

Research Paper

## Surviving All Odds: Through the Lens of Pediatric Cancer Survivors

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### ABSTRACT

Recovering from cancer involved more than merely surviving the disease - involving the cultivation of resilience through courage, faith, and psychological growth. Survivorship, nevertheless, does not represent the final phase of the journey; rather, it signified the start of another period filled with distinct hurdles. The objectives of this study were to understand the existing research 1) on the long-term impacts of cancer survivors and 2) the role of protective factors. The current study included analyzing papers published between 2014 and 2024 comprising clinical studies, with samples collected from any healthcare facility or official institution with a mandatory duration of one year of following recovery. Four databases were searched for relevant literature: PubMed, Science Direct, Sage Journals and BMC Health Service Research. The Search terms included combinations of keywords and Boolean operators, such as "Pediatric psycho-oncology" AND "Long term impacts" OR "Protective factors". The Filters were for publication year (2014-2024), language (English), and population (pediatric) were used to narrow down the search results. The current study evaluated several papers issued and discovered that in childhood those who survived, there has been an existence of Emotional Distress, notably depressive disorders. Among adolescents there was a greater likelihood of being recognized as having emotional discomfort as compared to early childhood who survived cancer. Emerging themes show that cancer in children has an adverse as well as beneficial impact on romance, although the consequences on sexual/physical closeness are primarily unfavorable. Several survivors appeared encouraged and passionate about assisting those suffering from cancer or other painful circumstances as a result of their fortitude. Pediatric survivors of cancer have several health issues and have to safeguard themselves from their negative emotional and physical consequences. Connecting with people who had been in similar circumstances helped them overcome their sense of isolation and gain beneficial insights from people. Exploration on lasting consequences and preventative measures for children who have battled cancer is critical for improving their general standard of life. Furthermore, it provides those who care for them with resources to cope with the lasting influences of illness, yet also promoting a better knowledge of this population's specific requirements.

**Keywords:** *Childhood Cancer, Long term Impacts, Protective Factors*

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Received: October 15, 2025; Revision Received: December 25, 2025; Accepted: December 30, 2025

**O**n an annual basis, around 52,366 kids (0-14 years) and 76,805 kids and teenagers (0-19 years) suffer cancer in India. Until lately survivability was not a top goal due to the emphasis on improving recovery levels (Arora et al., 2020).

Survivors of pediatric cancers are at an increased likelihood of acquiring chronic health problems; the incidence rises with age, demanding ongoing care. Associations with charitable organizations along with other supporters have facilitated economic, psychological, informative, and occupational restoration (Prasad et al., 2023).

Pediatric cancer management is only offered at the highest level, and because most operating cancer centres are found in large towns, the countryside is still devoid of these facilities. Although there's a national policy regarding cancer avoidance and management, India lacks an institutional structure for pediatric cancer management. However, the government has embraced the concept of 'health for all' after it became independent and has expanded pledges to strengthen the healthcare structure, which serves as the foundation for Universal Health Coverage (UHC). UHC is described as people and their community's obtaining accessibility to essential medical amenities (prevention, treatment, rehabilitation, and palliative care) despite incurring expenses (Ooms et al., 2015b). Attempts toward accomplishing UHC have primarily centred on "financial hardship" changes (Saksena et al., 2014). This comprises India's efforts to pertain to the attempts of India to start Ayushman Bharat in 2018, a government-run healthcare program that comprises financial assistance for children's cancer treatment (Ayushman Bharat National Health Protection Mission, 2019). Although the program deals with challenges to cost-effective healthcare, the supply element of medical services requires further strengthening, i.e., health services must be accessible alongside reasonable facility distribution, superior service, and effectively qualified employees to guarantee that household members are handled with respect and consideration (Levesque et al., 2013). On the side of consumption, households must be enabled to actually seek medical services as well as have the expertise and understanding required (health literacy and beliefs) that allow them to look for and submit to medical services (Faruqui et al., 2020).

