

Original Research Article
**I CANCERVIVE: EXPLORING THE MODERN
TRAVAILS OF CANCER-STRICKEN
ADOLESCENTS IN THE PANDEMIC NEW
NORMAL**

ABSTRACT

There is an imminent cancer plague behind this COVID-19 pandemic as the mortality rates of cancer patients continue to rise here in the Philippines. Successful remission and cancer survival are challenging in these pandemic times. This research explores the modern travails of teenage leukemia patients currently receiving treatment. A multiple case study was conducted on four pediatric hematology-oncology cases to uncover significant themes regarding their present challenges with cancer treatment, its holistic repercussions, the patient's coping mechanisms, and their significant life breakthroughs, which were compared and contrasted across cases. The results showed that the recent emergence of the pandemic deeply affected the systemic treatment offered to cancer patients. Consequently, treatment repercussions prevail in different areas of cancer-stricken adolescent's life (psychological, emotional, and behavioral repercussions). Showing manifestations of adaptive infection fear, emotional disturbance or distress, stress, depression, decreased scholastic involvement, and even increased gadget fixation. Their positive coping mechanisms ranged from activity engagement, initiative-taking mind-setting, cancer acceptance, and cultivating socio-spiritual solid support. Their insights and realizations emphasized the need for better access to cancer-related services and assistance and a calling for psycho-oncological therapeutic interventions for fellow cancer patients.

Keywords: descriptive case study, cancer-stricken adolescents, leukemia patients, COVID-19 pandemic, treatment challenges, insights.

INTRODUCTION

The foundation of daily life is an endless cycle of life, death, and rebirth that continues to perpetuate regardless of our mindful resistance. It is the natural order of things over which we humans have no control, but young children and adolescents afflicted by cancer had to deal with this at an aggravating level. They become more aware of their mortality at such an early age and had to make concessions in order to survive cancer and to live life fully.

The COVID-19 outbreak had ravaged various aspects of our society and profoundly impacted cancer healthcare delivery worldwide. As per the World Health Organization (2020), the number of individuals determined and diagnosed to have cancer globally arrived at 19.3 million, with the quantity of individuals' mortality rates expanding up to ten million. It simply illustrates how the COVID-19 pandemic has adverse effects on cancer healthcare globally, with characteristic struggles and challenges at institutions around the globe (Jazieh et al., 2020).

The Philippine Cancer Facts revealed that every year 3,500 Filipino children are determined to be diagnosed with cancer (Culminas et al., 2019). There has been a disruption in cancer

care due to logistical, physical, and psychosocial reasons in the Philippines as a result of COVID-19 (Ting et al., 2020). There is currently a growing issue as cancer has surpassed the COVID-19 virus, which was the fifth-leading cause of death in the Philippines, to take third place (Philippine Statistics Authority, 2021).

Cancer healthcare services here in Mindanao, specifically in the Davao Region are constantly developing. Nevertheless, there is still considerable room for development with its current treatment modalities, healthcare systems, cancer facilities, its widespread affordability to the public, even the scarcity of oncology doctors, etc. There are over 41 identified licensed oncologists (Medical, Surgical, Radiation, and Gynecologic Oncologists) in Region XI catering to the total population of 5,243,536 Mindanaoans (Eala et al., 2022). Most advanced clinics and cancer healthcare facilities are located in densely populated urban areas. The congested traffic of in-flow and out-flow of patients in healthcare institutions most especially in public hospitals has not helped the situation.

This research endeavor is largely influenced by two key hypotheses, specifically, the Terror Management Theory and the Hope Theory. The Hope Theory highlights the importance of hope as a necessary component and one of the coping techniques used by cancer patients to deal with their diagnosis (Snyder, 2012). Individuals with high hopes can conceptualize their goals, establishing goals that are informed by their past experiences. Assuring that cancer-stricken adolescents and their team (family or guardian) have the time to identify goals, raise their willpower, and develop viable options for achieving goals impedes their making progress and achieving cancer survival.

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The Terror Management Hypothesis is another theory that deals with the delicate subject of mortality salience (TMT). According to Solomon et al. (2004), our awareness of our mortality, or what they called our mortality salience, triggers psychological buffers in us to deal with the anxiety, worry, and dread that come with an awareness of our death. We commonly experience fear when faced with the inevitability of death, and this commonly leads to death anxiety, which is a persistent abnormal fear of death that the individual experiences. These psychological buffers include a cultural worldview, which is a collection of principles, standards, and values relevant to that culture, as well as self-esteem, which gives people a sense of worth.

Looming behind this world pandemic is a cancer outrage lurking behind our turned backs. Amid a world pandemic, an impending cancer pandemic is overshadowed. Humanity is fixated on solving this current dilemma that we overlooked other serious cases like cancer which continues to pester a significant number of innocent lives. These medical care shortages have resulted in a rise in cancer mortality rates (Maira C., 2022).

