**The Power of Connection for Young Adults with Cancer**

**Speaker 1** 00:02

Bill, you're listening to the cancer assist podcast hosted by Dr Bill Evans and brought to you by the cancer Assistance Program. Wherever you are in your experience, we're here to provide help and hope as you navigate cancer prevention, treatment and care, help when you really need it.

**Dr. Bill Evans** 00:20

Well, welcome to the cancer assist show. This is Dr Bill Evans speaking, and I'm your host, as you know, and I'm delighted to have a couple of guests in the studio today. And we're going to be talking about how to manage your way through a diagnosis of cancer and through its treatment and so on, and and some special supports that now exist at the gervinsky Cancer Center to help young women journeying with the with the diagnosis of breast cancer. But before we start into the conversation with my guests, I just want to say a few words about the cancer Assistance Program, which brings you this podcast, which is meant to provide information that can be helpful to you if you are a patient who has cancer, or to friends and family who have someone who's coping with cancer, information that you can use to help them, both psychologically, but also in other practical ways. And the cancer Assistance Program provides a variety of free services, including rides through the cancer center, nutritional supports, incontinence supplies, head coverings, if you've lost hair through treatment, and importantly, a variety of pieces of equipment, from wheelchairs and ambulators, commode chairs, a variety of different pieces of equipment that can help individuals in their homes and enable them to Get Out and about if they're experiencing some level of disability as a result of the cancer or its treatment. So these are all things that the cancer Assistance Program offers here in Hamilton, and we're really blessed to have that service available to us and now to our guests. So I have two guests, as I said, and Kenisha Hanson is my first guest, and she's an author, and a variety of things a motivator. And some of that comes about because she's been motivated by having the experience of cancer herself. And she's going to tell us a bit about her story. And as well, we have Sandra Turner. And Sandra is a nurse at the jurovinsky Cancer Center. She's been there a long time, she tells me, but she doesn't look like she'd been there a long time, because she looks very young and youthful. But she's been a nurse on working with the Ontario breast screening program as well as in the clinic, and now is working with a new program that I'm just learning about called Pink. Now they can't spell pink, apparently, and then Juravinski very accurately, because it's with a Y, not an I, but it's a new program to support young women with breast cancer, so of individuals less than 40 years of age. So we'll talk about that in a moment. But let's start first with Kenisha and maybe a little bit about yourself, what you were doing before you were taken off your direction in life by diagnosis of Hodgkin's disease?

**Speaker 2** 03:07

Yeah, what I was doing before? So I was I, so I was working for the government. I still do now today, I was actually in corrections, so I was working there, also working on going to get my PhD. Yeah, the PhD,

**Dr. Bill Evans** 03:21

working and doing a PhD at the same

**Speaker 2** 03:23

time, I'm going to go get my PhD. So I had applied, and I was getting ready to go. I had everything all set. I was going to, actually going to go to New Zealand, yeah, to finish my studies. And, yeah, everything kind of changed for me. I started feeling, you know, a little bit of a interesting kind of pain. It was like a I was kind of in my back, and I was like, this is strange, because I'm otherwise healthy. And so I went to the doctor. They're like, Oh, can't find it. I went to I got massages, and I was just like, I can't shake this. And then one day, it started to radiate in my chest, and I was like, okay, something's not right. And so I went to the hospital, and they're like, Okay, they did a couple of tests, and they're like, No, it doesn't seem like anything's wrong. And then they're like, oh, so we'll send you home. And then it wouldn't go away. I was like, something is not okay. I don't know what it is, but something is not okay. And so I went back and I said, I they said, well, we'll book you a CT sometime in the future. And I was just like, waited for the call. It never came. So I showed up again. I said, Listen, this is this is not okay, and I'll wait here. They said, Oh, it's gonna take all day. It's okay. I'm like, I have all day.

**Dr. Bill Evans** 04:40

I was probably getting more and

**Speaker 2** 04:43

more. Yeah, it was, it was peculiar. It wasn't. It didn't feel like anything that I felt before. It didn't. It felt very off, right? And I think that that's so important to listen to your

**Dr. Bill Evans** 04:53

body. I was going to use that expression exactly what was on my mind, because you're making an extremely important point that. People do have to listen to their bodies. Only you know what you know your body feels like, so you speak the and if something is persistent and getting worse, you're the best person to report it and don't ignore it. I think some people do absolutely. And then the sort of the persistence you're showing, as well as another feature, is about to be dismissed by people saying, well, it's in your head, or is, if you're concerned, to be persistent. So those are two important messages right there, that,

**Speaker 2** 05:27

no, I'm good at being absolutely and I think just like you're gonna have to advocate for yourself, especially throughout this journey, right? And that's something that I had to do very early on. And so when they finally did take me in, I did the CT, and literally, that day, I will never forget the face of the doctor. He he a complete ghost when he saw me again, and he's just like, I am so sorry. He's like, I thought it was nothing, and I'm it's very likely that you have cancer. And admitted me that day, and I was, yeah, Thanksgiving I spent to the hospital, and everything just changed, like so fast, so unbelievably fast, yeah.

