When a student has cancer

The news of a student’s diagnosis may come as a shock to many people in your school community. The school can play a key role in supporting the student, their family and other students at this time. It is important to maintain connections throughout the student’s treatment and to prepare for their return to school.
When a student is diagnosed

It is difficult for a family to receive the upsetting news of their child’s life-threatening illness. They often describe the days and weeks after diagnosis as a whirlwind. Family members not only have to come to grips with the diagnosis, but they also have to make decisions about their child’s treatment and inform their extended family network.

While the family is coming to terms with the diagnosis, they may not tell the school about it. Teachers or peers may notice a student’s absence or speculate about any changes in the student’s behaviour. Many families find that once the treatment has started and they have adjusted to the overwhelming situation, they feel more comfortable sharing information with the school.

Try to minimise rumours if you suspect (or have confirmed in confidence) that the student has cancer. Once the family has told you about the cancer diagnosis, you can take a number of steps to ensure the student is well supported by the school community.

Take the lead – Offer your support to the family. Explain that a school liaison person can be appointed so they only have to communicate with one person (see pages 13–14).

Ask who can be told – Establish if and how the family would like information about the student’s diagnosis and treatment to be shared with teachers and the rest of the school community. You might suggest confidentially informing a small team (e.g. the year adviser, principal, vice principal, school counsellor and class teacher), who will respect the family’s privacy while coordinating care and support for the student and any siblings at the school. It may also be helpful to develop a plan in case students learn about a classmate’s diagnosis from the student or from social media, and need support in managing their reaction.

Respect their wishes – Allow the family time to decide what role they would like the school to play. If they want to keep the diagnosis private, staff should comply with their decision (unless there are overriding health and safety issues). If at some stage you feel that it would be in the student’s interest to share the diagnosis, discuss your concerns with the family – you may want to contact the student wellbeing coordinator for advice on how to approach this conversation.

Arrange a meeting – Organise a meeting or conference call between the family and key staff such as the principal, the class teacher or year adviser, and the school counsellor. Consider meeting once per term to follow up on the student’s changing needs.

Legal obligations

Under the Australian Disability Discrimination Act 1992 and the Disability Standards for Education 2005, schools have responsibilities to support the ongoing education of students with cancer.

They are obliged to:

- consult so that they understand the student’s needs
- make reasonable adjustments where necessary
- implement strategies to prevent harassment and victimisation.

The Disability Standards for Education: A Practical Guide for Individuals, Families and Communities website (resource.dse.thedducationinstitute.edu.au) provides general information about how schools can work with students and their families to support them.
Making the calls

As soon as my son Leo was diagnosed, I called my children’s schools and spoke to the principals. At that point, I was still waiting for the doctor to come in and tell me he had made a big mistake. I wasn’t ready to go into a lot of detail with the schools but I wanted them to know. Their initial response was it will be okay, we will be here to help you.

As time progressed, I called them all again. The main thing I wanted was for them to be kind to my kids, and they were. Everyone just wanted to know how to help and we had a really positive experience with all the schools — maybe because we were open to help.

Genevieve, mother of primary student with cancer

Work out the time frame – Consider how long the student may be away from school and how long their treatment may last. Some students with cancer are in and out of hospital for months, or even years. These students will need support throughout this time, which may involve a change of grade and teacher. Your school may be able to provide a form for the doctor to complete or ask for a letter from the doctor to explain prolonged absences or sporadic attendance. Many schools prepare an individual health care plan (or student health support plan) to outline how the school can support the student’s specific health care needs (see pages 30–33).

Get professional help – Offer to link the student and family with school counselling services. With a parent’s permission, staff from the hospital may be able to visit the school to discuss the student’s diagnosis and treatment with staff and classmates.

Contact Cancer Council – Call 13 11 20 for further information on cancer, treatment and support services, or visit your local Cancer Council website.

Setting up a communication channel

Talking openly about the cancer diagnosis helps the school community adjust to the news, and understand what support the student needs. Ask the family what the student knows about the cancer and how the student has responded. Some families limit the information the child has about the cancer, especially if the child is young.

Schools have various ways of disseminating information to their community (e.g. newsletters, emails, websites, apps). Let the student and their family guide you about who in the school community needs to know and how much they can be told. The family, school staff members and the key liaison person can discuss the family’s wishes and school policies for sharing information.

Different families may need different communication styles. For example, some may want you, or one of your colleagues, to talk to their child’s classmates about cancer. Others may ask a clinical nurse consultant from the hospital to visit. Some may want the school to send a general letter to parents about cancer without mentioning the child’s name. The school’s parent association, such as the Parents and Citizens (P&C) or Parents and Friends (P&F), may be able to help the school communicate with families.