The current researchers have formulated four research questions which will be answered through a qualitative inquiry.

1. During the treatment phase, what are the challenges in the lives of cancer-stricken adolescents in the pandemic new normal?
2. What are the immediate psychological, emotional, and behavioral repercussions of cancer treatment for cancer-stricken adolescents?
3. How do cancer-stricken adolescents cope with their oncological experience?
4. What are the valuable insights, realizations, and breakthroughs in the lives of cancer-stricken adolescents?

Finally, this case study aims to further investigate and illuminate the impact of these healthcare decisions on patients' care and outcomes in the locality of Davao Region. Thus,

evidence-based approaches to cancer care can be developed for future cancer healthcare services.

METHODOLOGY

Participants

Participants in the study are teenage cancer patients (male or female) who were receiving chemotherapy treatment. During the COVID-19 pandemic, these patients have experienced extensive in-patient admissions in a facility that specializes in specific oncology cases with cancer pathologies. **Four (4)** cancer patients, specifically leukemia patients ages 12 to 18 years from Davao Region were chosen.

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Instrument

A semi-structured interview was conducted for the study, under its qualitative nature. A virtual interview made of open-ended questions precisely matched and tailored to the study's objectives. The research instrument was made in consideration of the research questions of the study, which were sent to the panel and validated by the experts.

Design and Procedure

In order to perform an investigation, this study used case study methodology and qualitative research techniques. According to Ravitch and Carl (2019), qualitative research is a technique to learn about people's perspectives on the world and how their own experiences relate to what they have observed. According to Lucas et al. (2018), case study research, as illustrated by the narratives, can provide significant information for the researchers conducting the study and beyond.

Ethical Consideration

In this study, the researchers observed the proper application of the ethical guidelines, specifically, by the UM Digos College Research Ethics Committee to ensure that no harm is inflicted on the participants and the researchers. The researchers utilized online video conferencing platforms to interview participants to eliminate the risk of cross-infection and contamination.

RESULTS AND DISCUSSION

Challenges of Cancer-Stricken Adolescents in The Pandemic New Normal

This section presents the treatment-seeking challenges of cancer patients who have been exponentially burdened by the recent COVID-19 upheaval. For cancer patients, this means reduced social support, the occurrence of treatment or medical services disruption, and increased contamination-related anxieties. Battling and outsmarting cancer has never been an easy process for cancer patients and with the added burden of the world pandemic. Cancer treatment has never been this challenging.

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Treatment and other medical services disruption

The government-issued mandate has drawn the public toward the confines of their homes. Prior to the release and drug trial of covid vaccines, the only safety protocols employed were social distancing, wearing personal protective equipment (e.g., face shield, face mask, etc.), and home quarantine or isolation. With these new norms, the patients have encountered disruption in their treatment-seeking and the medical services offered. The contraction of the virus has even halted the treatment of these young cancer patients as they have to must be isolated and quarantined due to COVID infection.

Sophie mentioned how COVID-19 disrupted his medication in the following statement. This was also evident in the four participants and was even interrupted due to COVID infection itself:

"Na postpone nung January na quarantine tasyungna COVID po ako" (It got postponed last January and quarantine time because I got COVID) [Sophie, LO9-LO10].

Chibs' mother stated how meticulous the hospital upon accepting patients just like Chibs resulting in an interruption in his medication. Admittedly, it was expressed by the patient's mother that seeking medical interventions and cancer treatment has been increasingly becoming difficult.

"Everytimena mag Chemo tayo dibamasyadongmaartena ang CCI sa protocols. Ang daming adjustments. Nong una kay okay ra priornamagpa chemo diha pa ka mag cbc. Pero ang sakaronna pandemic kinahanglannaana kay naka ready na x-ray nimo and nag swab test na. (Everytime that we have chemo the CCI is so meticulous with their protocols now. And actually, there are a lot of adjustments. At first it was okay to have your CBC simultaneously ate chemo schedule. But now in pandemic we should prepare x-ray and CBC) [Chibs' Mother, LO404-LO416].

Many aspects of life have been adversely affected by the COVID-19 pandemic outbreak. It was reported that routine cancer care services had been disrupted in a variety of ways for cancer patients actively seeking treatment and follow-up medical services (Edge et al., 2021). The pandemic has put a tremendous amount of strain on cancer services, causing disruptions mostly [as a result of because of](#) actions required to reduce patient virus exposure as well as pressures on health services resources (Dhada et al., 2021). Moreover, [a number of several](#) patients and their caregivers expressed frustration over COVID-19's perceived priority over their cancer-related symptoms which creates even more distress in them.

Reduced Social Support.

The pandemic has driven cancer patients further away from the public and their family relatives as the government has ordered policies and protocols to facilitate less socio-physical interaction. Though social distancing is not a new norm for the patients since right from the induction of the chemotherapy regimen patients are advised by their physician to refrain from public exposure as it poses a threat to their weakened immune system. This means less socialization and more prioritization of physical rehabilitation via social distancing. Healthcare institutions have reinforced one watcher per patient and no visitation hours. This has been deemed a veritable problem for cancer patients since social support during the treatment process is a crucial factor for these adolescent patients.