The majority of (young) grown-ups who survived childhood cancer did not exhibit mental illness, yet those who survived of central nervous system (CNS) tumors, those who underwent cranial irradiation, and individuals with persistent medical conditions had more adverse effects (emotional distress, stress, worry, somatization, mental health dysfunction, exhaustion, joblessness,) than the comparison groups (Huang et al., 2017). A recent investigation indicated that the incidence of severe tiredness among childhood cancer remains unknown, owing partially to the variability of studies in terms of eligibility requirements and specimens, as well as the surveys that were employed to quantify fatigue (Van Deuren et al., 2020).

### ***Protective factors***

First reactions following the kid's detection of cancer are generally connected with trauma and huge disbelief (Eiser et al., 2004). Furthermore, emotional breakdown in these caregivers might have an adverse effect on the general wellness and well-being of the entire household (Rosenberg et al., 2014). Caretakers of suffering individuals faced a considerable burden that includes physiological, financial, interpersonal, and psychological issues. This weight might have an immense effect on their physical wellness and relations with their families (Namazzi et al., 2019).

### **1. Perseverance –**

According to the investigation, parents of kids diagnosed with cancer frequently endure despair, yet many also demonstrate surprising perseverance (McKenna et al., 2010). Person resilience enables children to adjust to hardship, and the study investigates how certain parents refrain from developing strain problems. According to investigations, there is a correlation among enhanced resilience and a greater quality of life for parental figures (Wells et al., 2002). Resilience is a crucial component of successfully responding to issues associated with cancer. Put in another perspective, in order to deal with kids who have cancer and the issues that come with it, parents must be resilient and have adaptable capabilities (Asghari et al., 2015).

In contrast, resilience implies the capacity to effectively adjust in the face of physiological and emotional health issues (Toledano et al., 2019). It entails learning skills to combat the detrimental impacts associated with illnesses such as cancer. The World Health Organization (WHO) indicates that the prevalence of pediatric cancers is increasing worldwide, even in emerging nations such as India. Based to the Population-Based Cancer Registry (PBCR) data, pediatric cancer comprises 0.7-4.4 percent of the total cases of cancer in India. Perhaps the most frequent kind of leukemia is acute lymphoblastic leukaemia (Steliarova et al., 2017).

As a characteristic of oneself, perseverance alleviates parental distress, (Rosenberg et al., 2013) increased the standard of life, encourages constructive change, mitigates the harmful consequences of strain, and encourages persons to safeguard their wellness (Tonmyr et al., 2011). Promoting endurance within loved ones of unwell kids can increase their emotional state and sense of fulfillment (14-16) while also reducing illness burden. In contrast, being deficient of endurance elevated the likelihood of several illnesses, both emotional and physical. As a result, resilience is viewed as a safeguard against a variety of illness conditions and dangers (Hunter et al., 2001).

Perseverance permits families to attain emotional balance. To effectively deal with the illnesses of their kid's cancer and accompanying issues, families must possess perseverance and constructive adaptive capabilities (Asghari et al., 2015).

### **2. Interpersonal Assistance –**

Support refers to being acknowledged and supported inside a social community of individuals who support one another (Taylor, 2004). Families who have kids with cancer confront a variety of events that can cause significant shifts in their life (Tillery et al., 2020) as well as distress (Norberg et al., 2013). Family members dealing with pediatric cancer encounter an array of circumstances and obstacles that have an enormous influence in their the existence (Enskar et al., 2020), including often medical procedures and admissions to hospitals for the kid, additional impacts of procedures, ambiguity regarding the evolution of the disease, and worried regarding recurrence (Angstrom et al., 2018). Social companionship has been identified as one among the most essential components in reducing emotional consequences in caregivers over time (Gudmundsdottir et.al., 2010).