**Dr. Bill Evans** 06:06

So from there, get this label of cancer, yeah, and not more specific in that the word cancer, to many people, means something terminal, yeah. Were you feeling that way?

**Speaker 2** 06:22

Yeah, I definitely. I think initially it was like, I knew something was wrong. Did I know it was going to be as extreme as this? No, but I was just like, okay, at least now I know. And then I think what was also challenging was the part from when, okay, you have cancer, now we have to confirm that you have cancer. Now we have to confirm the staging of your cancer. So it was just like a series of unfortunate, Series of Unfortunate Events. And so for me, it was, you know, okay, we have to check. And then it just got progressively worse. Like, oh, we're gonna stage it. You might be a two, you might be a four. Then it was four, and I was just like, Okay, anything else. And I think even just that process of the waiting and the staging is also, like, very nerve wracking. And then I had to, because it was in my spine, my sternum and my abdomen, so they're like, Okay, we've got to start immediately. And it was like, I had a trip to Bali, client, Bali, and I was excited to go, and obviously I could no longer go. I had to do immediate fertility treatments. That's not something that I had to think about before then I began chemo. And then, unfortunately, the pandemic hit, so I then was doing chemo throughout the pandemic. So it was just layered, right? And the year before that, my mother was paralyzed, so I was also a caregiver for her. So it was just a lot of things that were layered. So I found it was so imperative to like we discussed before, like, listen to myself, listen to my body, aware of the things that I was feeling because my mental capacity and my mental state was so important, so unbelievably important. And I don't think that I would be here had I not, you know, taking that time to really, like connect with myself, taking that time to like, not get so lost in all of the things that were happening, but kind of just focusing one step at a time, one step at a time. But

**Dr. Bill Evans** 08:24

you said something interesting there that you, you know, you were treated during COVID, which is very isolating, because you could, couldn't have other people really around very much. So what were your supports like? Or did you the supports have to be inner supports, as opposed to people who were around you to support

**Speaker 2** 08:42

you, yeah, and I think that that was interesting, because I saw a bit of both, right? Because I was I caught, I had a couple of appointments where I could have friends and family, and then all of a sudden I could have no one. So I think that transition to that was was very challenging, and, yeah, like you said, very isolating, right? Because now you're just, you're just sitting there, and I think one you're trying to, you know, beat cancer or survive cancer, as well as now dodge COVID, and, you know, not get taken out by that. And you're seeing all these news stories and, and I think to that during COVID, everyone else was having their own experience as well, right? So not only is it isolating from a standpoint of, well, oh, well, people can't come and see me, but now people are also navigating this, this crazy world that we're now living in, like so unpredictable. People are unfortunately losing their lives. People can't have, you know, medical treatments. They can't have all of these other things, and I'm also having my experience. So I think it was an interesting time navigating those two different things that were happening.

**Dr. Bill Evans** 09:48

And you're very young in life. I don't know what your age is, of 10, not very good at guessing, and that's what you guess a woman's age anyway. But you're young, and so early in life. And I. Don't know what your relationships are in terms of thinking about family and children all those sorts of things, but when you're getting chemotherapy, and presumably you lost hair, and you probably were feeling sickly a lot of the time, and maybe didn't want people around because of how you were feeling, so you would have gone through a lot of physical changes as well as emotional and psychological changes,

**Speaker 2** 10:28

absolutely, absolutely. So I do have a partner. It's the same partner that I had when I was going through treatment. And yeah, I definitely lost my hair. I cut it shorter, like I did, like a gradual kind of thing. And then after that, I had to cut it off because it was, it was obviously fitting so much. And, yeah, I think that whole experience, I think people sometimes underestimate. They're like, Oh, it's just hair. It's, it's a little bit more than that to me, because this is not, this wasn't my choice, and your partner stayed with you, supportive. Yes, he was very supportive. So I am very grateful for that, you know,