Greyll stated that due to the pandemic during medication, he was separated from his brothers and neighbors:

"Separated mi po saakoang brothers tapossaamoangmgasilingannakapamilyagihaponnamodugay mi nakauli." (We were separated from my brothers after my diagnosis. My neighbors who are still family members, we've been together for a long time.) [Greyll, LO1205-LO1209].

In light of the overwhelming evidence supporting the role social support plays in decreasing stress and facilitating enhanced quality of life and survival, reducing personal contact and support is particularly problematic for cancer patients (Pinquart & Duberstein, 2010; Cohen et al., 2022). The COVID-19 pandemic outbreak severely limited family and friend support due to social distancing and the decrease in social contacts in relevance to closures and social distancing guidelines (Lee et al., 2020). Though the utilization of advanced technology can bridge social connections, however, remote social contact cannot fully compensate for the person-to-person interaction effect, it does not extenuate loneliness in patients (Lewis, 2020).

Increased Contamination Related Anxieties.

Chemotherapy and many other forms of cancer therapy like radiotherapy, immunotherapy, targeted therapy, etc. are strict medical regimens with accompanying physical side effects on the body of the cancer patient. Chemo drugs for one do not discriminate in eliminating and killing the cells as it inevitably destroys cancer cells along with the healthy cells leaving the patient's immune system severely drained and weak. With the recent emergence of COVID-19, contamination-related anxieties have been the major concern of oncology cases as the presence of the virus threatens their health and cancer prognosis in general.

Miko's mother shared in the following statement of how anxious she is about his son's health if face-to-face classes will be back soon as this poses increased contamination risk:

"Siguro akong kagol-an kay inag face-to-face gyud. Kay daghan naman syagmakasalimuhangamgatao pero Ginoona lay masayodgyud kay wala man gud ta kabalosapanahon (I think, what's sadly concerning me is the face to face because there will be a lot of ~~people~~ people, he will encounter but only God really knows, and I surrender it to him. Because we don't really know the times) [Miko's Mother, LO670-LO671]

"Nahadlok ko po tapos katong nabalhin namisa Davao kay didto mas magdalanami ug katong dagkona alcohol para iwas covid" (Ahm, I was scared after we moved to Davao because ~~there~~ there, we would bring more alcohol to avoid COVID-19) [Greyl, LO69-LO74].

The quality of life of cancer patients has been severely affected by the emergence of the pandemic. The vulnerable population of individuals diagnosed with chronic and pathological conditions with compromised immune systems is prone to adverse physical and psychological effects (Cohen et al., 2022). In a pandemic, anxiety and stress levels are increased due to fear of infection, while preexisting mental health conditions are exacerbated (Ornell et al., 2021). Moreover, it is not uncommon for patients with common flu symptoms to suffer from mental distress and worsen their psychiatric symptoms ~~as a result of~~ because of similarity to COVID-19 symptoms.

The Immediate Psychological, Emotional, and Behavioral Repercussion of Cancer Treatment

Cancer changes people. The affective plight of enduring a cancer treatment is more likely going to do more than just eliminate cancer cells in a patient's body. Its toxic and painful nature connotes a pathological experience for adolescent cancer patients. Nevertheless, the whole regiment will have to be followed strictly and religiously for the patient to survive. The participants and their primary caregivers have reported psychological, emotional, and behavioral consequences resulting from the cancer treatment interventions. The very core of these changes was attributed to the harsh conditions of their systemic treatment. The fragile nature of their bodies has led to a dynamic effect on their holistic state of being.

Psychological disturbance, stress, and depression-

The participants described various ranges of negative thoughts during cancer treatment. These negative emotions and thoughts are loneliness, sadness, feelings of being alone, emptiness, and anxiousness about the future. Additionally, they described painful treatment procedures and side effects, which were often portrayed and depicted as traumatic and disturbing. This has caused significant psychological distress to the young cancer patient.

The following statements of Miko's mother align with the literature assumptions of disturbing, stressful, depressing, and relatively traumatic experiences:

"Tinoodjudkaayomakabuanggyud kay kung imongtinod on ogdibdibon depression gyud" **(True, you will get depression if you really take it seriously)** [Miko's Mother, LO482-LO484].

Greyl also expressed his fear and stress and apprehension of the treatment whenever he receives chemotherapy. This was also mentioned by Chibs' mother, that her son's fear and apprehension toward blood transfusion has caused significant disturbance and stress to her son. Moreover, Greyl's mother stated that there was an instance of psychological breakdown experienced by his son due to his painful treatment which happened during his cannulation:

"Ana judsiyanga ma bahalagmamamatay ko ma dilinako ma maluoy ka nako ma sakitnakaayo ma nag antosnako ug taman" **(We are in the infusion room, and he told me that he does not care if he's going to die. He just wants this to stop and he begged me because he's in so much pain and suffering)** [Greyl's Mother, LO1025-LO1029].