Psycho-Oncology is particularly interested in the area of interpersonal assistance (Gunter et al., 2019) considering that it gives significant insight regarding the way patients and their families approach and manage with cancer. Support from others has been shown to lessen patient psychological strain. Social assistance can assist caregivers lower their level of

tension. It has additionally been discovered that the two social assistances obtained and offered by caregivers to their social network boost life happiness (Melguizo et al., 2022).

### **METHODOLOGY**

This literature review addresses the research question: *What are the long-term impacts and protective factors among childhood cancer survivors?* The population of interest includes paediatric-oncology patients, who had been diagnosed with childhood cancer like acute lymphoblastic leukemia (ALL) acute myeloid leukemia, non-Hodgkin lymphoma, Hodgkin lymphoma, neuroblastoma, Wilms tumor, soft tissue sarcoma, germ cell tumor, retinoblastoma, hepatoblastoma, Langerhans histiocytosis, and other diseases. The long-term impacts included emotional distress, somatic complaints, ability to form relationship and posttraumatic growth and protective factors like social support, resilient attitude and maintaining physical care. A systematic protocol guided the review to ensure to objectively assess the long-term impacts and protective factors of paediatric survivors of cancer.

#### ***Inclusion Criteria***

The current study included analyzed papers published between 2014 and 2024 that comprised clinical studies, with samples collected from any healthcare facility or official institution to ensure the validity of the information that is under consideration. A mandatory duration of 1 year of following recovering childhood cancer diagnosis chosen. Furthermore, the inclusion criteria included that the respondents had to receive a diagnosis with cancer between the ages of one and eighteen. Reviews were limited to publications in English.

#### ***Exclusion Criteria***

Participants with <1 year of follow-up after surviving pediatric cancer, as well as adults diagnosed with cancer, were excluded from the criteria. The research that did not correspond with the current goal of the study was also not followed.

#### ***Method***

The reviews were categorized on the basis of long term impacts on Emotional Distress (any form of emotional disturbance in the participants during and after surviving from childhood cancer), organ functioning (long term impact on one's physiological condition), Neurocognitive implications, Interpersonal and being intimate (the positive and negative impacts on one's ability to form and maintain interpersonal relationships) and Posttraumatic Recovery (seeing any positive growth within client) and for protective factors, Safeguarding physical well-being, Retaining a positive outlook and Interpersonal Assistance.

Four databases were searched for relevant literature: PubMed, Science Direct, Sage Journals and BMC Health Service Research. The Search terms included combinations of keywords and Boolean operators, such as "Pediatric psycho-oncology" AND "Long term impacts" OR "Protective factors". The Filters were for publication year (2014-2024), language (English), and population (pediatric) were used to narrow down the search results.

A methodical search was conducted in the following stages. In the beginning a thorough examination of all chosen sources was carried out applying preset keyword terms. Secondly, publications were assessed for relevancy using titles, abstracts, and complete written works. Research investigations that met the inclusion requirements were kept, but repetitions and extraneous papers had been deleted. Lastly, every reference was categorized and maintained via Mendeley software, that aided in the eliminating duplication phase and provided effective citation monitoring. The PRISMA a flowchart had been employed for documenting

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the detection, screening, and qualifying evaluation procedures, which improved clarity in choosing studies. This entailed conducting searches through databases, filtering for significance, reviewing the entire text writings, and selecting research investigations that responded to the study topic.

The findings from the studies that were incorporated had been collected via an established format that captured investigation particulars (researchers, year, and the nation) and demographic data (lifespan, cancer kind, and long-term impacts and protective factors).