Be mindful of the student’s close friends, as they may be deeply affected by the news. It can be very reassuring for the student if their friends find ways to show their support.
Supporting a student during treatment

Keeping in touch

School represents normal life to most students. Going to school is more than just education – it establishes a routine and provides an opportunity to socialise. A diagnosis of cancer is a major disruption for the student and leads to frequent absences from school.

Every situation is different. Not all families will want to maintain close contact with the school community, and a young child may not be able to respond to messages, depending on their age and symptoms. However, many students receiving treatment for cancer do want to maintain contact with classmates. Young people with cancer find it easier to return to school if friendships have been maintained throughout their absence. Regular communication can provide reassurance that they’ve not been forgotten by their friends and help to keep them engaged with their education.

The school community can keep in touch with a student in the hospital or at home by using technology such as Skype, email and the school intranet. Educational social networking portals such as Edmodo can allow you to communicate with the student and the hospital school about their schoolwork. Videoconferencing tools (such as Skype, WebEx, Google Hangouts or Adobe Connect) can also allow the student to participate in classroom lessons.

Supporting families

When a child or adolescent is diagnosed with cancer, the family may experience emotional and financial strain, which can cause anxiety. One parent may have to take time off work so they can be with the child in hospital, while siblings are often left with just one parent at home. The changing family dynamics and stress can lead to relationship issues. In single-parent or separated families, the pressures can be even greater.

Families in regional schools face extra complications. The major centres for cancer treatment are usually in large cities, away from the family’s main support network. Often the student must travel great distances and stay away from home and school for long periods. One parent usually has to travel with the child, while the other parent stays home for work and to care for siblings.

School staff can link the family to school counselling services and offer support to any siblings who also attend the school (see pages 44–45). If your school has fees, the principal could consider how these can be adjusted to ease the family’s financial burden. Fellow school parents often play a key role in coordinating support when a child has cancer, particularly if there isn’t any extended family to help. With the family’s permission, they may organise a

How to maintain contact

• Send postcards, letters, drawings or paintings.
• Make an audio or video recording of a school event, or of personal messages.
• Post a package of photos or small gifts.
• Email notes or photos.
• Consider age-appropriate programs such as Monkey in My Chair (see page 25).
• Create a website or blog about what is happening at school.
• Use social networking or videoconferencing such as Skype, FaceTime or Google Drive.
• Organise visits to the hospital by classmates, if approved by the student’s parents. The student may have reduced immunity, so reschedule the visit if anyone has a cold, cough or other viral or infectious illness.
roster for meals, childminding or transport (such as taking siblings to school, sport or other activities), or set up a fundraising website. A group of parents may organise this help among themselves, or it could be coordinated by the school’s parent association, such as the P&C or P&F.

**Helping with schoolwork**

It is natural for a parent to feel anxious about how the student is going to keep up with their schoolwork. Students may also worry about falling behind, particularly if that might mean being separated from their peer group when they do return to school. Talk to the student and the parents about their expectations, and how you can help maintain some form of ongoing learning. An Individual Education Plan (or Individual Learning Plan) can provide some direction and guidance to ensure the student doesn’t fall behind.

Any school-aged student who has an extended hospital stay will be enrolled in a hospital school or hospital education service that caters for all school-aged students. A hospital school aims to provide continuity of education to make the return to school as easy as possible and to boost a young person’s spirits and self-esteem. To do this, the hospital school may contact the student’s regular school to discuss the educational program. This helps ensure that the learning taking place in hospital is aligned with their regular schoolwork. Students attend a classroom or, if necessary, are visited on their ward by a teacher. Some hospitals may provide other services to assist with learning needs, such as play, music or art therapy.

---

**Mailbox**

All my teachers and friends were in contact via email, so I was never out of touch with the group. They also sent me lots of cards and letters. Being given 25 letters at once was very overwhelming and made me feel very happy. People in my year also organised large cards, which they got more than 300 people to write on. They kept me entertained for hours!

Jeremy, secondary student with cancer

---

**My parents encouraged me to give up Year 11 and do it next year, but I didn’t want to be left behind.**

Jeremy, secondary student with cancer

More children and adolescents are now receiving treatment as outpatients. This can make it difficult for them to visit the hospital school, but they may not be well enough to attend their regular school. If you know the student is spending long periods of time at home, liaise with the family and the hospital school to ensure they have educational support and peer contact. The class teacher can also work with the student and family to set up a work program they can complete at home, including opportunities for the student to connect with their class.

If the student transitions to high school or another new school, staff may share information about the student’s learning needs so that the appropriate plans can be put in place.
Redkite
Redkite is a national charity that supports children and young people with cancer, and the people who care for them. They offer:
- financial assistance to help young people aged up to 24 years achieve their work and study goals, and to help young people whose education has been disrupted by a sibling’s cancer treatment
- coaching assistance to help 15–24 year olds diagnosed with cancer at any age get back on track with work, study or training
- free information, support and counselling, for young people diagnosed with cancer, their families and support networks. This includes teachers and other education staff who would like advice on supporting a student.