**Dr. Bill Evans** 11:03

and that's, that's, you know, it is really important. And I actually, as a physician, I've seen the opposite. Some men are not very supportive, and sometimes I've had it said I have a young lady with breast cancer, and the fellow said I didn't bargain for this when I got married and he left. Yes, he wasn't going to be supportive at all. So this can happen, and that's a real tragedy. So I've heard kudos, kudos to your partner sticking it out. Thank

**Speaker 2** 11:31

you. And I think that that's, it's very interesting point that you mentioned there, because I did hear that, and I did see that look, obviously I was following like, forums and different things like that. And I think I would get the, Oh, you're so lucky that he stayed. And it's just like, there's an internal thing that happens for me now. Now I'm just like, Am I no longer worth, you know, loving, because now I have cancer. So it's just, it's just very interesting to navigate, like, I understand what they're saying, like, but also it's like, Huh? Am I no longer worth anything? Am I now tainted? Tainted or tarnished goods because of this thing that I needed to ask for? Right?

**Dr. Bill Evans** 12:08

You're looking healthy and well now you're in remission. I am and obviously you changed in a number of ways, perhaps your ambitions of what you were going to be doing in your training and your work. Life has changed. And tell us about that, oh

**Speaker 2** 12:26

yeah, it's changed a lot. I think first I had to do some unpacking of the PhD dreams and goals and aspirations, right? That was, I, you know, I was, you know, an academic. I got, you know, good grades in school. I was like, This is what I'm doing. This is, this is the only thing that I could do. Of course, I'm going to get my PhD. This is, this is how this works.

**Dr. Bill Evans** 12:50

And then when that, what was your field of endeavor with the

**Speaker 2** 12:53

psychology, psychology, yeah, yeah, exactly. So I had to now unpack that right because now I was just like, well, there's no point, like, I did all of this work for this thing that I can no longer do right now. And I think I tied a lot of my worth to it. I tied a lot of like, who I was, my identity, you know, I felt that that's how I would be respected in the world as a black woman. And so I had to unpack that and tease it apart, because now, just because I don't have my PhD doesn't mean that I'm not worth anything. Doesn't mean that, you know, people can't respect me. So I feel like I had to do that first. I had to be okay with maybe it's not now, maybe it's not ever, but it's not it doesn't define me. So that was the first step. It took a lot of work, because you don't realize how tied we are to these these thoughts, our goals and our ideas. And so moving forward, moving past that, I was actually able to write a book, and my book is called piece your way to success, and it's not something I ever had on the cards for myself. I never thought about being an author. I wasn't, you know, dreaming all my life. I want to, you know, be an author. Never thought about it, but it felt I am a very spiritual person, but it felt like something that I was supposed to do. It felt like there was a story there. There was something that I that I could share with people to support them. And like you mentioned earlier, with not necessarily cancer, but it can be any life altering event. And looking at all facets of your life, you know your finances, your mental, your spiritual, like your your relationships, you know your physical well being. And so, yeah, I did that. I became a coach. So right now I do coach leaders really helping people align with, like, their values, the things that are important to them, why it is important to them, and honoring their story, honoring, you know, all the things that are important, all the things that they want. And so, yeah,

**Dr. Bill Evans** 14:53

you're on a different career path.

14:55

I on a different career

**Dr. Bill Evans** 14:56

path. So illness is a bad thing, but something. Eyes can be translated into something. Yeah, I want to bring Sandra into the conversation now, because you're dealing with more young women who have stories that I think are have many similarities, but with a different disease process, but it's still similar impacts and in terms of locking people off their crew business, because they're all under 40 years of age, or 40 under exactly, and they're they're also experiencing changes in their physical appearance, and perhaps even greater than what kinesha has experienced, because it's breast cancer. So they may have lost part or all the breast they may have a genetic predisposition because they're younger women, and so there's concerns about, you know, future, yes, other cancers and family members, and then the same issues about family and children and fertility and so. So tell us a little about about that experience and how women you're seeing are similar. When

**Speaker 3** 15:59

you were speaking to Nisha, there was so much that resonated on what I do and how I help these young women that come to the Cancer Center. And the program has been going now since summer of 2013 and this program is supported solely by donations. The Jess and Newberg Foundation gave a large grant, so the program is funded by that, and it's a five year program, and we also have some support from the bright run to help with the research coordinator. And you know, these young women that I see very similar problems to what Tanisha described, and I'm able to intervene very early, so I get a referral right when they come to the cancer center, and sometimes the external surgeons will let me know that they're coming, and I can reach out to those people before they even get to the Cancer Center. And when I talk to them, they tell me that is the hardest time when they're, you know, they've been told by their family doctor that that biopsy is positive for breast cancer, and they have to wait a week or two weeks to get to the cancer center, and they're scared, and I'm able to answer questions. I'm able to let them know what's going to happen, you know, in general terms, when they arrive at the cancer center, and then I meet them at their first consultation, and I already know that person, and they already have a familiar face. We can deal with some of those crises that you you described early and get those facilitated referrals to the fertility clinics and help them in that waiting process for those tests by doing something in the meantime, it's been a very beneficial program. I think,

