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Cancer patients shouldn't be fretting about child care

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EXCERPTS

Three weeks after she gave birth, Angela Jeffrey-Curry was diagnosed with cancer.

She was just 35, living in Mount Forest and travelling to Kitchener every other week for six months of chemotherapy for Hodgkin's lymphoma.

Jeffrey-Curry was too sick to look after her infant daughter, Kyla. There was an 18-month waiting list for subsidized child care, she said. She had no extended family nearby to help, and didn't have money to pay caregivers.

So she pulled her 14-year-old daughter Alyssa out of school to look after the baby.

Teachers sent work home, but Jeffrey-Curry knew Alyssa, "really suffered" that year from lack of a social and academic life. It didn't help that the family had just moved to the town a year earlier.

"I missed a lot of school," Alyssa said. "I didn't have spare time. I was just at home taking care of my little sister all the time."

That happened three years ago. Since then, Jeffrey-Curry and her family have moved to Elmira to be closer to Kitchener's Grand River Hospital and other services.

The cancer has not returned. But like many other cancer patients, she does suffer from mental health problems since her treatment. She has received counselling at the hospital's regional cancer centre and also got treatment for anxiety in Hamilton.

Jeffrey-Curry feels the cancer care system is used to dealing with older patients, but isn't as well oriented to the reality of younger people.

She points out that as more young families move around to look for work, they won't be able to count on a sibling or parent to help look after their children.

And "what happens to the immigrants?" she said. "They're not going to have mums or dads to help them."

This is undeniably true.

It's strange that, while our community has a generous range of programs to help people living with cancer, child care for stay-at-home parents is not on the list.

On top of the medical care offered by the hospital, there are social workers, mental health professionals, dietitians, many support groups and even music therapists available there.

Mark Karjaluoto, director of communications for the hospital, said in a written statement that the hospital does not provide child care for any of its services.

"The reason is that the hospital is funded for patient care, which would not include child care."

I checked with several other agencies that help cancer patients. No, no and no.

If you're ill at home, or recovering from a hospital visit, a personal support worker may come to help with bathing and meals. A nurse may provide medical care.

But "it's not in our mandate to support (patients) with babysitting services," said Dale Clement, chief executive officer of the Waterloo-Wellington Community Care Access Centre.

Clement said that if people called with a need for child care, they would be referred to an organization like HopeSpring Cancer Support Centre in Kitchener.

Well, HopeSpring offers plenty of sensitively designed programs including complimentary wigs, a variety of stress-reducing activities like

water yoga and meditation, and specialized support groups.

There is even a group counselling program for children, from age five up, whose parents have cancer. Strategies include therapeutic play, and help for teenagers who must care for their sick parents.

But again, no child care is offered for people in treatment.

It's as if the people designing and funding health care programs imagine that we live in a world where a) nobody gets cancer until they're at least in their 50s, and b) we all live within a short distance of caring friends or family members who are able to look after your child.

Perhaps it is time to rethink.

Because when one person in a family gets seriously ill, the entire family is disrupted.

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