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WOMEN

## ‘They are not alone’: She helps kids with cancer face their darkest hours with toys

Armed with a bagful of toys, child life therapist Rachel Ho from the Children’s Cancer Foundation is helping young patients and their families make sense of cancer – one play session at a time.



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When words fail and fear takes over, Ducky comes to the rescue. Soft, cuddly, and fitted with a central line, the plush toy dressed in a hospital gown fills the gaps when adults struggle to explain cancer to the children.

Rachel Ho, 40, is often seen walking through the paediatric oncology ward at KK Women's and Children's Hospital (KKH) with Ducky – or some other stuffed toys – tucked in her toy bag. She is a senior child life therapist with the Children's Cancer Foundation (CCF), part of a little-known but impactful allied health profession in Singapore.

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She uses play as a bridge to help young patients and their families navigate the complex world of paediatric oncology and hospital stays. Ducky the stuffed duck, Ho told CNA Women with a smile, is one of the firm favourites with the young patients she works with.

“Play is a child's language,” said Ho, who has spent the past decade in this specialised field. “It's hard for children to talk about what they have gone through or find the words to express how they are feeling. Through play, they process and make sense of what is happening to them in the hospital.”

## ROLE OF A CHILD LIFE THERAPIST

Her role is rare. According to Ho, there are currently around nine certified child life therapists in Singapore, with a handful more in training.

“As a child life therapist, we support the child emotionally in the hospital,” Ho said.

Child life therapists help children and families cope with challenging or unfamiliar experiences, particularly those related to healthcare and hospitalisation.

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For example, Ho might use medical play to explain medical procedures, like chemotherapy or surgery, in child-friendly ways and guide them through coping techniques to ease fear, anxiety or trauma during their hospital experience.





Medical dolls like Ducky, a favourite with young patients, are one of the tools Ho uses in child life work. (Photo: Children's Cancer Foundation)

Ho's journey began at CCF, where she was first a social worker supporting families. Wanting to be more directly involved in supporting young patients themselves, she underwent training to become a child life specialist.

She was trained under guidelines from the Association of Child Life Professionals, a United States-based non-profit that oversees certification in the field. To qualify, she completed online coursework, clocked a 600-hour clinical internship and passed a certification exam.

Like other child life professionals, she is also required to maintain and renew her certification regularly through continuous learning.



Her first stop might be a bedside visit with a newly diagnosed patient or fretful child awaiting surgery. “I’ll introduce myself to the parents and the child, and find out a bit more about the family and the child, and what the child likes to do,” she said.

This helps her assess how to connect: Whether the child responds better to visual aids, toys, or needs time to warm up.





Ho uses medical dolls fitted with specialised medical equipment to explain complex procedures to children undergoing cancer treatment. (Photo: Children's Cancer Foundation)

Child life therapists also work closely with the hospital's multidisciplinary team – nurses, radiation therapists, radiographers and doctors – to figure out how best to support the young patient.

Building trust is key. “The first thing that needs to be done is to build rapport with the child,” Ho said.

“You can’t tell a five-year-old in one sitting that they are sick, that they need to go for surgery, go through chemo, or that they’ll lose their hair. I need to be that safe figure for the child first, to be seen as ‘Auntie or Jie Jie Rachel who just comes and plays with me’ in the hospital.”

central lines because they end up in a central blood vessel in your chest, close to the heart, according to Cancer Research UK.

According to Ho, many children with cancer typically have a central line inserted for treatments such as chemotherapy to be administered. They usually remain in place throughout the course of their treatment.

“Different dolls have different types of central lines,” Ho said. When preparing a child for chemotherapy, she uses the medical dolls to introduce complex procedures and medical equipment in a non-threatening manner.

For instance, she might say: “This doll has a tumour or cancer, and she needs strong medicine over a period of time. The doctors are going to put in something called a central line, so that it’s easier for them to give her medicine.”



Therapeutic cards may be used to help older children and teens process their medical experiences. (Photo: For teenage patients, a child life session may look different. Children's Cancer Foundation)

Her approach and play techniques shift with each child, depending on their developmental age, condition and needs.