You can help by making parents aware of Redkite’s support services or by referring a student yourself. For more details, call 1800 REDKITE (1800 733 548), email support@redkite.org.au or visit redkite.org.au.

Ronald McDonald Learning Program
Provided by Ronald McDonald House Charities Australia, the Learning Program helps seriously ill children and adolescents, as well as the parents and professionals who support them. The program includes various services:
- individual tuition helps students catch up on their missed schooling
- Education Liaison Coordinators support the ongoing education of students at all children’s hospitals in Australia
- EDMed, a free accredited professional development unit for teachers, helps schools meet the educational needs of children with cancer.

To find out more, visit rmhc.org.au/our-programs/learning-program, call 1300 307 642 or email rmhc@rmhc.org.au.

Hospital-based programs
Some hospitals have specialised programs to prepare students for the return to regular school. These programs liaise and collaborate with families, schools, hospital schools and oncology units to keep the child connected to their learning, their peers and their school community. Talk to your student’s hospital about the educational services and programs they provide.

Monkey in My Chair
This charity supports younger children while they are absent from school by providing a large toy monkey to sit in the absent child’s chair. The absent child also has a monkey. The class includes the monkey in all normal class activities and excursions, and photos are sent between children. For more information, visit monkeyinmychair.org.

Ways to support an absent student
- Provide the hospital school with curriculum outlines and a list of textbooks.
- Send copies of worksheets and projects to the student at home or at the hospital school.
- When the student returns schoolwork, acknowledge their efforts and provide them with feedback.
- Make sure the student receives school newsletters and handouts.
- Let the hospital school know if the student needs an extension or remediation program.
- Facilitate online access to assignments or websites with information about school activities.
- Find creative ways (such as Skype or video calls from class) to link the student with the school, especially if they are away from home or in isolation.
- Understand that the student may be so unwell during their treatment that they may not be able to continue with their schoolwork.
Supporting the student’s classmates

If you are telling students about a classmate’s cancer, parents need to be aware that their children may come home upset, worried or with questions. The principal can send an email or a note home to prepare the parents.

You can expect a range of responses from students to the news. It’s important to remember that everyone reacts differently to a stressful situation, and age and personality will influence this. Some students may be visibly upset. Others could be angry, confused or annoyed. Some may have no outward reaction to the news, which doesn't necessarily mean they’re not listening or that they don’t care. Others may look to help in any way that they can.

Give the students opportunities to share how they’re feeling or ask questions. They might ask some difficult or sensitive questions, such as if they can “catch” cancer or if their classmate will die. Think about how you will respond to these questions ahead of time and approach the class in a sensitive manner (see Cancer Council’s Talking to kids about cancer book for some suggestions).

In some cases, a member of the patient’s treatment team (such as the clinical nurse consultant), a local community nurse or an organisation like CanTeen may visit the school to explain what is happening to their classmate, and how the student will look and feel when they return. Geographically isolated schools may be able to access support over the phone or internet.

Refer to pages 16–19 for strategies on how to talk to students of different ages. To prepare for potential questions about death, see How young people understand death on page 59.

Try to establish beforehand if some students are more likely to be upset because of their friendship with a classmate with cancer. If a student becomes very distressed, they may need to speak with a counsellor or teacher with whom they feel comfortable. Contact the parents to let them know about their child’s distress.

Regularly inform classmates about the student’s progress. This will help to keep the class connected and prepare them for the student’s return. Events such as fundraising for cancer charities may help channel the thoughts and energies of older classmates.

Siblings of students with cancer may need particular support because of the disruption they experience. They may sometimes feel forgotten, or believe they are responsible for what is going on. For more information and ways to help, see pages 40–47.

Common questions from classmates

- How did they get sick?
- Can I catch it?
- If you can’t catch it, how do you get cancer?
- How many people get cancer?
- Will they miss school?
- What am I supposed to say or do?
- How can I be a friend to someone with cancer?
- Should I share things that are bothering me? They seem silly or trivial compared to what my friend is going through.
- Can people die from cancer?
Supporting a student after treatment

Returning to school

Getting back into a school routine is important to children and adolescents. It maintains continuity in their education and their friendships, and it reinforces the idea that life will go on and they have a future. It can be daunting for the student to return to school, however, and it is important to consider what support they will need. With the family’s permission, a clinical nurse consultant or the oncology social worker may be able to visit the school to talk to staff about how the school can best support the student’s return.