Similarly, Chibs shared the same sentiment or fear and apprehension with his treatment. Explicitly pointing out his painful experience during the chemotherapy procedure. Chibs' mother narrated a brief experience of her son which contributed to his treatment distress and disturbance:

"Nagkaroonsiya ng trauma sa BMA tung katong time naginakuhaannasiyasaanosaiyahanglikodkasowalaymakitadiligyudsilamaka-suction ug kuan ug dugo. Nagstartsila ug like siguro 5cc taposnisakasila ug 10cc, 20cc hantudsapinakadakogyudna syringe nakatongbakal. Unyapirtigyungsakita **(He had a trauma with the BMA because there was a time when he had an extraction procedure in his back, and they could not suction any blood. They started and like maybe 5cc then they went up and 10cc, 20cc until they used the biggest steel syringe. It was very painful)** [Chibs' Mother, LO610-LO614].

A cancer patient's emotional disturbance, such as anxiety or depression, is considered to be the sixth vital sign along with signs of respiration, temperature, blood pressure, heart rate, and pain. (Martins-Klein et al., 2021; Sun et al., 2019). People with cancer often experience emotional difficulties, which negatively impact treatment adherence and lead to a higher mortality rate. According to the meta-analysis depicted in the study by Hengwen Sun (2019) and his colleagues, there was a huge estimate of cancer patients experience some level of psychological distress during active treatment, and emotional distress disturbance was negatively associated with age.

Uncertainty and emotional distress-

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The patients have manifested cancer-related emotional distress due to the uncertainty and ambiguity of the treatment. Feelings of loneliness, irritation, and anxiousness are some of the negative emotions experienced by the patients about their diagnosis and treatment. Which makes the treatment experience all the more emotionally challenging for adolescent cancer patients. The unpredictability of the treatment process, outcomes, and accompanying discomfort cultivates emotional distress and affective reactions in the patients.

Sophie mentioned being emotionally affected by her chemotherapy treatment. Her inhibition towards seeking treatment often puts her in a crying feat:

"Paglabas ko po sa ospital hindi ko pa talagana-understand kung ano. Taposgi-explain ni mama tasyun nag-iyaknaakonaayaw ko lagi. Tas may times din nap ag mag tusokgudtaposayaw ko magpunta. Tapos parang ma-force naako noon" **(When I came out of the hospital I didn't really understand what's happening. Then mama explained that I have cancer and I was already crying that I didn't want to have it. There are also times when I don't want to go to the hospital because the injections sting a lot. It was like I was being forced to receive the treatment)** [Sophie, LO585-LO591].

Sophie's experience mood disturbances during her treatment. Akin to this phenomenon Chib's mother noticed changes in her son's attitude which according to her have completely changed after receiving the cancer treatment:

"Kanang irritable sila. Siya kay naga-mixed kuansiya mixed na ang iyang attitude. Naglahigyud ang iyang attitude. So kadto. Oo tama ka sa steroids maogyudnasiya." **(They're irritable because he has mixed attitude. His attitude was very different. Yes, that was it, you're right. It was because of the steroids.)** [Chibs' Mother, LO857-LO873].

A significant negative consequence of a cancer diagnosis and treatment is cancer-related distress due to uncertainty, which is characterized by intense unpleasant emotions that interfere with daily living conditions (Schade et al., 2020). During and after cancer treatment, patients may experience a variety of side effects from chemotherapy, including discomfort, anxiety, and fatigue which contributes inadvertently to the sleep patterns of patients and their affectual moods (Marusak et al., 2017; Zhang et al., 2017; Trentacosta et al. 2016).

Stronger behavioral adherence to COVID-19 prevention measures.

Cancer patients are much more predisposed to stronger behavioral adherence to COVID-19 prevention measures. These safeguarding protocols include social distancing, wearing protective equipment (e.g. face mask, face shield, PPEs, etc.), practicing hygienic sanitation, and staying in the confines of their homes. These behaviors are driven by the cancer patients' need to extenuate the lingering apprehension and fear of the virus. Eliminating possible sources of cross-infection and health risk contact will contribute to an easy and efficient clinic-to-home transition in the patients' lives. Thus, sparing them the compromise of having to deal with an untoward infection and more time for prioritizing treatment comfort.

Miko's mother expressed behavioral changes with her safeguarding tendencies towards her son's interactions:

"Conservative nakosaiyahabakumabaga kung asasiyamolakawpangitananakosiya like dilinanakosiya basta bastapasagdaaniyahangkinabuhikaronnganaa nay cancer" **(I have become**

more conservative when I deal with him-for instance, if he goes out, I look for him; I don't let my guard down now that he has cancer) [Miko's Mother, LO150-LO156].