For a primary schooler, she might walk through treatment side effects by talking about how Ducky would feel after chemotherapy – “he might experience changes to his body, feel uncomfortable in the tummy or weak in the legs”. Then she gently explains the importance of “telling Daddy, Mummy or the doctors” about how they feel.

Play also helps desensitise the child and reduce anxiety during the actual procedure.

With teenagers, play sessions look very different. Therapeutic cards depicting different emotions or situations are sometimes used to help them process their cancer journey and medical experiences.

Ho may also share with them a compilation of teenage cancer survivor stories, which includes information on side effects and how they can cope.

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## THE EMOTIONAL TOLL WHEN PATIENTS LOSE THE BATTLE

Ho's work supporting children battling a life-threatening disease inevitably carries an emotional weight. "One of the more challenging aspects is definitely dealing with the emotion, and our own grief when we see death or a relapse, especially if the loss is very sudden," she admitted.

Sometimes, a child she shared a play session with only days earlier is suddenly gone due to unforeseen medical complications. "It is very painful and saddens my own heart to witness that loss and the struggle that the families face," Ho said.



Rachel Ho with her three children and husband. (Photo: Rachel Ho)

Working so closely with these children means Ho must find ways to cope with the emotional toll. On the toughest days, Ho leans on her faith or talks to her supervisor for support. "I also exercise after work to let out my energy, thoughts, whatever is pent up," she said.

Most importantly, she allows herself to feel: "One thing that's important is also to allow myself to feel and to cry, have that time to grieve. I'm only human, so I'll just let it out if I have to."

As a mother of three, her children aged seven, nine and 11, are aware of what Mummy's work is like. "I do talk about how we should cherish our life and our time with one another," Ho said.

What sustains her are the moments of joy she encounters in her work. "What helps also is the play itself, because children are not all sad in the hospital – there are lots of happy, happy feelings as well," she smiled.





The playroom at KKH is the “one thing that children look forward to” when they are hospitalised, says Ho. (Photo: Children's Cancer Foundation)

The playroom, she said, is often the highlight of a child's hospital stay, and “one thing that children look forward to and brings them a lot of joy”.

Parents often tell her that a visit to the playroom is what their child looks forward to. “What also brings a lot of joy is when we see them make friends with another patient,” Ho added.

## WHAT WORKING WITH YOUNG CANCER PATIENTS TAUGHT HER

After a decade as a child life therapist, Ho continues to find immense fulfilment in her work even in the most difficult circumstances. One child she worked with taught her lessons about resilience and finding joy even in the darkest moments.

Diagnosed with cancer at around four years old, the child spent years in and out of hospital due to relapses. One of his biggest challenges was radiotherapy sessions.

Most children around that age need to go under general anaesthesia as the treatment requires them to lie perfectly still. They also must go through it without their parents beside them due to radiation safety rules.

“Having to stay really still and not fidget at all can be challenging for very young patients,” Ho said.

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The boy had a deep fear of “the feeling of going to sleep”, so Ho and the medical team came up with a plan for him to stay conscious and have the father read stories through the intercom or play music.

The young patient was able to complete numerous radiotherapy sessions successfully without anaesthesia.

Over the years, the therapist journeyed with the family through the highs and lows. Even as his condition worsened, Ho recalled that his spirit never dimmed.

Towards the end of his life, he created treasure hunts in the hospital ward, filling it with joy and laughter. The family also made countless keepsakes together – handprints, hand casts, voice recordings.

The boy has since died. “But his legacy goes on,” said Ho. “This year, we continued the treasure hunt for other children in the ward.”

As a child life therapist working with children battling cancer, Ho wants them to know “they are not alone” in their hospital and medical journey.

“I hope that children remember that they were supported, heard and valued, that their families, the medical team, their school and CCF stood with them through the challenges.

“I hope that they carry with them the memory of their growth and resilience, and the community that surrounded them,” she said.

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