Skype too.

When will my friend get better?

Your friend's recovery will depend on the kind of cancer they have, how serious it is, the treatment they need and how they react to it. Everyone is different, and your friend will react to cancer and treatment in their own individual way.

Even if they get better from the actual cancer quite quickly, it may take a while before they get back to their usual self.



Why does my friend look different?

If your friend has lost or put on weight, or lost their hair, this isn't because of the cancer – it's because of the treatment.

Chemotherapy and radiotherapy kill more than just the cancer cells. They also destroy other fast-growing cells, such as their hair cells. This is why your friend's hair may fall out. Once treatment is finished, hair usually grows back.

Some treatments can also affect a child or young person's weight. Their nurses and doctors will be helping them to manage this.

You may have noticed that your friend simply looks more tired or pale than usual. Cancer treatment can be tough. Just being there to listen and offer support can help your friend through this time.

There's a thin tube going into my friend's body – what's it for?

Your friend may need to take lots of different medicines, and to have blood tests taken. If this is the case, the doctor may have given them a 'central line', which is a small tube inserted into their chest with the end just outside the skin. The line is used to give treatment through, and for taking blood tests.

Having a line isn't painful, though it means your friend needs to be careful. They may not be able to go swimming or do contact sports like football and rugby.



My friend has a tube going up their nose – what's it for?

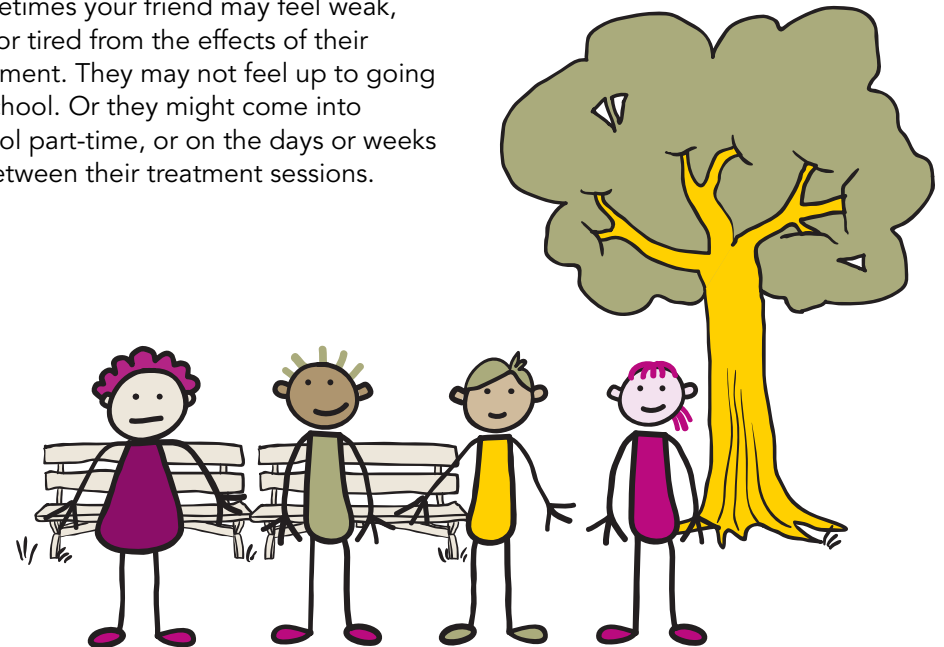
If your friend's cancer or treatment is making it difficult for them to eat or drink, they may have a NG (nasogastric) tube so they can have liquid food. Liquid medicines can also be given through the tube.

Why don't I see my friend as often?

Sometimes your friend may feel weak, sick or tired from the effects of their treatment. They may not feel up to going to school. Or they might come into school part-time, or on the days or weeks in-between their treatment sessions.

Children and young people with cancer tell us that going to school is very important as it helps keep things feeling normal.

Sometimes your friend might not want to have visitors at home or in hospital. This might be because they are tired or feeling poorly. You might like to show them you're thinking of them by sending them a card, text or email. Young people often tell us that hearing from friends really helps.



Why is my friend eating so much?

If your friend is taking steroids, a type of medicine used to treat some cancers, they may feel hungrier than usual. They may sometimes need snacks in class, or at other times, to fill them up.



What can I do to help my friend?

There's a lot you can do to support your friend during their illness. You can learn about your friend's cancer, keep in touch during their treatment, and listen when they want to talk. This will help you understand what they are going through – and how you can help them.

However, don't feel like you have to talk about their illness all the time. Your friend is still the same person they were before, and some days they may not want to think about it and get on with the things you both like doing best.

DO YOU HAVE MORE QUESTIONS, OR NEED SOME HELP?

There are lots of booklets and leaflets that can help you understand more about childhood cancer. Your parent or carer can order these for free from clicsargent.org.uk or look at our online information.

If you are worried about your friend, please speak to your parents, or a trusted adult so they can help you.

About CLIC Sargent

CLIC Sargent is the UK's leading cancer charity for children and young people, and their families. We provide clinical, practical and emotional support to help children and young people cope with cancer and get the most out of life.

clicsargent.org.uk

Please note that everyone's experience is different and may not follow the order outlined in this resource, and that services will differ across the UK.

We endeavour to ensure that the information provided is accurate and up-to-date at time of printing. CLIC Sargent cannot accept liability for any loss or damage resulting from any inaccuracy or omission in this.