Likewise, in Greyll's case, his social distancing practices were reinforced under his parents' supervision. He has to maintain a good distance from possible virus contaminants and sources as stated by his mother.

All of the participants reported increased compliance to COVID restrictions. Being proactive and compliant with these measures gives the patient and their caregiver a good sense of self-efficacy and a grasp of things. In comparison with the non-cancer population, cancer-affected individuals pay close adherence to the recommended distance when going out (Kassianos et al., 2021; Gallagher et al., 2020; Sigorski et al., 2020).

Increased gadget usage / Gadget dependence.

All throughout the span and longevity of the cancer treatment. Patients are generally unable to perform complex tasks and activities involving physical exertion as their body is rendered weak and fragile during chemotherapy. Cancer treatment protocols usually last at least two or more years depending on if the treatment was continuously administered without interruption. The patient routine involves staying at the hospital for treatment admissions, making out-patient treatment and clinic visits, and then resting at home for the next follow-up treatment and consultation. Moreover, this creates a gap in the means of entertainment for patients to fend off boredom. The gadgets like smartphones and iPad provide just the right distraction and source of leisure without having to deal with the physical demands that would burden their body.

Miko spoke about the significant amount of time he devotes to gaming activities using his smartphone gadget. This was also apparent in Chibs as spoken by his mother. Stating that his son seems to have a fixation on his gadget and gaming activities. According to her, Chibs seems to have his own world whenever he uses his gadget. Her mother even stated that Chibs' gadget fixation led to frequent online gaming for a prolonged time early in the morning. This, however, could lead to adverse health implications:

"Ano siya loner siya, gusto niyanaasiyaysarilingmundosiya lang namaonang ang makahappysaiyaha ang ML. Sila lang gyudnasa Mobile Legends ang makahappysailaha" (In my observation he's like. He's like a loner, he likes to have his own world in which he is alone and that is why ML makes him happy. It's just the two of them because ML makes him happy.) [Chibs' Mother, LO805-LO810].

Young cancer patients tend to resort to gadget usage as compensation for the forfeited physical activities due to treatment. Indulgence in mobile games is the most convenient activity for young cancer patients. Children aged 8 to 18 were separated from their peers during hospitalization due to environmental changes and limitations; they were unable to pursue hobbies and had trouble meeting their social needs. Consequently, these children mainly entertained themselves with mobile games (Tang et al., 2022). As a result of the prolonged use of electronics and participation in mobile games, the children were unable to interact properly with others, resulting in a decrease in social skills development.

Decreased scholastic involvement.

The cancer treatment intervention does not necessarily situate at the hospital. In fact, the transition from in-patient hospital drug administration is generally included and incorporated in the cancer treatment protocol. Out-patient medications (e.g., steroids, antibiotics, chemo

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injectables, etc.) are given to patients for home administration. This leaves an ample amount of time for patients to rest and recover from the effects of the treatment. Consequently, patients will have less time and resources to prioritize their education. As patients will have to deal with the chemotherapy side effects like nausea, loss of appetite, sore mouth, body fatigue, infections, muscle aches, temperature problems, and so on due to undergoing treatment and medication. Thus, resulting in decreased scholastic involvement and academic performance.

Sophie mentioned having lower grades after she started receiving chemotherapy treatment due to less school participation. She admitted that she cannot keep up with their class discussions which makes it difficult for her to understand their lessons:

"Ngayon kay naga baba ang grades ko napansin ko lang. Ahh, basta nagbabayung grades ko kasi hindi komakasabay sa lessons tapos hindi ko ma-understand yung mga tasks" **(Now my grades are decreasing I just noticed. My grades are decreasing because I can't keep up with the lessons and then I can't understand the tasks)** [Sophie, LO522-LO526]

It was even told by Sophie's mother that her daughter's teachers were more lenient to her due to her cancer affliction. They do not necessarily force her to do all the laborious learning tasks and activities. In Miko's case, his school participation has decreased due to treatment and parental restrictions as his body is very sensitive to contaminants in the surrounding. It was necessary for him to cut some social and scholastic interactions during his chemotherapy treatment.

As treatment protocols are specifically made to cater to the pathological needs of the young patients' physiology, it is not conducive to accommodating their educational learning needs. The repeated hospitalizations forced children with leukemia aged 8-18 years to leave school or take time off, which hampered their ability to attend school normally (Tang et al., 2022; Mendoza et al., 2019). Their academic performance declined due to reduced study time. Children also felt distressed and worried about the profound effects on their future studies caused by their reduced communication and interactions with teachers and classmates.

Coping Mechanisms of Cancer-Stricken Adolescents

A cancer diagnosis has a variety of effects on a person's life. It encompasses far more than just how people perceive it to be a near certainty. When in reality we are all bound for the same outcome. This section presents how cancer-stricken adolescents cope with their diagnosis and affliction in the scope of the phenomenal continuum. How they employ active coping strategies through engaging activities, promote positive mindsets, eventually increase their awareness and acceptance of their oncological situation, and rely on strong social and spiritual support amidst a pandemic. As cancer patients attempt to move past their treatment and diagnosis during this period of coping and life transition, it is crucial to consider their distinctive and unique cases.