**Dr. Bill Evans** 17:35

when you get a cancer diagnosis, as I understand and not having had one yet, but it's overwhelming, and it's you can be a bit like a deer in the headlights, and you're getting so much information, so many things to think about in your life, the treatments, fertility, you name it, it's and it's hard to sort of know what to do next. It seems to me that what you're describing and the role you have is really essential for all cancer patients. I really, you know, you're the navigator, or the person takes their hand and say, this would help. This would have this. This resource is over here, and as I've done these podcasts, you know, we've had the opportunity to talk to child life specialists, occupational therapists, physiotherapists, people that can make it real different. Difference through the cancer journey. But most times, for the majority of patients, they're going in the cancer center, they're seeing a physician, and they're hearing just the medical piece, yeah, drugs you're gonna guess, or radiation you may get, and and the side effects. And these, you know, these medicines to help with the side effects, but they don't hear about how well exercise can make a difference to how you feel. Children could be talked to by or you could be taught how to talk better to your children about the life threat, spacing and things of that nature. So having other resources that can do the connecting to parts of this

**Speaker 3** 19:02

and even talking about things like intimacy during cancer and birth control, those medical teams, your oncologist and your primary nurse, they're focused on the side effects of your treatment and getting you through that treatment to cure the cancer or keep the cancer stable and keep You living the best life you can live. But I can help them. You know, I talk about relationship. How are things with you and your husband? How are the kids doing? Have you talked to their teacher? Are you still maintaining that intimacy? Having date nights or cuddling? If you don't feel up to being actually physically intimate, there's lots you can do to keep that relationship going so they don't end up as one of those people whose husbands walked out the door and, you know, the other teams don't have time to do that, so I certainly am able to make that time and talk about those things that aren't spoken about because, not because they don't care, just because they don't have the resources to do it.

**Dr. Bill Evans** 19:59

No. This, this pink breast cancer program for young adults, didn't originate, I gather, in Hamilton. It started in Sunnybrook.

**Speaker 3** 20:08

Yeah, in 2008 actually, okay, and what,

**Dr. Bill Evans** 20:11

what's been the sort of history? How did it get started? Was it just someone who felt the need Yes,

**Speaker 3** 20:17

so actually, it was Doctor Ellen Warner. She was at the symposium that happens every December in San Antonio, the Breast Cancer Symposium. And apparently it was a rainy day, and her and some other people were out to lunch or out walking the boardwalk, I'm not sure which. But anyways, they came up with this concept that, you know, young women, I mean, she was a breast cancer oncologist. So specifically, breast cancer, these young women needed extra supports that it was a very difficult journey, interrupting school, interrupting their life, taking that, that turn in their path that you you don't expect to happen. And they came up with this concept that they should try and develop a program to support these young women, and they called it pink. People always ask what the acronym is, and there's not an acronym. It's just a word and changed with the y to make it interesting. I don't know, maybe the Y chromosome. No. Is that how it works? No, because it's still the latch, yeah. But that doesn't work for pink. Yeah. So yeah, they came up with that concept in 2008 and they're supported by fundraising and and some donors as well. Yeah.

**Dr. Bill Evans** 21:27

Well, the whole concept of support for adolescents and young adults has gained a lot of traction because there's an awareness of all these other things happen in the lives of young people, as distinct from sort of the more typical cancer patient who's in more advanced years, and there are these Aya programs in many places. I actually had hoped to have one of the Germans. It's coming. Is

**Speaker 3** 21:50

it finally coming? Yes, it is coming. They're working on hiring the person, right? Very good.

**Dr. Bill Evans** 21:55

Because I thought when we had some raw space there, I could make it into the AYA unit, but it became necessary to convert it for more bone marrow transplant, stem cell transplants and so on, car T cells. So I'm glad to hear that it hasn't been forgotten, because if we'll fulfill a need that you were describing in terms of all those multiplicity of things that happened in a young person's life, their education, their getting a partner, starting a family, having kids. You know, it seems to financial needs. It's a complex period of life, and to have it punctuated by a cancer, torpedoed by a cancer, and it really is, is terribly unsettling, and supports and guidance through that period is tremendously important. Before we talk a little more about that, I think we'll take a brief break and hear from our sponsor, so to speak, from the cancer Assistance Program, and we'll be right back to talk more.