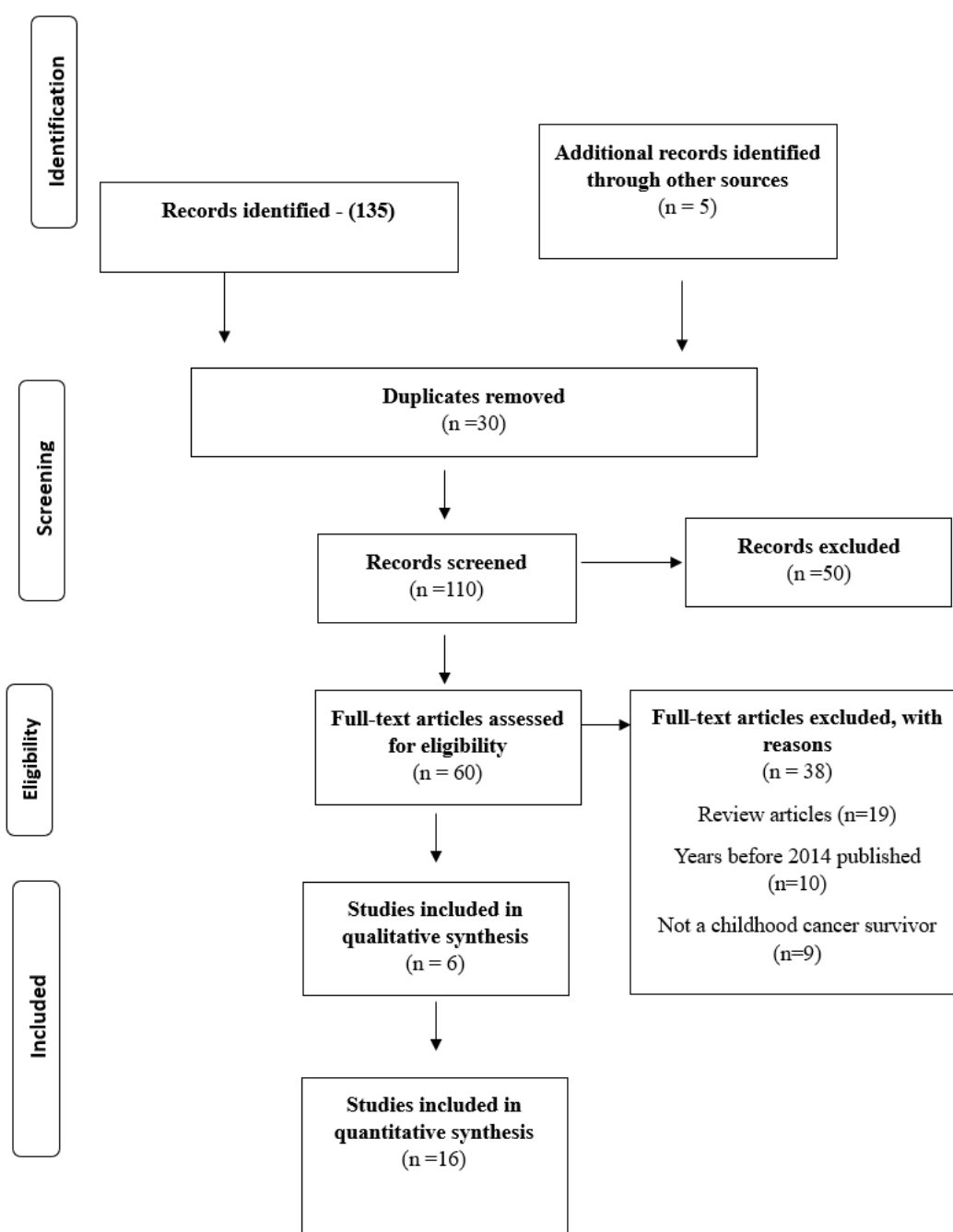
### **RESULT**

A total of 22 studies was being reviewed which comprised both quantitative and qualitative research. The studies aimed to understand the long-term impacts and protective factors of those who survived being diagnosed with cancer among childhood.