Encourage the student to return as soon as they feel up to it – Being accommodating and flexible to the student’s needs will help the student become involved as much as possible in day-to-day lessons and school activities, rather than avoiding school. Ideally, the school will help the student by facilitating partial attendance (such as half-days) at first and reducing or modifying work, such as assessment tasks. Keep in mind that ongoing medical treatment and follow-ups may continue to affect school attendance. The family’s medical team can provide documentation to support this, if required. It will be easier for the student to adjust to being back at school full-time if many short visits or half-days are kept up during active treatment. On some days, the student may just visit school at lunchtime so they can socialise with friends.

Plan for the individual needs of the student – Preparing for the student’s return is essential so that any adjustments, such as modified grading procedures, can be put in place. This relies on communication between the school and the student, their family and the treatment team. The school liaison person can coordinate communication with teachers, the school counsellor and other staff.

Ask the family whether any speech, occupational or cognitive assessments were completed during treatment and, if so, whether copies of the reports can be given to the school. If not, a school counsellor can conduct an educational assessment of the student and provide recommendations on how to meet the student’s individual needs. This may include further referrals, such as for occupational or speech therapy. Students may also need practical changes to accommodate their physical needs (see pages 30–31). It is important to treat the student as normally as possible, within the limits set by their condition.

“Coming back to school after treatment takes a lot of bravery. You have been through such a traumatic experience and you look so different.”

Genevieve, mother of primary student with cancer

Return to school plans

A return to school plan can help with the student’s reintegration into school. It is prepared by the school with involvement from the student, their family and the health care team.

The plan can outline agreed expectations about attendance and schoolwork, any additional support the student requires, and what the school can do to support the student.

A return to school plan can be incorporated into the Individual Education Plan (IEP) or Individual Learning Plan (ILP) (see page 32). It is likely the student will also need practical support (see pages 30–31).
Anticipate anxieties about returning to school – Returning to school can be daunting for both the student and parent after a prolonged absence, especially if the student has had to be held back a year and is entering a different peer group. The school counsellor or another appropriate member of staff can arrange a meeting with the student and parents to discuss their concerns about returning to school and how the school can help. Reassure the student that while things will probably feel different for a while, they will be supported to settle back into school (see pages 29–30). Identify people they can go to if they have a problem or feel lonely, especially during lunchtimes. Discuss with the student which trusted staff member they would like assigned. Add a peer buddy if your school is equipped to provide them with appropriate support.

It is natural for parents to have a wide range of feelings about their child returning to school. Some may be overprotective or stressed about the transition, while others may be relieved or pleased. If you have difficulty managing a parent’s reaction, talk to the student wellbeing coordinator or a school counsellor about how to handle the situation. With the parents’ permission, you could also contact the clinical nurse consultant from their treatment team for guidance. Sometimes parents need reassurance that their child’s physical and emotional needs will be supported (see pages 30–33).

Building resilience

Resilience allows children to cope with adversity – to bounce back. Although living with cancer can be undeniably difficult, in most cases young people can demonstrate maturity and wisdom beyond their age.

To help all students build resilience, teachers can:
• create a supportive environment
• value all contributions from students
• set clear expectations and rules
• encourage students to accept responsibility
• praise sustained effort and perseverance
• prompt students to think and act independently
• model and teach empathy and caring
• teach students how to resolve conflict.

For primary school students, visit kidsmatter.edu.au to find out more about promoting resilience and for resources you can use in class. You can also ask your local education authority if they have any resources.

For secondary students, the ReachOut Schools portal at schools.au.reachout.com has a Building Resiliency in Young People resource, which includes lesson plans. Or visit mindmatters.edu.au for online modules to help secondary schools promote a positive environment and build resilience.
The returning student’s concerns

When students have had a lot of time off school for cancer treatment, their worries may include social, academic, psychological and physical issues. Some common concerns are listed below, along with ways that school staff may be able to provide support. Use this list to start a conversation with your student about their particular concerns and take your lead from them.

**Being the centre of attention** – Students may worry about being stared at or being bombarded with questions about their absence or appearance. With the student and family’s permission, communicating with the school community (see page 22) before the student’s return can encourage sensitive reactions from peers. Preparing the student with simple responses to typical questions can also help.

**Keeping up with schoolwork** – Reassure the student that their being back at school is what’s important and that it will take time to catch up. Provide additional support through your school’s student wellbeing team, learning and support team or liaison person, or arrange a study buddy (peer support), tutoring or special assistance. Consider modifying grading procedures and assessments if appropriate.

**Being left out or rejected** – Let the student know that their classmates did miss their company, and explain that their peers may be shy initially, but will eventually be more welcoming. Prepare classmates for the student’s return before they arrive. Remind peers of the returning student’s right to privacy and about the dangers of comments on social media.

**Being bullied or teased** – Your school will already have policies to deal with bullying, discrimination and harassment. Closely monitor the reactions of other students – some peers can resent what they see as special treatment, but educating students about cancer in age-appropriate ways can help (see pages 34–35). It is also important to remind them about social media etiquette. Equip the student with cancer with strategies to respond to bullying behaviour.