**Speaker 1** 22:56

We'd like to take a moment to thank our generous supporters, the Hatton Family Fund and bankel creative studio, who make the cancer assist podcast possible. The cancer Assistance Program is as busy as ever, providing essential support to patients and their families. We remain committed to providing free services for patients in our community, including transportation and equipment, loans, personal care and comfort items, parking and practical education. These services are made possible by the generosity of our donors through one time gifts, monthly donations, third party fundraising, corporate sponsorships and volunteer opportunities. Visit cancer assist.ca to see how you can make a difference in the lives of cancer patients and their families.

**Dr. Bill Evans** 23:40

We're back with Kenisha and Sandra your book titled peace. I'm going to say it's slower. You said it very quickly. I'm not sure V ballist would have heard peace your way to success. And so there's the peace they might have heard p, i, E, C, E, S, P, E, A, C, E, and success. We need to talk about both of those terms. So the piece that you're talking about, tell us what you're what you mean by

**Speaker 2** 24:06

the piece that I'm talking about is the internal peace, you know, the internal contentment, the what you feel when you are living the life that is you your own right. When we talk about that, we talk about listening to when we listen to our bodies, awareness of, you know what, what helps us, what we love, what we don't love, and living in alignment with that. And I think it's just living in alignment. And in order to do that, we do have to be aware. We have to be aware of the things that we love, the things that we don't, the things that we want more of, the things that we want less self and just choosing to honor ourselves, giving ourselves grace. That's a big part of peace for me, you know, giving myself permission to change my mind, giving myself permission to flow through things as they come, the ebbs and flows of life.

**Dr. Bill Evans** 24:57

Yeah, peace. So the peace idri talk about. Listening to your body as sort of physical things, and the piece you're talking about, it says listening to your your emotions and your mind, your thoughts, and learning how to control them. I think I understand what you're partly saying.

**Speaker 2** 25:13

Yeah, I think like tuning into it right, and making and choosing, choosing what aligns with that, right? Because I think sometimes we intuitively know, okay, I like this, or I don't like this, or I want more of this, but then we don't make the choices to amplify those things that we enjoy. And I think that that's a part of it, right? We do with with understanding, you know, what it is that we want, we also have to make the choices to live in alignment with that. Otherwise, we're just saying, Well, yeah, I love, you know, art, right? But I never actually engage. I never go to an art show and never do anything, anything, but it brings me joy. But if it brings you joy, we have to make the choices to, you know, engage with it in some way,

**Dr. Bill Evans** 25:56

shape or form, and that ties into the success part of it, what you have to define success, then

**Speaker 2** 26:01

yourself, yes. And I talk a lot about just obviously giving my story, like redefining success and what that looks like. Sometimes, a lot of times, we have this idea of what we want for ourselves, and it happens at a very young age, right? And we decide I want to be this when I grow up. You know? I want to be me. Personally, I wanted to be a farmer when I grew up, that has changed. But then, since then, I believe that I was going to be a psychologist, I was going to have my PhD, that was going to be the life for me. But now it's like, it's okay to redefine what that looks like and understand where that even came from, because sometimes it comes from, you know, cultural expectations. You know, some cultures, there's probably built three professions that you could have, and if you don't do one of those three, forget about it. So where is that coming from? And just taking the time to do your own inventory and be like, is that truly what I want? Or even if you if you've arrived in that profession and you're like, Oh, well, this was good. I enjoyed it. I did it, but I would love to do something else, and being okay with taking a chance and stepping outside of that, and yeah, redefining your success story to something that aligns with the person that you are today and not who you were

**Dr. Bill Evans** 27:11

you have in your book. I think the four words evaluate, which I think you're talking about there, align your actions with your values, curate your environment and influences. I'd like you to explain that one. And then the one I like is ease. Is sustainable intentional change, like the idea of easing into it, as opposed to sort of abruptly transitioning to it, or something. You chose the word ease, yeah, and probably a special meaning to you from your going from illness to health,