Women had a larger likelihood of experiencing depressed symptoms. Symptoms of depression emerge more commonly than apprehensive ones, and they were influenced by the existence of reproductive/genital later consequences (Dionisi-Vici et al.,2023). Among adolescents there was a greater likelihood of being recognized as having emotional discomfort as compared to early childhood (Heo et al., 2023). Most individuals indicated various adverse impacts cancer had on their relationships, especially fertility-related worries (Nahata et al., 2020). Positive themes included developing new viewpoints, increasing wisdom, and strengthening relationships with partners. Other individuals who survived discovered happiness and relief in step-kids considered adoption or accepted their lives lacking infants (Lehmann et al.,2019).

Several survivors appeared encouraged and passionate about assisting those suffering from cancer or other painful circumstances as a result of their fortitude (Zamora et al., 2017). Protective factors like following a nutritious diet and connecting with people following cancer treatment was critical for patients to accelerate healing (Akbarbegloo et al., 2024). Interpersonal Assistance was found to be significantly connected to growth after trauma, scholastic return, and regular exercise while adversely associated with emotional strain, despair, nervousness, and tension (Deegan et al., 2023).

*The Prisma Flow chart-*



**DISCUSSION**

A total of 22 studies was being reviewed which comprised 16 quantitative and 6 qualitative research. The studies aimed to understand the long-term impacts and protective factors of those who survived being diagnosed with cancer among childhood.

***I. Long term Impact-***

Few studies conducted found few long-term impacts on cancer survivors which were as follows-

- 1. Emotional Distress-** Pediatric survivors of cancer enlisted at the Transition Unit for Childhood Cancer Survivors in Italy. The study recruited 205 pediatric cancer patients who survived, both male and female, who had been diagnosed with illness

below the age of 18. Furthermore, children who survived cancer had high levels of social inclusion, with the majority of them in stable relationships, employed, or studying. Despite the general positive adaptation, depression was more found than apprehensive ones among those with cancer. The decreased degree of worry could be attributed to the fact that parents, rather than those who have experienced it, endured through the crucial and difficult periods of being diagnosed with cancer and receiving treatment. Furthermore, emotional assistance received throughout care probably assisted sufferers in surviving through their diagnosis of cancer and the subsequent survival period, reducing feelings of anxiousness to the greatest extent feasible. Women had a larger likelihood of experiencing depressed symptoms. Symptoms of depression emerge more commonly than apprehensive ones, and they were influenced by the existence of reproductive/genital later consequences (Dionisi-Vici et al.,2023). Children with acute lymphoblastic leukemia (ALL) might be at an elevated chance of developing psychological disorders. The investigation looked at the prevalence of psychiatric problems in South Korea. In total, 2160 children received diagnoses, with 75 of them having a minimum of one significant psychological condition from one year before the diagnosis. Psychological conditions such as stress/adjustment, depression, and anxiety increased within one year of ALL diagnosis and had been identified in 70 patients. The frequency of psychological illnesses in children under the age of five peaked around three years. Adolescents who were fifteen to eighteen had a greater incidence of mental illnesses. Furthermore, younger children may be unable to articulate their mental and physical difficulties appropriately. Adolescents, on the other hand, have a greater probability than younger kids to exhibit fear over mortality and difficulties adapting to school life, as well as to suffer from depression. As a result, adolescents have a greater likelihood of being recognized as having emotional discomfort. Furthermore, caregivers of children with ALL may overlook their emotional well-being since they tend to be more worried about their child's health on the outside (Heo J et al.,2023).