Published: November 2017
Next planned review: 2020

For information about the sources used to put this resource together, or if or you have any comments or questions about it, please email info@clicsargent.org.uk or call 0300 330 0803

 Health & care
information
you can trust

The Information Standard

 Certified
Member

THE BACKGROUND TO THIS PACK

In 2012 and 2013, CLIC Sargent carried out research into the impact of cancer on children and young people's education. The findings were published in two reports: *No child with cancer left out* which looked at primary school aged children (December 2012) and *No teenager with cancer left out* which looked at secondary school aged children (July 2013).

The Cancer and school life pack and videos were developed to help meet some of the needs identified through the research.

Key findings of our research

***No child with cancer left out* – the impact of cancer on children's primary school education:**

- Just over half (56%) of parents of children who had returned to school felt that their child had received sufficient support to enable them to resume as normal an education as possible
- More than one in three (35%) parents said their child had experienced bullying or teasing from their peers because of their cancer diagnosis and treatment
- Almost half (47%) of parents said that their child had grown apart from friends because of their cancer diagnosis and treatment
- Almost half (47%) of parents said their child's school did not help to maintain contact with peers and friends during their absence from school.

Overall, our research demonstrated that cancer can significantly disrupt a child's education – nine in 10 (90%) children told us that their cancer diagnosis and treatment made a difference to their school life. Our findings showed that improving communication between education professionals, a pupil with cancer and their family can considerably lessen the impact of cancer on a child's primary school education. Good communication, for example, can enable a child with cancer to keep in touch with classmates when they are absent from school, allow for a smoother transition when they return to school and help parents feel empowered and informed.

Raising awareness, and building knowledge and understanding of the impact of cancer on a child, can help teachers and other pupils to better understand and support a classmate with cancer during and after cancer treatment.

THE BACKGROUND TO THIS PACK

No teenager with cancer left out – the impact of cancer on young people’s secondary school education:

- Communication between a young person with cancer, their family and school is important and should start as soon as they are well enough to learn
- Tailored support when a young person first returns to school following a period of illness can make a real difference to their future education and development
- Young people with cancer fear they may have to retake the academic year and will be left behind.

Our research showed that cancer can significantly disrupt a young person’s secondary schooling – a crucial time in their education.

It highlighted issues young people face in secondary school, including the impact of the physical environment, the importance of effective communication between teachers and the fear of being left behind.

Young people also told us about the value of effective communication with their school from the start of their illness, and that tailored support when they first return to school can make a real difference to their future education and development.

We learnt that there is stigma around retaking an academic year and that young people fear that this could mean they would be left behind by friends and peers. They need more support to help them reintegrate into school life and reach their potential.

Both reports can be downloaded from clicsargent.org.uk/policy

You’ll also find other research that CLIC Sargent undertakes to help influence and inform decision and policy makers.



USEFUL RESOURCES

For parents/carers, children and young people

Below are details of some resources which can help pupils understand more about childhood cancer and its treatment. You may wish to use these with your class, or suggest that parents/carers use them at home.

Joe has leukaemia

Lucy has a tumour

Mary has a brain tumour

Tom has lymphoma

CLIC Sargent

These storybooks are designed to be read with young children to help them understand what cancer is and the treatment it involves. You may find the words and phrases helpful when explaining cancer to pupils.

Chemotherapy, cakes and cancer

CLIC Sargent

An A-Z guide to living with childhood cancer, written by Megan Blunt when she was 14 years old, after she had been diagnosed with bone cancer. The guide covers hospital life and a range of medical terms.

Answering questions about your friend's illness

CLIC Sargent

This information sheet is designed to answer some of the most common questions children have when their friend has cancer, covering what cancer is, changes in appearance and behaviour, and what they can do to help. A copy is included in this pack and can be photocopied as necessary.

I have a friend who has cancer

Children's Cancer and Leukaemia Group

This card, designed for children aged 11 and over, outlines some tips for classmates on how to support a child with cancer at school.

Download and order from cclg.org.uk

Animations explaining brain tumours

The Brain Tumour Charity

These online animations explore and explain a variety of subjects relating to brain tumours and treatment. The animations are designed for children, but may be informative for people of all ages.

Watch online at thebraintumourcharity.org

We have a variety of booklets for parents and children that you can order free of charge, plus loads of useful online information. Visit publications.clicsargent.org.uk to order your free booklets and resources.

USEFUL RESOURCES

For teachers and schools

The following resources are aimed at schools and provide information and strategies for supporting a child with cancer, their family, and the school community.

Back to school film:

Supporting a pupil with cancer at your school CLIC Sargent

This film shows the experiences of young people and school staff, following a pupil's return to school after a cancer diagnosis. It covers the emotional impact of returning to education after diagnosis and treatment, and how staff can help pupils reintegrate into school life.

Available from clicsargent.org.uk

Help and support: for teachers

CLIC Sargent

This section of our website is designed to guide you through a pupil's diagnosis and treatment, and how to support them when they're in and out of school. It explains what steps your school needs to take to minimise disruption and provide maximum support for everyone involved. Details of further resources and guidance for schools can also be found here.

Visit clicsargent.org.uk/forteachers

Welcome back

Children's Cancer and Leukaemia Group

Welcome back is a guide for teachers and school staff to help children and young people returning to school after a cancer diagnosis. It gives a useful overview on a variety of issues to ensure the child or young person receives a smooth transition back to school life.

Available to download or order at
cclg.org.uk