**Fitting in with other classmates** – A student who looks different (because of weight gain or loss, hair loss or a physical disability, for example) might worry about their friends’ reactions. Talk with classmates honestly to help them understand the situation. Some students with hair loss may wear a head covering (cap or scarf) while their hair is regrowing. Others may have to adapt the school uniform. Ensure school staff know about any adaptations to avoid unnecessary embarrassment. If the student has to change clothes for school activities, you might be able to provide a separate changing area to give them extra privacy, especially if they are concerned about their peers’ reactions.

---

**Everyone stared**

When I went back to school after chemotherapy, I had lost so much weight and was so weak that I had to use a wheelchair. I felt awkward and really nervous. Everyone looked really shocked. People stared a lot, especially the younger students. I hated it. I can’t blame them because it’s not every day you see someone looking so different and they were probably trying to understand what was going on. I kind of got used to it, but I still didn’t like it.

Ruby, secondary student with cancer
Feeling that their classmates are immature – After the experience of having cancer, many older students feel they have less in common with their peers. The latest celebrity gossip or music news can seem unimportant. This can affect the student’s ability to fit in and socialise. Try helping the student to find new interests to share with peers. Remember that while the returning student may seem to be older in some ways, they are still very young.

Getting sick again – After treatment has finished, it is common for a student and their family to be concerned about the disease returning (cancer recurrence). This concern can arise each time they have a check-up and may last for years. For some students, the treatment leaves them with a compromised immune system and they are highly susceptible to infections. Reinforce your school’s standard infection control measures and encourage general hygiene, such as handwashing, throughout the school. You could also consider including handwashing as part of the curriculum for younger year levels.

The principal can send a letter or email to all families emphasising the importance of not sending children with infectious diseases to school and asking parents to inform the school of any cases of measles or chickenpox as soon as possible so that the parents of the child with cancer can be alerted. The letter can explain that one of your students has lowered immunity after cancer treatment but need not mention the student by name.

Making practical changes
A student with cancer will usually need some practical support related to their health care and psychological wellbeing. A written management plan prepared by the principal with the input of the student, their parents and their health care team helps to avoid misunderstandings. This individual health care plan (or student health support plan) should consider the student’s full range of learning and support needs, including treatment effects, care needs, and emergency signs and procedures. Many young people prefer not to draw attention to themselves. Talk to the student about ways they can discreetly signal their need for a break or physical assistance (e.g. by placing a white time-out card on the desk or using a hand signal).

Outside School Hours Care (OSHC)
A student with cancer may start attending before and after school care once they are well enough, particularly if both parents have returned to work. The opportunity for social interaction can be especially valuable. OSHC staff supporting a student with cancer can refer to the advice in this chapter. They may also have a special role to play in supporting a student whose sibling or parent has cancer (see pages 40–47). The parents are likely to be preoccupied with the treatment and, in some cases, it may be the first time the student has used the OSHC service.

“ When I first went back to school, my friends were happy to help me, but once they thought I was better, they sort of drifted away. But you need help for longer than you look like you need help.”

Ruby, secondary student with cancer
**Accessibility** – Fatigue is a common side effect of cancer treatment, so when a student first returns to school, they may find it easier to manage if their classes are moved to easily accessible rooms. For secondary students, allow a window of time for movement between classes so they can avoid crowds.

In some cases, the cancer or its treatment can cause a physical disability. For example, a student may have had an amputation, they may need to use a wheelchair or they may have vision loss. School buildings may already be modified to ensure access for other students with physical disabilities, but you may need to provide permission to use more accessible toilets, access to a lift, or classrooms on the ground floor. The school may also need to organise an accessibility assessment of the school grounds.

If the student is weak and needs assistance with carrying books or pushing their wheelchair, the student’s individual health care plan (or student health support plan) should set out how this will be managed. If the student has reduced or impaired fine motor function, an occupational therapist may need to recommend ways the student can be supported in their writing activities.

**Sensitivity to sunlight** – Students receiving cancer treatment can be very prone to sunburn. To limit sun exposure, encourage the usual SunSmart guidelines of using sunscreen, wearing hats and ensuring access to shaded areas (for more information, call 13 11 20 or visit your local Cancer Council website). On hot days, encourage indoor activities, but do so without isolating the student – for example, the student could go to the library with a few classmates.

**Central venous access device** – Some students will have a central venous access device (CVAD), which is a tube inserted into a vein in the neck, groin, chest or arm. It may be called a port, port-a-cath, central venous catheter, Hickman line, PICC line or central line. It allows medical staff to administer chemotherapy and other drugs, fluid or blood transfusions, or to draw blood.