- 2. Organ Functioning-** Despite advances in cancer treatments that have considerably increased the chance of survival, there continue to be substantial medical problems related to late-stage treatment for cancer that substantially decrease the standard of life. A study examined those who survived childhood cancer in Poland who received a diagnosis when they reached the age of three and studied their impact after a 5-year follow-up. Those who survived had been diagnosed with acute lymphoblastic leukemia, acute myeloid leukemia, non-Hodgkin lymphoma, Hodgkin lymphoma, neuroblastoma, Wilms tumor, soft tissue sarcoma, germ cell tumor, retinoblastoma, hepatoblastoma, Langerhans histiocytosis, and other diseases. There are four basic groupings of patients to determine variations based on the management used: (1) treatment with chemotherapy alone, (2) chemotherapy and radiotherapy, (3) chemotherapy and surgery, and (4) combined treatment (chemotherapy, radiotherapy, and surgery). The research revealed that more sophisticated treatments were associated with a higher occurrence of certain late consequences. When a combination of treatments (chemotherapy, radiation, and surgery) was used, a higher proportion of those receiving treatment had small stature, reproductive system issues, dysfunction of the thyroid, impairment of hearing, and problems with their skin. Individuals who underwent chemotherapy and radiotherapy but not surgery were more likely to develop nervous system abnormalities and liver failure. Acute lymphoblastic leukemia (ALL) constituted the most frequent diagnosis amongst kids aged 2-3 years, whereas cardiovascular disease accounted for the majority of repercussions. They found a considerably greater proportion of anomalies confined

to auditory and gonad functions (Latoch et al., 2022). The pediatric cancer patients included had an elevated likelihood of gonadal/sexual impairment. Amongst the 105, those who survived were 27.1% female, who used sex hormones because of failure of the ovary. Five men (8.8%) were suspected to have hypogonadism but did not receive a sexual hormone treatment. Although a large majority of adolescent survivors were involved in sexual activity, 13.6% received no sex education (Yoon et al., 2017).

At follow-up, 68% of those who survived had healthy maturation and gonadal functioning. In 5% of the those who survived, all were abnormal. In the other 27% of those who survived, puberty did not foresee genital function during the beginning of adulthood. 20% of those who survived had healthy puberty but impaired genital functioning, whereas 7% had impaired puberty but normal genital functioning when they were young adults (Yu et al., 2020).

**3. Neurocognitive implications** -A research investigation was conducted to better comprehend the effects over time, and participants at the Paediatric Cancer Survivor Clinic (PCSC) of the Department of Pediatrics, AIIMS, who endured cancer in childhood and remained in recovery for a minimum of five consecutive years after receiving treatment were analyzed. A large number of cancer survivors had acute lymphoblastic leukemia (ALL), retinoblastoma, or Hodgkin's lymphoma as their main diagnoses. All three hundred individuals had undergone chemotherapy. A total of 23 percent (69%) of those who survived had a minor disability (the rate of growth impairment or underweight), thirteen percent (39) had moderate impairments that required medical treatment (hepatitis B surface antigen positive, myocardial dysfunction, azoospermia, and hypothyroidism), and a further two percent experienced major/life-threatening impairments (mental retardation, liver disease, and mortality). When assessing the psychosocial impact on a group of 60 who survived acute lymphoblastic leukemia (ALL) found that each of them lacked mathematical skills, recollection, and comprehension. Concerns from school were commonly reported. Thirty youngsters were socially excluded, experienced somatic issues like headaches, had interpersonal issues, and claimed to be nervous and unhappy. Three youngsters experienced attention difficulties and tended to fantasize, resulting in poor academic achievement. These individuals were aggressive, rigid, and prone to emotional outbursts and recurring fights (Seth et al., 2017).

**4. Interpersonal and being intimate** - Individuals in the romantic connections and physical intimacy were studied who were 23-42 years aged, and detected cancer between ages 5-18. It investigated the impact of cancer on romantic connections as well as sexual/physical closeness in an extensive sample of female and male youthful adult those who survived. Emerging themes show that cancer in children has an adverse as well as beneficial impact on romance, although the consequences on sexual/physical closeness are primarily unfavorable and a small percentage of those who survived in this study claimed no adverse effects. Most individuals indicated various adverse impacts cancer had on their relationships, especially fertility-related worries. Positive elements included developing new viewpoints, increasing wisdom, and strengthening relationships among companions (Nahata et al., 2020).

