## The Impact of Childhood Cancer on Young Adult Survivors: A Life Course Perspective

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Abstract : Background: Existing cancer survivorship literature explores varying physical, psychosocial, and psychological late effects experienced by survivors of childhood cancer. However, adolescent and young adult (AYA) survivors of childhood cancer are understudied compared to their adult and pediatric cancer counterparts. Furthermore, existing quality of life (QoL) research fails to account for how cancer survivorship affects survivors across the lifespan. Given that prior research suggests positive cognitive appraisals of adverse events - such as cancer - mitigate detrimental psychosocial symptomologies later in life; it is crucial to understand cancer's impacts on AYA survivors of childhood malignancies across the life course in order to best support these individuals and prevent maladaptive psychosocial outcomes. Methods: This qualitative study adopted the lifecourse perspective to investigate the experiences of AYA survivors of childhood malignancies. Eligible patients included AYA 21-30 years old who were diagnosed with cancer <18 years old and off active treatment for >2 years. Participants were recruited through social media posts. Study fulfillment included taking part in one semi-structured video interview to explore areas of survivorship previously identified as being specific to AYA survivors. Interviews were transcribed, coded, and analyzed in accordance with narrative analysis and life-course theory. This study was approved by the Boston College Institutional Review Board. Results: Of 28 individuals who met inclusion criteria and expressed interest in the study, nineteen participants (12 women, 7 men, mean age 25.4 years old) completed the study. Life course theory analysis revealed that events relating to childhood cancer are interconnected throughout the life course rather than isolated events. This "trail of survivorship" includes age at diagnosis, transitioning to life after cancer, and relationships with other childhood survivors. Despite variability in objective characteristics surrounding these events, participants recalled positive experiences regarding at least one checkpoint, ultimately finding positive meaning from their cancer experience. Conclusions: These findings suggest that favorable subjective experiences at these checkpoints are critical in fostering positive conceptions of childhood malignancy for AYA survivors of childhood cancer. Ultimately, healthcare professionals and communities may use these findings to guide support resources and interventions for childhood cancer patients and AYA survivors, therein minimizing detrimental psychosocial effects and maximizing resiliency.

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