Active Coping Strategies via Engaging Activities

Cancer patients' daily problems have existed for a very long time as a result of the side effects of their treatments. Unfortunately, the pandemic adds to the pain they have already endured because of the limitations and restrictions that have been imposed. Activities that were still possible prior to the pandemic have been severely limited. For some participants, using self-distraction keeps them "busy" and keeps them from thinking about their condition, thus improving their ability to cope.

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Sophie's mother mentioned the following activities her daughter does to herself from thinking about her condition:

"She keeps herself busy. Mag Tiktoksiya, magplaysiya ug instruments, sakdramanaasiyaygina follow nakdrama episode karon. Play oo, sa hospital while gina chemo siyahantudsamakatulogsiya. (She does a lot of things. She keeps herself busy. She will do Tiktok, she will play instruments, and she's also following kdrama episodes now. She plays with phone, when she's in the hospital while undergoing chemotherapy she plays until she falls asleep) [Sophie's Mother, LO737-LO744].

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It can be difficult for cancer patients to deal with their illness and treatment because of this extended isolation which can lead to sadness, loneliness, and worry (Aubry 2020). Despite already having several restrictions upon them, some participants hope for some sense of normalcy throughout their daily lives on a daily basis to find ways to stay active. As shown in a recent report, people who improved or maintained their levels of movement throughout the pandemic did so to preserve their mental health (Marashi et al., 2021). Some individuals engage in physical activities like sports that exercise their bodies. There is growing evidence to suggest that exercise can help people cope with the side effects of cancer, its treatment, and other behavioral health issues such as anxiety, sadness, exhaustion, and sleep issues (Adams et al., 2018). In addition, studies have indicated that engaging in physical activity following a cancer diagnosis enhances immune responses, fatigue, sleep, and general quality of life (Campbell et al., 2019).

Positive and Active Mind Setting. Cancer is not only heartbreaking news for those who have been diagnosed with it; it is also a life-threatening and life-changing condition that can have devastating impacts on many people. Minding all those detrimental impacts is unavoidable. The good news of this study is that it showed that everyone who participated seemed to have a positive outlook on their struggle with cancer.

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Greyl shared that he does not allow himself to be affected by being too emotional and getting depressed.

"Wala akonagpadala like sa emotions nila mama ug saiyahangmgasisters kay kung magpadala ko po kay ma depress lang man ko kanangmuragwalasiya'y benefit saakoa. (I did not get swayed with the emotions of my mother and her sisters, because if I let it get to me I'll just get depressed. It will not benefit me.) [Greyl, LO1114-LO1119].

Sophie's mother expressed how her daughter emotionally handled her situation:

"Self-motivation. Unya as much as possible she stays motivated. She's positive. Unya kana, dilisyanaga entertain ug mga negative thoughts about saiyahangsakit. Hopeful attitude. Yes po namaayosiya." (Self-motivation. And as much as possible she stays motivated. She's positive. And she does not entertain negative thoughts about her disease. She's got hopeful attitude. That she'll get better someday. That's just her way.) [Sophie's Mother, LO792-LO802].

Cancer patients believe that allowing stress to control them can only result in devastating repercussions, both physically and psychologically. This finding concurs with other research, which has found that positive psychological reactions can improve patients' quality of life, whereas negative reactions can have the opposite effect (Guo et al. 2022). During the

interview, it was mentioned that stress is one of the reasons why cancer patients die. Although the absolute effect of stress in cancer is unclear, the research showed that reducing stress may very well increase the likelihood of recovery, enhance quality of life, and allow for more engagement in the entire course of treatment (Feda et al., 2022). Similarly, a study reported that positive thinking encouraged patients with chronic diseases to showcase positive and problem-focused coping styles more than other coping styles. Participants who may be more likely to employ unhealthy coping mechanisms may profit from further psychological assistance (Dev et al. 2021).

Awareness and Acceptance of Current Situation. In general, those who were given a cancer diagnosis found it difficult to accept their current situation. Particularly in adjusting to their stressful circumstances, such as side effects from therapy, restricted physical activity, and other constraints. However, the participants of the study showed how acceptance helps them move on, cope with their situation, and motivates a positive outlook in life. In fact, most of them accepted their current situation.

Sophie stated that she accepted her condition in order for her to feel well:

"Gi-accept ko na lang po, in order to feel well kay walana kay I accept it man. (I just accepted it in order to feel well, because I already acknowledged it [cancer]) [Sophie, LO770-LO774].

