

Oncology Departments - Where are all the Psychologists?

Joanne Lusher^{1*} and Nathan Faulkner²

¹BPS Chartered and HCPC Registered Health Psychologist Regent's University London, United Kingdom

²BPS Chartered and HCPC Registered Counselling Psychologist Regent's University London, United Kingdom

***Correspondence to:** Joanne Lusher, BPS Chartered and HCPC Registered Health Psychologist Regent's University London, United Kingdom, E-mail: lusherj@regents.ac.uk

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Commentary

Since the dawn of COVID-19, like all other health and social care sectors, oncology departments around the world have been experiencing a significant rise in pressure and demand on their services [1]. For example, in the UK alone, the number of individuals on National Health Service (NHS) waiting lists for consultant-led care has grown exponentially, with almost seven and a half million people currently waiting for treatment [2]. With cancer being the leading and most common cause of death worldwide, oncology services are likely to be feeling the brunt of this pressure. This calls for a need for appropriate mental health support for patients who are experiencing the psychological burden of illness, as well as for healthcare staff who are navigating the growing demands of their jobs. Nevertheless, this does come with a caveat – there is a stark absence of psychologists in oncology departments.

The absence of psycho- in -oncology

Integrative oncology and psycho-oncology are terms that appear in the literature from time to time to play lip service to the way in which cancer patients have their interacting biological, psychological and social needs met as part of a care package. However, the extent to which this field extends to practice in the treatment clinic remains questionable. As one survey illustrates, with over a third of cancer patients reporting that psychological support was not available to them [3]. Whilst rates of undiagnosed mental health issues in the post-pandemic global south have reached heights of 90% [4], governments are failing to fund this supply need by dedicating only trifling proportions of health budgets to psychological aspects of health and healthcare.

Not a single healthcare practitioner or research scholar would admit denying the inescapable reality that mental and physical health are inextricably interlinked; and various initiatives have indeed been documented to showcase how the whole person is being positively addressed in cancer care [5]. It is encouraging to read that integrative whole-person oncology care is being advocated in certain pockets of the sector, however, far more remains to be done to build this momentum and the status quo.

The case of NHS England

Within one recent study [6] exploring the psychological support for individuals diagnosed with haematological cancer, less than half of healthcare professionals who were surveyed agreed that their patients psychological well-being was being well supported. Research exploring barriers to accessing psycho-oncological support have identified challenges such as perceived elitism in who is qualified to refer patients to psycho-oncology as well as a lack of awareness of available psycho-oncological support [7]. Arguing for greater integration of psycho-oncologists within multi-disciplinary cancer care as well as cancer rehabilitation programmes is the need to move away from viewing cancer as a purely biological disease and to outline an agenda for change that reflects a positive movement towards a multidisciplinary approach to cancer care [8].

Why oncology departments need psychologists, and vice-versa

The COVID-19 era marked a defining moment that positioned psychological wellbeing at the forefront of any health agenda. Now, more a time than any other has the importance and relevance of integrating health psychology models and practice into oncology services become more discernible. Health psychology is the field within psychology dedicated to explaining how psychological, cognitive, cultural, and behavioural factors influence why a person becomes ill, how they respond when they do become ill, and how these factors can influence patient-staff relationships and adherence to medical treatment. Practitioner psychologists have an invaluable place in oncology departments due to their person-centred approach to the complexities surrounding the mind-body interconnection that is often overlooked in medical settings where the focus tends to remain firmly situated on the disease.

Receiving a diagnosis of cancer often represents a great deal of uncertainty not only about the immediate future in terms of managing and coordinating patient care, alongside other areas of their life, such as work, family, and friends, but longer-term uncertainty about a patient's health and their future. Psychologists can provide treatment and support to both patients and staff that speaks to the person, rather than the symptom. By acknowledging the person, rather than just the



disease, psychologists offer a holistic view of the whole experience and have the skills necessary to not only support patients in dealing with the mental and emotional challenges associated with their diagnosis, but also to provide an opportunity and ally in considering ways in which they might adapt their lifestyle to support their treatment. Due to the necessary protocol informed approach to pharmacological treatment within oncology, patients often report experiencing their relationship with their oncologist as unidirectional. This can further reinforce feelings of loss of control as well as sometimes overlooking the patients' lived experience of both the direct effects and side-effects of the medication they are receiving to treat their cancer. Finally, acknowledging the role of the psychologist and maximising their use within the wider multidisciplinary team offers psychologists, alongside physical therapists, nutritionists, reflexologists and herbalists the opportunity to play a joint and collaborative role in fully supporting the whole patient within oncology services.

So where are all the psychologists? – it is evident in this post-pandemic era of biopsychosocial, financial and economic strain that the time has undoubtedly arrived for oncology to move away from the ancient Cartesian mindset into departments and services that share a culture of shared practice that embraces a patient-centred and holistic approach to the diagnosis, treatment and whole-person care for individuals with cancer; through a fully-integrated holistic ethos and multidisciplinary lens.

Conflict of Interest

The authors declare no conflict of interest.

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