

What moving across eight countries taught me about survivorship, resilience, and the hidden barriers facing young adult cancer survivors.

When Cancer Changes Everything

Having cancer means that the life you know—your dreams, hobbies, relationships, and plans for the future—may suddenly be put on hold or changed forever.

In 2013, I was 24 years old, living in Costa Rica, newly engaged, and working at my first real job when a painless little bump that suddenly appeared on my neck led to a diagnosis of Hodgkin lymphoma. I was shocked and found it difficult to accept that this would completely change the plans I had made for my future.

My life came to a standstill during the ten months of treatment. I felt betrayed by my body, and because my only reference for cancer came from films, I thought this was the end—party over. Yet even during treatment, I found myself planning and imagining what life would look like afterwards. One of those dreams was moving abroad.

Choosing to Leave Home

Luckily, my partner received a scholarship to study abroad, and that marked the beginning of our post-treatment adventure. We weren't afraid of moving to another country after cancer. At that age, we were fearless—perhaps even a little irresponsible. Not many people would choose to leave behind a familiar healthcare system and the support of their entire family. What if the cancer came back?

We simply wanted to live life to the fullest because, after experiencing cancer, you realise that anything can happen.

At the time, I didn't know that surviving cancer would be only one part of the journey. Learning how to navigate life and healthcare across different countries would become another.

When Survivorship Crosses Borders

Since my diagnosis, I have lived in eight countries. Along the way, I encountered challenges I had never anticipated, particularly how drastically healthcare systems differ and what it takes to access care for the long-term effects of cancer treatment.

Ironically, I have often found it more difficult to access survivorship care than cancer treatment itself.

Every hospital, support group, and even doctor's office operates within its own culture, and local patients are often expected to know how the system works. As a newcomer, I rarely did.

Each move taught me something different—not only about healthcare systems but also about what it means to be a cancer survivor far from home.

Australia: My First Lesson in Survivorship

My first experience living abroad after finishing chemotherapy was in *Australia*. I felt reassured to be moving to a country with a modern healthcare system and expected that continuing my follow-up care would be straightforward.

Instead, I immediately encountered problems with my port-a-cath.

In Costa Rica, ports are generally removed five years after treatment, whereas in Australia, they were routinely removed immediately after chemotherapy. Because I had been treated overseas, there was no clear pathway for maintaining or removing my port. I worried about developing a blood clot because I couldn't have it flushed regularly.

On top of that, my student health insurance excluded pre-existing conditions, including my cancer history. As a result, none of my follow-up care was covered, and I had to fly back to Costa Rica for routine check-ups—a significant financial burden for a young couple living on a single student income.

It was my first lesson that surviving cancer and accessing survivorship care are not always the same thing.



Europe: A New Dream, New Challenges

My next destination was Europe, where I joined my dream *Erasmus Mundus programme*, which allows students from around the world to study at several universities across Europe over two years.

Before leaving Costa Rica, I decided to have my port-a-cath removed, even though my doctors advised against it. In the end, I signed a waiver releasing the hospital from responsibility.

Although removing the port solved one problem, new challenges quickly emerged.

My student health insurance remained limited, and I was not eligible for social security benefits in either Italy or France. I also faced language barriers and varying levels of support from the universities I attended. With every move, I found myself learning a new healthcare system from scratch while trying to continue my survivorship care.

IRELAND: The Hidden Burden of Survivorship

Ireland brought an entirely different challenge.

Several years after finishing treatment, I developed severe anxiety and depression and became convinced that my cancer had returned. Looking back, I recognise many of these feelings as fear of recurrence—a common but often invisible experience among cancer survivors.

At the time, however, I didn't have the words to describe what I was experiencing.

I kept my fears to myself. I didn't tell my classmates, and I didn't tell my family.

Fortunately, I found the support I needed through my university's health service. For the first time, I had access not only to mental health care but also to a cancer support group—something I had never experienced in my home country.

That experience opened my eyes to the importance of mental health care during treatment and, perhaps even more importantly, after it. It changed the way I understood survivorship, teaching me that recovery is not only about physical health but also about learning to live with the emotional impact that cancer leaves behind.

NETHERLANDS: When Support Exists—But You Don't Know It

My final stop in Europe was the *Netherlands*. There, I encountered a healthcare system that was not always easy to navigate as a foreign national, despite the fact that around 20–25% of the population has an international or migration background.

Specialist appointments were expensive, and many support groups and important health information were available only in Dutch. What surprised me most was that, despite informing both my GP and oncologist from the moment I arrived that I had previously been treated for cancer, I was never told that services such as psychological support, follow-up care, or fertility counselling were available.

It was only seven years later that I discovered there was a support group specifically for adolescent and young adult (AYA) cancer survivors.

That experience made me realise that access to care is not only about whether services exist, but

also about whether patients know they are available.

Cancer Doesn't End with Treatment

Over the past two years, I returned to Latin America and lived in Costa Rica, Chile, Peru, and Colombia. Once again, I encountered new challenges, this time related to health insurance.

Because I was moving between countries, I needed health insurance that would cover me across the region. My husband and I applied for the same policy in Costa Rica. His application was approved within hours.

I knew mine would be different.

Although I had been cancer-free for 12 years, I knew that the question about my cancer history would become an issue. A week after submitting my application, I was asked to provide all of my medical records related to my diagnosis and treatment.

I sent everything they requested.

Months later, I am still waiting for a response.

That experience reminded me that, for many survivors, cancer continues to shape their lives long after treatment has ended.



What Living in Eight Countries Taught Me

These experiences have taught me that healthcare systems are still not designed with migrants in mind. This is particularly relevant for adolescent and young adult (AYA) cancer survivors, as this stage of life often includes studying abroad, starting a career, building relationships, and, for many, moving to another country.

Despite paying for healthcare, I often felt like an outsider.

At the same time, I recognise my privilege as someone who migrated by choice. The barriers I experienced are often much greater for people who are forced to leave their countries because of conflict, economic hardship, or other circumstances beyond their control.

Every cancer patient and survivor deserves equitable access to follow-up care, support, and respect, regardless of where they come from.

Living in different countries also transformed the way I understand cancer care and survivorship. I realised that survivorship is not the same everywhere, and getting to know advocacy initiatives in different countries inspired me to find my own voice as both an advocate and a researcher. Today, my work focuses on improving cancer care for everyone, particularly people from underrepresented and underserved populations, including migrants and those living in low- and middle-income countries.

Finding My Voice Through Advocacy

These experiences eventually inspired the creation of the ***OncoDaily Lived Experience Advocacy Hub***, with the goal of sharing knowledge, resources, and opportunities so that advocates everywhere can strengthen cancer care in their own countries.

For me, advocacy grew naturally from lived experience. Every healthcare system I encountered taught me something new—not only about survivorship, but also about the inequalities that still exist for people affected by cancer. Those lessons continue to shape both my research and my work as an advocate.

Would I Do It Again?

Would I make the same decision to move abroad after cancer again?

Absolutely.

I am grateful for the resilience and adaptability I gained along the way. Living in different countries introduced me to resources that were unavailable in my home country, including dedicated mental health services and strong survivor communities. It also gave me a deeper understanding of different cultures, healthcare systems, and the many ways people experience cancer around the world.

Moving abroad after cancer was not always easy. There were moments of uncertainty, frustration, and isolation. Yet every challenge taught me something valuable about myself and about the importance of equitable survivorship care.

As more young people study, work, and build lives across borders, healthcare systems must recognise that cancer survivors do the same. Survivorship should not stop at national borders.

No young person should have to choose between pursuing opportunities abroad and accessing the care they need to live well after cancer.