All school staff, including those in charge of sports and sick bay, need to be aware of precautions and care while a student has a CVAD. Contact sports can cause the device to break or loosen, and some types should not be submerged in water because of the risk of infection. Ask the student’s parents what precautions the medical team have recommended, and discuss how the student can still participate in school sports, such as by recording results.

To minimise panic and any negative effects on the child or other students, the student’s individual health care plan (or student health support plan) should set out what action to take if there is a problem with the CVAD, e.g. a cap falls off, the line comes out or the site starts to bleed (see also box at right).
Understanding learning impacts

A student returning to school may have to manage the effects of cancer treatment on their academic performance. Parents of students with cancer have reported significant effects on writing, mathematics, handwriting, confidence, exam performance, memory, concentration and physical education. Some of these impacts may be delayed, appearing months or even years after treatment has ended.

It is important to recognise that cancer treatment can change the way the student learns and that the student may need extra educational support throughout all the years of their schooling. In particular, some students develop long-term difficulties with executive functioning. This affects the ability to plan, organise, form abstract concepts, practise self-regulation and initiate action. The student may have trouble taking notes or copying information, remembering things, concentrating, getting started on activities, or completing tasks on time. In some cases, the student’s struggle to manage these challenges can lead to a lack of engagement with education or disruptive behaviour in the classroom.

In many school systems, specialist learning support staff help classroom teachers to address the additional educational needs of students. They may be part of a learning and support team (sometimes known as the program support group). This team is made up of all those involved in the student’s education, including parents, the principal or other school leader, the class teacher and the school. In some cases, the team may decide to create a formal plan, which may be known as an Individual Education Plan (IEP) or Individual Learning Plan (ILP).
Parents or guardians have an important role to play in discussing and planning for their child’s needs. You can refer them to *Learning curve: education and socialisation after childhood cancer*, a series of booklets for different ages produced by the Victorian Paediatric Integrated Cancer Service (pics.org.au/families/survivorship).

Your school will need to work together with the parents and student to develop realistic expectations about what can be achieved academically.

**Adjustments to support learning**

In addition to any adjustments to accommodate physical needs (see *Making practical changes*, pages 30–31), schools may need to make temporary or permanent adjustments to manage the returning student’s changes in academic performance and behaviour. These adjustments can be listed in the student’s IEP, ILP or return to school plan, and may include:

- seating them towards the front of the class
- organising an in-class buddy or teacher assistant to help with note taking or recording assignment due dates
- providing catch-up work in different key learning areas
- offering extra tutoring
- adapting work so the student can manage the load
- discreetly allowing extra time for homework and assessment tasks, and increasing time limits in tests or exams
- providing a model or scaffold that shows the steps in a task
- giving verbal prompts and written reminders
- helping the student organise thoughts using graphic organisers and mind maps
- allowing the student to work without interruption as much as possible
- revising the number or types of subjects taken by the student
- encouraging rest breaks in class to help the student focus and manage fatigue.

Students may also need special consideration for physical education classes. This will be obvious if the student’s treatment has involved a visible change such as an amputation, but also needs to be considered when the student is managing fatigue from chemotherapy or radiation therapy.

“Since his treatment, he’s had some difficulty remembering numbers like times tables. He’s having tutoring now and he’s got a few tricks that the tutor has taught him.”

*Rebecca, mother of secondary student with cancer*
Helping young people understand cancer
Giving students factual information about cancer increases their understanding and reduces the risk of gossiping and bullying (see Dealing with teasing and bullying box, opposite page). Most students want to be supportive, but need the tools and knowledge to do so effectively.

Before starting a discussion with your students, consider their age and maturity and anticipate any difficult questions they might ask (see margin box, page 26). You might practise what you will say, or ask the family how they would like you to approach the class.

Planning a lesson about cancer
In some cases, a lesson or class discussion about cancer can help students understand their classmate’s condition. Depending on the content, this may support the curriculum for health and physical education and/or for science – check with your local education authority (see pages 68–69).

There are a number of books about cancer (see margin box, opposite page) that you can share with your students. Staff from the student’s hospital school may be able to recommend other age-appropriate resources about cancer that you can use in class. With the permission of the student’s parents, you could also ask if a clinical nurse consultant or other member of the medical team can visit the school to talk to students and staff. Camp Quality offers a Primary School Education Program (see opposite page) and CanTeen runs When Cancer Comes Along, an education program for students in years 9 and 10 about cancer and its impacts (see canteen.org.au/schoolawareness).

Hosting a cancer awareness and education day
While it is important to integrate information about cancer into the core curriculum, your school may also consider hosting a cancer awareness and education day. Many awareness days include a fundraiser, such as buying ribbons or coming to school out of uniform in exchange for a gold coin donation (see page 70). However, your school does not have to collect funds.

Ask the person with cancer (or their family) if they are comfortable with the idea. While the information can be presented in a very general way, families may want to ensure certain details are kept private. Consider how best to inform all parents and students about the upcoming event.