**Speaker 2** 27:43

yeah, ease for me is, you know, sometimes we continuously create, you know, new new mountains, new new hills to climb. We achieve something and we don't even, you know, take the time to appreciate it. Take the time to be like, Wow, I did this thing. Ease for me is creating less resistance. You know, if I choose to do something, okay, let it be that, let it be that, let me experience it, let me allow it, and also creating. I think one of the things that I think about too is timelines when I think about ease as well. Sometimes we have these timelines, and we create an additional pressure. So not only to do the thing, but now we've, we've created very rigid timelines often, and that if we don't meet them, well, now everything's you know, doesn't matter anymore. I can't believe I didn't, you know, get married by 25 like, but ease for me is like giving ease is in line with grace as well for me, right? How do we give ourselves grace? Because, as I saw and and many people see, like, sometimes we don't have we don't have control. Sometimes, right? There are things that will kind of knock us off. And how do you create a little bit more flexibility? How do you create a little bit more ease? How do you create, you know, timelines that are maybe built in with a little bit of wiggle room, a little bit of room to grow, a little bit of room to change, a little bit of room for some magic or some faith in there to open yourself to things that you may not have even been dreamed up

**Dr. Bill Evans** 29:26

yet. How does that resonate with you? Sandra and the young women you see with breast cancer,

**Speaker 3** 29:31

well, just allowing them to make their correct decisions, decision decisions that are right for them. Tanisha and I were talking out in the waiting room. And you know, women will get pressures from outside so much, you know, do this surgery, you should do this or do this additional treatment, and the people have to decide for themselves and take that time. And if something doesn't feel right, then change, you know, make a decision, and if that decision isn't. It doesn't feel right in your heart and in your head, then you can change it. You know, with young women deciding to have their breasts both removed, that's a big thing out there now and, and I think in the moment, it's fear and and when those women have that time to take to choose what's the best decision for them, looking at all the reasons why they're making decisions, and thankfully, out in the world wide web, we have some great resources, some really good supports that are accredited the Canadian Breast Cancer Association. Rethink pink pearl. We've got so many great resources that you can connect them to when they're making those choices and those decisions, to help them so they're not hearing, you know, the voices of the friends and family who aren't in that role, but they're reading and making an informed decision, and it's so important that they make those decisions that feel right for them.

**Speaker 2** 30:51

Yeah, I absolutely agree. I think also, I just wanted to say, like, the supports is so important, right? Like, for me, you know, pink pearl, like, how being around individuals who also shared an experience that I was going through, it made the world of difference. It allowed me to show up and feel like it was okay to feel the things that I was feeling, and as well as move through right because there's the situation that's happening, and you know, you get kind of consumed by it, but it's like, okay, there's other people. I shouldn't I don't have to feel bad for feeling this way or questioning

**Dr. Bill Evans** 31:27

myself. Are you connected with a group of people through pink pearl, yes, as we're experiencing absolutely a cancer journey,

**Speaker 2** 31:33

yeah. And I think that that was, I would say it was very crucial in my journey, I think to connect with people. I think that obviously we talked about it being isolating, and I had, you know, I had supports, but again, like they they didn't understand. And I think I was blessed to have a lot of support, but I think you also still feel alone when it's not people who understand what you're going what you're going through, the lived it exactly emotional roller coaster, like you touched on your physical changes and all the other things that happen. But connecting with a group of women that get it like, you don't have to over explain or try to put on a face, put on a mask, and I feel like that was sometimes a lot of things that, something that I had to do, often pretend to be okay, look okay, like, Oh yeah, you look great. Almost like things while you're crumbling inside

**Speaker 3** 32:20

when you're talking about that looking great and feeling great. I do something called Pink connections. So with the permission of two of the breast cancer young breast cancer women, I'll connect them by any email, and then they connect, and I it's been so successful. There was one group of young women all in their late 20s, early 30s, and they were all going through their chemotherapy at the same time, and they all connected. And they would go out to lunch, and they would rock those bald heads, they would take off their wigs or not wear a hat. And you know, one was going to you do the cold capping, and she chose not to do the cold capping because the other woman were so comfortable, and made her feel so comfortable being there, and no, like you say, having a connection with somebody else who's going through it, because you sit in that waiting room and you know, there you see more older people, if you don't happen to be in on the same day as somebody else. But at the dravinsky, since I started this program, I've seen 112 women under 40 diagnosed with breast cancer. That's in less than two years, and it is overwhelming to see those numbers, and I know it's rising. And having the supports are so important, you know, and even connecting them with cancer Assistance Program, to have the drives, or if they can't afford a wig because they're in school, going there and getting a wig or getting a mastectomy, products and bras for free. It's so helpful to have somebody that can get them to those places, and they have each other as well. It's, it's wonderful to have that connection I hear, yeah, I personally don't.

