Psychosocial oncology research: Making change happen



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Health and medical psychology research examines the mental, social and behavioural factors that are related to health and illness. Within this area, the team of research scholars led by Prof. Mahati Chittem in the Department of Liberal Arts at IITH explores topics linked to chronic disease management and health behaviour change.

Our primary area of work is in psycho-oncology wherein we examine the psychosocial, cultural, biological and behavioural aspects influencing the cancer journey from diagnosis to survivorship. We explore three broad domains within psycho-oncology.

First, we study cancer communication, i.e., non-disclosure of cancer diagnosis and prognosis (Chittem, 2017; Chittem et al., 2021), doctor-patient-caregiver communication needs and empowerment (Chawak et al., 2022), culturally adapting existing models of communication to the Indian cancer setting (Chawak et al., 2020), and public health messages regarding cancer prevention and early detection in underrepresented communities (e.g., Nagaland) (Pongener, 2024).

An example of our more current research in this space is exploring the cultural fit of a sexual health communication model called the Permission, Limited Information, Specific Suggestions, and Intensive Therapy (PLISSIT) in cervical cancer survivorship. For this, we conducted large qualitative studies (i.e., in-depth, individual, audio-recorded interviews) exploring perspectives, needs, and experiences of sexual health conversations among cervical cancer survivors, oncologists and nurses.

Our findings shed light on how to design communication skills training for Indian healthcare workers (doctors and nurses), which uses a culturally adapted version of the PLISSIT model to ease conversations about sensitive topics such as sexual health, thus improving patients' psychological and relational wellness.

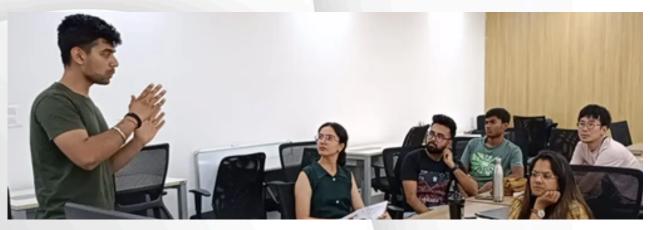
Our second domain in psycho-oncology research examines the supportive care needs of Indian cancer patients and their caregivers (Chittem et al., 2022).

Supportive care needs are broadly classified as psychological, health system and information, physical and daily living, patient care and support, and sexuality.



Using mixed methods (i.e., quantitative and qualitative methods), we study what are the needs that are met, unmet and under-met as per the patients'/caregivers' experience (Namjoshi, 2024).

When a healthcare facility/provider is aware of these needs (and their status in terms of being met), then they can consider resource allocation more effectively and efficiently. For instance, our research showed that parents of children with cancers had 5 main unmet needs, including trying to maintain a 'normal' life, being able to access treatment for their child locally, feeling scared and guilty (about neglecting other children/family) and distress at seeing their child in pain.



We can derive from these findings that healthcare providers need to inquire about caregivers' emotional well-being and the public health system needs additional focus reducing unmet needs among families. So far, we have documented supportive care needs for oral cancer survivors, parents of children with retinoblastoma, parents of children with any type of cancer, adults with any type of cancer, and geriatric patients with cancer.

Ever wondered how groundbreaking medical technology (MedTech) transitions from advanced science and engineering to devices that patients and doctors trust comfortably? That's where our team comes in. Another domain of our work involves collaborative projects with the Departments of Physics, Artificial Intelligence, and Biotechnology at IITH. Here, we focus on psychosocial aspects of developing and integrating medical devices into clinical settings.

We explore the challenges and concerns faced by all stakeholders of the technology/product (e.g., patients, nurses, doctors), beliefs and difficulties of specific medical procedures (e.g., blood draws) for which the technology is being developed, provide insights to the technology team that guide the design of devices (e.g., scanners for venous cannulation), and improve/skill the stakeholders' utilization of the product/research. In MedTech in oncology, we work closely with the team led by Prof. Vandana Sharma in the Department of Physics who focuses on product development and deployment. More recently, we collaborated on the team's development of a 3D vein viewer for administering oncological treatment. Our psychooncology work translates into medical practice (i.e., improving care provision), training (i.e., helping doctors, nurses, patients and caregivers to communicate better), academic programmes (i.e., workshops in psycho-oncology research and therapy), and more research!

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