The cancer awareness and education day could involve brief in-class discussions or lessons from teachers. Younger students could draw pictures or write stories. Older students may want to hang posters, make presentations about cancer, or set up a stall to distribute information.
Arranging a puppet show
For a cancer awareness day in a preschool or primary school, you may want to arrange a visit from the Camp Quality Primary School Education Program. This free program explains cancer to children through an interactive puppet show that addresses the challenges of living with cancer and the importance of friendship. It is a useful tool for introducing the topic of cancer in an age-appropriate way that provides the school community with a shared language for honest and open discussion.

If you are hoping to book a Camp Quality puppet show, plan well in advance. The puppets are very busy, but your State Coordinator will do their best to book you in as soon as possible. Camp Quality will provide you with a template letter so you can inform all parents of the planned visit.

Camp Quality also provides free resources that can be used in the classroom after the performance and may be useful when planning a lesson about cancer. For more details, call 1300 662 267 or visit campquality.org.au.

Dealing with teasing and bullying
A school climate that promotes respectful relationships is likely to support student wellbeing and discourage inappropriate behaviour, such as teasing and bullying.

Schools are legally obliged to develop and implement strategies to prevent harassment and victimisation of students, including those with cancer (see margin box, page 21). Schools also need to respond appropriately if an incident occurs. Consult your school’s anti-bullying or anti-harassment policy for general guidelines.

The best way to prevent bullying is to be as open as possible about a student’s cancer. Young people may have little understanding of what a student with cancer is going through and what treatment involves. This may make them feel frightened.

The more classmates know about cancer, the more likely they are to be supportive. Discuss the benefits of openness with the student and family and make sure you have their permission to share information about the student’s situation.

It’s important to be aware that some students may feel resentful when a student with cancer returns to class. They may believe their peer is receiving undue special treatment. You can explain that the student needs extra support related to their health but still has to follow the same school rules as everyone else. Try to maintain a normal classroom atmosphere.

For general information on creating a supportive school culture, you can explore the resources at studentwellbeinghub.edu.au.

Books about cancer
For younger children
Butterfly Kisses and Wishes on Wings
Ellen McVicker (author)
Nanci Hersh (illustrator)
butterflykissesbook.com

I Know Someone with Cancer series, 2014
bupa.co.uk/bupa-cancer-promise/i-know-someone-with-cancer

In the Rainbow
Tracey Newnham, 2018
intherainbow.com.au

Nowhere Hair
Sue Glader, 2010
Thousand Words Press, nowherehair.com

Safina and the Hat Tree
Cynthia Hartman
Nomota, 2004
talesforkids.com.au

When I had Leukaemia,
Delia Crabbe
Merivale Books, 2010

For older children and adolescents
Wait… Did you say ‘Cancer’? series
CanTeen, 2013
canteen.org.au/resource

The Fault in Our Stars*
John Green

The Honest Truth
Dan Gemeinhart
Scholastic Press, 2015

* Also a movie
Between friends

My daughter’s friends are very caring, and they’d all have a good cry together out of the blue.

I’d ask, “What’s going on?”, and they’d say, “No, it’s got nothing to do with you.” You know, certain things they just don’t tell you.

Sarah, mother of secondary student with cancer

Guiding classmates

It is not uncommon for the classmates of a student with cancer to feel helpless and unsure about what to do or say when they are with the student. Sometimes students will look to teachers or their parents for guidance on how to act, but at other times you might simply notice that the students are feeling uncomfortable. There are various ways that you can help the students to become more at ease, including:

Listening – Be prepared to listen to students’ concerns.

Facilitating discussion – Encourage students to talk about what cancer is, its treatments and possible side effects. This will help prepare students for any physical or emotional changes in their classmate. See Chapter 1 (pages 6–10) for more facts about cancer.

Answering questions – Discussing the facts openly helps reduce anxieties and uncertainties. If you don’t know the answer, offer to find out. Remind students of their classmate’s right to privacy and the potential impact of sharing information on social media. If you’re caught off guard by a question, consider responding with “That’s a really good question, what makes you ask that?” This will give you some insight into why the person is asking the question.

Being prepared – When a student has cancer, it’s a good bet most classmates are thinking, “Will they die?”, and a few will probably ask. Balancing the truth and family wishes can be a challenge. A gentle way to respond might be: “Cancer is a very serious illness and we are all worried about your classmate, but we know that the treatment team at the hospital is working hard to help them. If we learn of any developments, we will let the class know.”

Providing advice – Give students guidance on how to talk to a classmate with cancer. For some ideas, refer to the page opposite.

Encouraging emotional expression – Provide the opportunity for friends to debrief and express their feelings about cancer. For some students, activities such as painting, writing or composing music will help them work through their emotions.