**Dr. Bill Evans** 33:52

Can imagine Terrific. Well, it's nice to have the feedback too about how the young women are accessing the cancer systems, programs, resources, and it's making that easier on them to get things they need. Yeah, for sure. Now you have something in your your book called The peace framework. Talk to us about that, and what does peace say for in that

**Speaker 2** 34:16

framework? Yeah, so you you touched on it when you were talking about all the letters there. So it's just like, prioritize, right? When we talk about prioritizing what's important to you, like, we can't do all things at all the time, right? So taking a minute, taking a step back, and figuring out, what do you want to first prioritize, right? What is, maybe it's your health. Maybe that's the thing that we've got to start with. It's

34:40

probably a good place.

**Speaker 2** 34:41

Probably the thing that you should start with, but it but what's interesting is that a lot of times it's not right, like, let's be real. Like, a lot of times, sometimes people like, well, I'm going to work, and then I'll, you know, take care of myself, and then I'll go to the gym after I've done this thing. Right? So that's why. It's just good to, like, start with that. Think about what you're actually prioritizing. And then we talk about, like, evaluating right, what's working, what's not working, what do you want more of? What do you want less of? And I think that's important, because you need to be able to understand what you need in order to go forward right and again. Then that's when we talk about align, right? How do we, how do we what are we going to choose, and how are we going to align ourselves with things that we want? We can say we want all of these things, but what are we choosing? What are the choices that we're getting up and making each day? And then the C is for curate, right? And that's curating your environment, curating the world in which you want to live. So that is that action part that is taking those making those decisions, to choose. Well, if I want more, you know, love in my life, okay, what does that look like, right? How do I curate that experience around me? How do I show up for myself? How do I show up for others and like, really taking that time and again, defining all of what all of those things mean to you. And then we talked about the ease part, right? Let it be easy. Let it invite ease into your world. I think we there's so much, there's so much challenge, to say the least, with just about everything, sometimes it feels and how do you make a little bit more space for ease? Maybe it's you wake up 10 minutes earlier. Maybe wake up 10 minutes earlier. Have a little bit have a moment for yourself. Have a cup of tea with yourself in a mug. Not a to go cup

**Speaker 3** 36:38

Tomas. Can I ask you a quick question about your book, because I'm thinking about the breast cancer patients that I see. When would you think a time to talk about a book like that is, is that at the beginning of their journey, more near the end, when they're getting back to their what we call new normal, or what a lot of people call new normal? When would you think your book would be good to help these young women?

**Speaker 2** 37:00

I honestly, I would say it can be at the beginning, and it can be at any point throughout the journey. I think it's going to depend on the individual and where they are and where they were at when they got their diagnosis. I think some people are a little bit more in tuned, or were a little bit more in tuned with, like, their wellness or well being, or have, like, a bit more awareness of, like, where they are and the things that they're doing, whereas some people, like that wasn't necessarily in their in the repertoire of things to do. So I would say it depends on the individual. But I also think it's an invitation, no matter where you are on your journey, that you have a tool, that it's there, that you can reference, because at the end of each chapter, I do have, like, reflection questions. So it's like, even if you're maybe not ready to dive into your finances just yet, you can kind of have a look at those reflection questions. Maybe if you're not quite into, you know, diving into, like, changing the course of, like, your relationships, you can look at those reflection questions and be like, Hmm, I'm gonna come back to this. So I found that some of the resources and some of the events that I attended, I wasn't necessarily ready for them at the time, but I remembered them when I was so it's like, sometimes it's just giving yourself, equipping yourself with the tools, and knowing that it's you have it.

**Dr. Bill Evans** 38:17

Yeah, who's gonna ask the question? Maybe a little differently.

**Speaker 3** 38:21

Sorry to interrupt and taking your job, you can take over

**Dr. Bill Evans** 38:25

and be the editor the podcast by Sandra Turner, whether the book was particularly for people with the experience of cancer at some point in the journey, or whether it was really a book for life for anybody like whether you had an illness or not. Seems to me the things you laid out with the peace framework are really things to guide a successful life, to put, go back to the Word and success again, define the way you were defining it. So it seems to me it had could have a place in either situation, right? Yes, I'm really helping you pitch.