People typically find optimism once they realize that they have cancer. However, holding onto hope and internalizing acceptance is a necessary process as it has been long recognized that it plays a critical role in psychological adjustment to the illness (Secinti et al., 2019). Cancer patient's awareness and acceptance of a life-threatening illness appears to be key target in interventions to lessen general and cancer-specific discomfort and coping in cancer patients (Secinti et al., 2019). Furthermore, a lot of cancer participants stressed the importance of accepting their conditions (Nipp et al., 2017).

Strong Social and Spiritual Support. The cancer patient's support system plays a pivotal role in the cancer-fighting process. But due to pandemic restrictions, cancer patients have been driven further away from physical interactions. This is where constant and close contact support for the patient's needs is critical.

Miko's mother stated that the spiritual and financial support they received makes them feel empowered despite their situation. Moreover, she expressed that she supported his son's condition in a way that won't make his son feel weakened by his condition:

"Pagkahibaloniyanganaasyaysakitnga cancer saakong tan-aw saiyadili pa niya totally nasabtanba kung unsay cancer ngamao tong nasabtannaniyanyaakopudsuportrapud ko kung unsay maayongapamaraan para saiyahaperoingonngamagpakita ka ogkaluyatungodsaiyangsitwasyon kay muragwapudko ygibuhat kay para dilipudsiyamaluya. (When he found out that he had cancer, I looked at him and it seemed like he didn't totally understand what cancer was, but when he already understood, I just supported what will be the best medication for him, but as if you are showing weakness because of his situation? it looks like I didn't do anything so that he wouldn't be weak again) [Miko's Mother, LO346-LO353].

Cancer patients' positive outlook on life reflects the way people support them all throughout their journey. According to Guo and his colleagues, the influence of the cancer patients'

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resources for support was crucial in helping people develop the confidence to pursue an anti-cancer trajectory. As per the findings, family support motivated the participants in the current study to battle and overcome cancer. The psychological state of the participants can be assisted by family support, which is always received in the form of gratitude, presence, and motivation, to keep them happy about receiving chemotherapy (Nira et al., 2020). Support from the family will help the patient feel more confident about their recovery from chemotherapy (Mayangsari et al., 2019). Patients with cancer have reportedly placed a strong emphasis on religious sources to enhance their quality of life (Guo et al. 2022). A study discovered that cancer patients employed similar coping mechanisms, including acknowledging the value of family and society, creating individual coping mechanisms, feeling relieved as a result of their religious beliefs, and sharing their feelings of gratitude (SinemGöralTürkçü et al., 2021). Furthermore, Corn and his colleagues (2020) discovered a strong link between hope and conduct that promotes health, spiritual well-being, and spiritual aspirations.

Insights, Realizations, and Breakthroughs In The Lives of Cancer-Stricken Adolescents

The hematologic oncology treatment and medication is a grueling and arduous journey for cancer patients. Each cancer case presents unique phenomena of treatment scenarios that have engendered certain insights, breakthroughs, and realizations in cancer patients and their immediate guardians. These realizations are predisposed towards the aggravating cancer healthcare access to services and assistance, and the concern for the extenuation of psychological treatment repercussions.

The need for better access to cancer-related services and assistance. The availability of financial and medical services to cater the oncological cases is a major concern for young cancer patients. Here in the Philippines, cancer healthcare services are still subject to improvements and appropriation to the needs of cancer patients. In the lives of young cancer patients, their guardians are much more burdened by the financial struggle and treatment maintenance. Cancer treatment is extremely expensive and as per the patients' experience, government assistance for cancer patients is time-limited and finite. The participants have stated that cash assistance and subsidies given by health institutions for example can only be claimed every three months until one can reapply for another. However, this has a big impact on the patients as common chemotherapy treatment cycles happen at weekly or monthly intervals. They would have to find more sources of financial support and personal monetary backup to rely on. Other concerns like securing blood and platelet units for their patient's transfusion use were also expressed by the participants.

Chibs' mother admitted that they have no health providers and insurance benefits. They only rely on government subsidies and non-government organizations (NGO's) financial assistance to sustain treatment. She also emphasized her struggle when it comes to accessing blood for frequent blood transfusions of her son which is vital for his survival. Similarly, Greyl's mother stated that financial healthcare assistance is one factor mediating the access of cancer patients to seek appropriate treatment

"Wala man mi health provider like sa insurance. Nag relay lang ko sa philhealth sakamalasakit center. More on mag focus jud ko sa blood. Like lisud kaumaka secure ug blood for cancer patients. Kana akong wish ngamaka access mi. Or maka access Ang ubang cancer patients kid" (We don't even have a health provider like insurance. I just relayed to the philhealth and care center. I focus more on blood. Like it's hard to secure blood for cancer patients. That's my wish we could access. Or

access cancer patients kid can access it) [Chibs' Mother, LO1423-LO1427].