Inviting an expert – You could ask a member of the student’s medical team, such as a clinical nurse consultant, to speak to the class (with the consent of all parents, including the parents of the student with cancer). This will help students gain a better understanding of what their classmate is experiencing.
Talking to a classmate with cancer

Like some adults, students sometimes worry about saying the wrong thing, so they may start to avoid a classmate who has cancer. Teachers can help by discussing the following tips with their students.

**Try to talk about day-to-day things**

Their classmate is probably tired of talking about cancer all the time. But the students also need to understand that their classmate might not be interested in trivial topics such as the latest celebrity gossip.

**Acknowledge the situation**

Students can say: “I don’t know what to say, but I want you to know I care”, “We missed you”, “It’s good to see you”, “How are you going?” or “Is there any way I can help in class?”

**Understand that their classmate might look different**

Their classmate may be self-conscious about any appearance changes caused by cancer treatment. They may want to talk about these changes or they may just want to fit back in. By following the lead of their classmate, students can work out whether it’s okay to talk about the changes.

**Understand that their classmate might act a little differently**

Their classmate may be more tired or less social than before. Students can show their support by being patient and accepting that it may take time to adjust.

**Take cues from their classmate with cancer**

People who have had cancer react in different ways. By observing how their classmate behaves, students might figure out how to respond.
Special provisions for exams

Exams in primary school

The National Assessment Program – Literacy and Numeracy (NAPLAN) involves annual tests for students in Years 3, 5, 7 and 9.

Students with cancer may be unwell at the time of the tests, or their cancer treatment may have temporary or permanent effects such as fatigue or learning difficulties. Parents may not be aware that their child can apply for special examination provisions, so the school should raise the issue with them. The student’s treatment centre can provide documentation to support a request for special provisions. For more information, school staff can visit nap.edu.au and search for “disability adjustments”, or contact their state or territory test administration authority (see pages 68–69).

Special provisions may also be available if the student is attempting placement tests for selective classes or schools. Contact your local education authority (see pages 68–69) if you know these tests are coming up.

Senior assessments

The senior assessments at the conclusion of secondary schooling are known by different names throughout Australia. In general, all students are required to meet the course requirements, but the relevant education board can adapt assessments to provide reasonable adjustments to the special needs of students with cancer.

The permitted provisions depend on the rules in your state or territory and on each student’s circumstances. For example, some students may be allowed rest breaks between exams or an extension of test time. Other students may need to have physical disabilities accommodated (e.g. by using a scribe, a reader or assistive technology). In particular cases, the student’s marks may be based on their scores throughout the school term/s, rather than the usual combination of in-school assessments and external exams.

If possible, it is preferred that students sit their exams, and then appeal for a different marking procedure. However, if you know a student might be eligible for special provisions for an upcoming exam, talk to the student and their parents about their options.

In most schools, applications for special provisions are made to the education board through the principal, school counsellor or learning support staff. There may be a cut-off date for applications and you may need to allow time to get supporting documentation from the student’s doctor or treatment team. If possible, it is best to apply well in advance, as applications may take

Extra time

The school’s special ed department organised someone to help me apply for special help for my senior exams. I was a slow writer and had problems writing essays within the time limits. They arranged for extra time for me, and a laptop, because I type faster than I write. I sat all the exams at the same time as the other students, but I was in an area with other kids with the same considerations. All those accommodations were fantastic.

Jeremy, secondary student with cancer
several weeks or months to process. For students who become suddenly ill around the time of the exams or who have a family member with cancer, illness or misadventure provisions may be available.

If a student is finding the demands of the senior years too great, they can explore the options for extending the time frame. For information about options available in your state or territory, talk to the senior year coordinator, guidance officer or school principal, or contact your local education authority (see pages 68–69).

Access to tertiary study
In some states and territories, access schemes can help a student enter tertiary study if they have experienced long-term educational disadvantage because of a cancer diagnosis or treatment. Depending on the location, these are known as Schools Recommendation Schemes (SRS), Educational Access Schemes (EAS) or Special Entry Access Schemes (SEAS). Each university applies its own access scheme calculation to the student's final score and determines if they will be admitted into their elected program of study.

Visit the website of the universities/tertiary admission centre in your state or territory (see pages 68–69) to find out more about applying for an access scheme. You can also contact the tertiary institutions directly for information about any alternative pathways available to students. The school careers counsellor should also be able to offer guidance.

School staff could explore whether there is any extra financial assistance available for the student, for instance:
- Redkite’s educational assistance includes grants to help students pursue tertiary study after cancer (see page 25)
- Ronald McDonald House Charities Australia’s Charlie Bell Scholarship program provides grants to assist with the cost of vocational or tertiary studies for young people aged 15–20 years who have experienced serious illness (rmhc.org.au/our-programs/charlie-bell-scholarship).