**Speaker 2** 39:03

Thank you. Yes, no, I did write it with, I think anyone in mind. I think everyone can do these things for themselves, to support themselves, to have a better life, or have a more fulfilling life, whatever they define that as. And I think that that's really what it's about. It's how you define it, and taking the time to realize how you are defining your life, and how you are choosing to live your life, looking at the choices that you're making, I think anyone can benefit from, you know, understanding what critical insurance is. And I talk about that, I think that that's important. I think that that's across the board, and I feel like that's what I really wanted to convey, was that these aren't just things to worry about when you're ill, right? This is also preventative, right, from every aspect of your life, right? If we are taking the time to be well regularly, then you know when inevitable challenge come, we already have tools. We already know what it is that we need to fall back. On, but, yeah, I think one of the things that really struck me was, you know, how little people know, and I saw you nodding about the critical insurance and what insurance you have with work, or whether it's school or whatever, what that looks like, because it's very hard, and you're not going to get critical insurance when you need it,

**Speaker 3** 40:20

and cancer and cancer treatment interrupts your job. Absolutely, it costs money, even though we have a health care public health care, it does have public health care system. You know, cost of loss of work, parking, gas to get to your appointments. You know, there's so many things that cost money when you're going through treatment for cancer or any, any serious illness. And I always say that to my patients, do you you you have a home? Okay, check your mortgage. Are you paying for critical illness insurance? Do you have mortgage insurance? Because you need to look at these things or ask your your your employer, what types of insurance you have? Because it is so financially draining on these young people. I think

**Dr. Bill Evans** 41:02

a lot of people think, because we have a publicly funded health care system, there aren't any costs. We've actually done a prior podcast with Chris Longo, who's an economist, and as one of his research areas is looking at the out of pocket costs with cancer, and they've been going up and now roughly about $1,000 a month, which is shocking. You know, when you get into supportive care, drugs and parking and food costs, when you got to go to the hospital and etc, etc, and the lost income, it all is much more of a financial impact and financial toxicity than people really think about in a situation of health. So it's good that people hear these messages, because maybe they they do something a little different, feeling better prepared. Yeah. So where can you where Could someone listening? Get your book, and remember, we've got people listening on five continents,

**Speaker 2** 41:59

yeah. So online, all the major online retailers, so Indigo Barnes and Noble, Amazon, yeah. So any of your book online retailers, you'll be able to get it there. I've, you know, we've, I've sold books as far as Germany. So it is. It's definitely available everywhere on your online on your online retailer. This is

**Dr. Bill Evans** 42:20

where I'm supposed to hold the book up to kick our drill and show the cover. But I don't know where you brought one, but maybe, anyway, we won't do that. But no, I hope it does well for you, and I hope it does well for the people who read it, and I think it's got a lot of good content. And I have to believe that when people are open and transparent as you are, and in describing the experience and how one can live through it and gain from it, it's valuable to others to get those stories and Sandro, you're doing an amazing thing by coordinating all this care that otherwise wouldn't happen for most of these women. What can we do to help support you and the program? And wow,

**Speaker 3** 43:05

you can donate directly to pink through the Hamilton Health Sciences foundation and support this service that's offered to these young people. And you know, some of the things that women have said to me really validate what I'm doing. You know you are my the calm in my storm, or, I don't know how I would have navigated this without you. Thank you. So you know, it's it's very humbling, and I feel very blessed to be able to provide this service. So if people you know, know somebody that went through it and didn't have a care coordinator like myself or someone else that runs the pink program and the other centers that have it, feel free to raise money and support it, because there's not endless funds. Unfortunately,

**Dr. Bill Evans** 43:49

definitely true, and I think more of this kind of coordination needs to occur, and it's not likely to be funded by the public health system at the present time because it's under so much strain just for the basics. So some of these add ons that are so essential to quality care just aren't there. So kinesha, I'm going to leave the last word to you as we wrap up. What message would you like to leave with our listeners?

**Speaker 2** 44:13

Yeah, I think for everyone, anyone that might be listening, I think one thing I just want to say that it's it's okay to grieve who you were. It's okay to grieve the past life that you thought you were going to have, and I think it's also okay to make space for possibility. You know, I know you may have faced one of the most challenging times in your life, but I think if we, you know, give ourselves a space to grieve, but also give ourself the space to embrace what can be possible, and they, I just want to leave them with that, leave them with one more thing, just to reach out for support. You know, whether it's with your program, whether it's with pink pearl, it's it's a much better and easier. Your journey when you're doing it with support, with people who understand, with people who care, and you can again move through the situation so much easier.

**Dr. Bill Evans** 45:10

Those are both very good messages to leave our listeners with, and particularly the possibility that there's something new and positive and exciting that's awaiting you, and you're certainly living that, both through writing your book, but also in the motivational work you're doing with others. So congratulations on those initiatives, and we wish you well in good health going forward. And thank you to both of you for contributing to the podcast

45:33

today. Thank you so much. Thank you.

**Speaker 1** 45:38

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