Merely 36% of survivors claim to have been educated regarding the likelihood of being infertile at being diagnosed, 39% after counseling, and 72% during over-time follow-up/survivor visits to the clinic (Cherven et al., 2016). Fertility-related attitudes differed amongst those who survived, but most people did not undergo fertility screening. Survivors with no infants, as well as people who wanted (more) infants, were more inclined to experience insecurity and worry about their

reproduction (Lehmann et al., 2018). Other individuals who survived discovered happiness and relief in step-kids considered adoption or accepted their lives lacking infants (Lehmann et al., 2019).

- 5. Post Traumatic Recovery-** The diagnosis of cancer events may result in favorable psychological alterations that might help minimize suffering in adults who are survivors of childhood and adolescent cancers. Eligible individuals were diagnosed with cancer aged below 20 years from 1973 to 2009 and born in Utah. The study was to look qualitatively at the beneficial impact of cancer on adults who were survivors of pediatric and teenage cancer, using post-traumatic development as a paradigm. The survivors were diagnosed with Lymphoma, gonad/germ cell, leukemia, sarcoma, thyroid, and other.

Survivors' fortitude was the main theme, as defined by greater maturity in emotions (sub-theme) and psychological self-assurance (sub-theme), influenced how they saw many aspects of their lives. It prompted those who have survived to rethink and enhance their familial and interpersonal connections and despite the journey was extremely difficult, but it appeared to be long-lasting. Several survivors appeared encouraged and passionate about assisting those suffering from cancer or other painful circumstances as a result of their fortitude. Another theme Spiritual growth, as evidenced by stronger spiritual convictions (sub-theme) and engagement in spiritual ceremonies and practices (Zamora et al., 2017).

Childhood cancer is an event that has been shown to cause both posttraumatic stressful signs (PTSS) and posttraumatic growth (PTG). As a result, the research looked into the links between PTSS and PTG and Quality of life (QOL) in childhood cancer survivors. A negative association was found between PTSS and all areas of Quality of life in childhood and adolescent. PTG showed a significant positive association only in adolescent and only in two dimensions of QOL: attitude on life and cognitive performance. It can be seen in adolescents that discovering purpose in a terrible situation necessitates intellectual development, which children lack (Koutna et al., 2022).

## ***II. Protective factors-***

Pediatric survivors of cancer have several health issues and have to safeguard themselves from their negative emotional and physical consequences. Assessing the challenges kids face with safeguarding care can help professionals in healthcare handle overtime care strategies (Akbarbegloo et al., 2024). Below are some protective factors-

- 1. Safeguarding physical well-being -** Following a nutritious diet following cancer treatment was critical for patients to accelerate healing, improving the body's immune response, and lowering the likelihood of cancer reappearance. Those included practicing better individual cleanliness and avoiding contact with others who could spread the illness to them. They underwent medical follow-up after discontinuing treatment to avoid adverse outcomes or recurrence of their illness. Connecting with people who had been in similar circumstances helped them overcome their sense of isolation and gain beneficial insights from people (Akbarbegloo et al., 2024). The children's improved respiratory health and physical wellness after the sixth month indicate that they might want less medical care when treatment is completed to restore adequate breathing capacity and functional abilities. Finally, for pediatric cancer survivors, this could assist in their reintegration into daily life, encompassing physical activity, relationships with others, attending classes, as well as academic ability (Nielsen et al., 2020). A qualitative investigation consisting of twenty-eight parents of childhood survivors of cancer were asked

questions. The majority of parents were unaware of the significance and beneficial effects of being physically active for their children's survival. The main barriers found were anxiety among parents about their child's physical exercise, restricted time, and an absence of amenities for recreation and leisure availability (Cheung et al., 2021).