According to Greyll's mother, it was imperative to provide sustainable healthcare assistance to these cancer cases. For she expressed that the pre-existing government aid is lacking scope and reach in the extensive timeline of cancer care:

"The better thing that the government can do for the cancer patients is to allocate more funds for them and make sure that the funds intended for them has sustainability. Dili lang mahatagan ta karon ug tabang. Then after three months pa ta pwedenapudmakapangayo. Let's change some policies of some agencies who are extending financial assistance to these people. Pobrengalisudlisuron pa" **(The better thing that the government can do for the cancer patients is to allocate more funds for them and make sure that the funds intended for them have sustainability. We just can't help now and then wait for three months until one can ask for assistance again. Let's change some policies of some agencies that are extending financial assistance to these people. Let's refrain from giving a hard time to poor people)** [Greyll's Mother, LO1682-LO1687].

In comparison, Sophie's mother shared equally alike opinions about fortifying government cancer treatment assistance to foster wellness among the cancer population.

Financial and geographical access to cancer healthcare services is of significant concern for young cancer patients and their families as advanced cancer facilities are situated in the urban and costly suburbs (Hung et al., 2021). Aside from the general cost of having to seek treatment in a city, cancer drugs, and financial toxicity is a veritable problem that causes disproportionate struggle towards the patient's finite resources and concomitant health services (Carrera et al., 2018; Rotter et al., 2019). As cancer care and medication cost rise so as the barriers to seeking appropriate treatment services like the lack of resources, the lack of knowledge of the available resources, the difficulty to access financial assistance, and the superficial barrier of communication and language literacy barriers.

The call for more psychological health intervention programs.The pathological experience of cancer diagnosis, treatment, and survival is a psychologically challenging endeavor for cancer patients. For young cancer patients, it is of great significance to establish and maintain good psychological health as it plays a crucial factor in their future cancer prognosis. The patients and their caregivers have expressed concerns and issues pertaining to their mental health which necessitates proper conduct of mental health interventions.

It was explicitly stated by Sophie's mother that the exceedingly overwhelming side effects and burden of cancer affliction and treatment unquestionably necessitate the formulation of comprehensive psycho-oncology services to counter the cancer ramifications:

"Ang bisanunsangpormasasuportasamasasikolohikal ug emosyonalngamga processes ngamakapataassaemosyonsaakonganakngababaye kay dakokaayongtabangsapag-siguronga ang mgasesyonsa chemotherapy is makayaniya" **(Any forms of support like psychological and emotional processes that can uplift the emotion of my daughter is highly appreciated and ensure that the chemotherapy sessions will be sustained.)** [Sophie's Mother, LO1122-LO1126].

The high burden of medical and psychiatric symptoms is an aggravating facet of cancer care due to its complexity and ambiguity to the patients (Irwin et al., 2019). There are many physical and psychological problems associated with cancer and its medical treatments. This includes a wide range of problems that have a profound impact on quality of life, such as physical pain, fatigue, and loss of autonomy as well as anxiety, depression, and strain on personal relationships (Zhao et al., 2021; Badger et al., 2019; Lang-Rollin et al., 2018). The division and inherent disconnect between oncological care and psychological interventions remain contributing factors to the most challenging disease of cancer in the diagnostic, therapeutic, and psycho-socio-cultural-economic domains.

CONCLUSIONS

Based on the results, the lives of cancer-stricken adolescents are extremely affected by the insurgence of COVID-19. The present pandemic situation has presented certain (1) challenges for patients. It has interrupted the cancer treatment schedule of many young cancer patients and reduced social support for them. It has also contributed to the increasing worries of the patients as the contamination of the virus may put their lives at great peril.

It was also deemed that these patients suffer from (2) psychological, behavioral, and emotional repercussions from cancer treatment given its invasive nature. Most patients have reported increased worry for their immunocompromised body, and psycho-emotional distress due to the uncertainty of their cancer diagnosis and treatment. Their feeble bodies prompted them to engage in increased social distancing behaviors to facilitate less contamination risk, and gadget dependence, and most especially resulted in decreased scholastic involvement as they are more preoccupied with treatment and often experience fatigue.

Moreover, it was found that patients (3) cope by participating in engaging activities, positive mind setting, acceptance of their affliction, and clinging to strong social and spiritual support. Their insights and realizations about their experience were pertinent to the acquisition and conceptualization of more financial support and psychological interventions. In their point of view, these are important factors in the cancer patient's life to achieve breakthroughs.

Furthermore, the patient's (4) life breakthroughs and realizations were all centered on their treatment-seeking emphasizing the need for better access to cancer-related services or financial assistance to alleviate the holistic burden of their situation and the growing need and concern for psycho-oncology health intervention programs catered to reinforce both the physiological and psychological needs of the young cancer patients.

CONSENT

The author sought and received approval from respondents. The informed consent form, signature, and documentation have all been completed.

ETHICAL APPROVAL

Ethics were appropriately observed in this study. Keeping participants' interests and researchers' boundaries in mind. A number of ethical considerations have been considered

in this research, including voluntary participation, privacy, confidentiality, informed consent, risks, benefits, fabrication, falsification, and authorship.

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