- 2. Retaining a positive outlook-** Pediatric survivors of cancer claimed that they attempted various strategies to obtain serenity of thought and were interested in getting back to their regular and routine lives, including attempting to prevent the emotional effect of disease on their loved ones. Unpleasant inner conversations were harmful in the battle over cancer since cancer victims' ideas, emotions, and actions influenced one another, and unfavorable internal conversations resulted in adverse mental states accompanied by unpleasant feelings and actions. The individuals who participated believed that severe worry played a significant role in the onset of the condition and that believing in God was another strategy for conquering this fear (Akbarbegloo et al., 2024). Parental despair and distress are associated with decreased endurance. This suggests that emotional strain in caregivers will lead to a decline in their ability to rebound. People who did not experience despair while caring for their cancer-stricken children demonstrated greater endurance. Obtaining cancer treatment guidance by medical experts contributed in increased adaptability. Sharing knowledge at the right moment might assist families eliminate undue discomfort, allowing them to be more resilient (Mezgebu et al., 2020). The existence of encouraging and hopeful mindsets toward their children's cancer was a significant aspect that assisted parental endurance. A problem-oriented approach to coping with their children's cancer encouraged endurance within parents. Parents with a substantial amount of endurance also demonstrated considerable skills in caring for their children with cancer (Luo et al., 2022).
- 3. Interpersonal Assistance -** Numerous caregivers indicated that receiving support from others in the manner of exchange of knowledge from the medical professionals along with other caregivers improved their knowledge of health care and health care confidence in themselves. This research emphasizes the necessity of healthcare professionals allocating time to convey healthcare procedures, knowledge about cancer, and medical options to families to ensure they appear more prepared. A large number of caregivers emphasized the need for concrete support, as well as getting reassurance and support from loved ones, peers, and expanded connections on social media (Ochoa-Dominguez, et al., 2024). Social assistance may prevent distress and assist kids and teenagers in coping with the hardships and obstacles they confront in an everyday routine throughout their battle with cancer treatment. Family members and close companions, particularly caregivers, provide vital interpersonal assistance for those who survived. Social interaction was found to be significantly connected to growth after trauma, scholastic return, and regular exercise while adversely associated with emotional strain, despair, nervousness, and tension (Deegan et al., 2023). The social assistance obtained provides opportunities to help caregivers manage the terrible circumstances of children's cancer (Haunberger et al., 2019). The research results demonstrate that social assistance obtained is beneficial in alleviating strain, while social assistance offered indicates increased life contentment (Melguizo et al., 2023).

## CONCLUSION

The current study evaluated several papers issued and discovered that in childhood those who survived, there has been an existence of emotional distress, notably depressive

disorders, emphasizing the importance of psychological. Among adolescents there was a greater likelihood of being recognized as having emotional discomfort as compared to early childhood. Emerging themes show that cancer in children has an adverse as well as beneficial impact on romance in adults, although the consequences on sexual/physical closeness are primarily unfavourable. Most individuals indicated various adverse impacts cancer had on their relationships, especially fertility-related worries. Individuals who survived expressed various interpersonal difficulties that may hinder their capacity to progress toward emotional and physical closeness in connections. Other individuals who survived discovered happiness and relief in step-kids considered adoption or accepted their lives lacking infants.

Several survivors appeared encouraged and passionate about assisting those suffering from cancer or other painful circumstances as a result of their fortitude. They have to safeguard themselves from their negative emotional and physical consequences. Following a nutritious diet to accelerate healing, improve the body's immune response, and lower the likelihood of cancer reappearance. Connecting with people who had been in similar circumstances helped them overcome their sense of isolation and gain beneficial insights from people. Unpleasant inner conversations were harmful in the battle over cancer and actions hence maintaining a resilient attitude at the time of distress helped them to deal with the situation better. Interpersonal Assistance was found to be significantly connected to growth after trauma, scholastic return, and regular exercise while adversely associated with emotional strain, despair, nervousness, and tension.

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### **Acknowledgment**

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

### **Conflict of Interest**

The author(s) declared no conflict of interest.

**How to cite this article:** Arora, D. & Shriharsh, V. (2025). Surviving All Odds: Through the Lens of Pediatric Cancer Survivors. *International Journal of Indian Psychology*, *13*(4), 2661-2677. DIP:18.01.241.20251304, DOI:10.25215/1304.241