Leveraging the Changing Landscape to Improve Mental Health Care for Survivors

8th Biennial Cancer Survivorship Research Conference
June 16, 2016 (3:30-5:00pm)

Natasha Buchanan, PhD (Chair)
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Overview

- Reflecting on the History of Mental and Behavioral Health
- Introduction of Panel Speakers & Presentations
- Panel Discussion
- Questions and Answers
1950’s
- Landmark papers: psychological impact of cancer
- Cancer centers increased social work staff
- “To tell or not to tell” debates between psychiatrists and oncologists
- Psychosocial support limited to “self-help groups”

1960’s

1970’s
- 1971 National Cancer Act
- Beginning of “Psycho-oncology”
- Increased training on patient psychosocial support
- Research: psychoneuroimmunology, quality of life, cancer prevention, group interventions, psycho-oncology pediatric studies.

1980’s
- Increased utilization of psychotherapy, behavioral, and complementary and alternative approaches to coping with psychosocial affects of cancer.
- Establishment of the:
  - National Associations for oncology social work
  - Journals examining psychosocial oncology
Survivorship advocacy for psychological care increased

Increased focus on ambulatory psycho-oncology services across the cancer continuum

Creation of NCI’s Office of Cancer Survivorship & Livestrong (Formerly Lance Armstrong Foundation)

Creation of the National Action Plan for Cancer Survivorship: Advancing Public Health Strategies:
- Centers for Disease Control and Prevention & Livestrong

IOM Publications:
- From Cancer Patient to Cancer Survivors: Lost in Transition
- Cancer Care for the Whole Patient: Meeting Psychosocial Health Needs
- Implementing Cancer Survivorship Planning
- Childhood Cancer Survivorship: Improving Care and Quality of Life

Changes in healthcare legislation

Psychosocial care standards/guidelines

Burgeoning Research:
- Psychosocial & behavioral health experiences across periods of survivorship with diverse populations
- Identification of risk and protective factors
- RCTs of psychosocial and behavioral interventions
- Mental health and financial and occupational outcomes
- Models of care and impact on psychosocial outcomes
How far have we come?
Reflections: Practice & Psycho-oncology care

- **1950’s**
  - Mental Health Care providers:
    - Social Workers, Psychiatrists
  - Biological model of care
  - Cancer diagnosis and psychosocial concerns not discussed with patients
  - No routine psychological assessment in the oncology clinical care settings
  - Dearth of integrated psychosocial support and treatment (only self help groups)

- **2016**
  - Mental Health Care providers:
    - Social Workers, Psychologists, Psychiatrists, Nurse Specialists, CADA Counselors, etc..
  - Biopsychosocial model of care
  - Improved, but poor rates of provider-survivor discussions and receipt of appropriate treatment
  - Guidelines/standards for distress screening and billable neuropsychological assessment
  - Multiple psychosocial support, treatment, and intervention options
Reflections: Research & Surveillance

1950’s
- No national surveillance

Research explorations:
- Emotional issues in the etiology of illness
- “Possible” relationship between psychological factors and cancer
- Psychological impact of cancer following surgery

2016
- National surveillance of psychosocial concerns of survivors has improved
  - National Health Interview Survey (NHIS)
  - Behavioral Risk Factor Surveillance Surveys (BRFSS)
  - Childhood Cancer Survivorship Survey (CCSS)

Research Exploration:
- Risk and protective factors and general mental health experiences across the cancer continuum
- Experience and outcomes of culturally, linguistically, and geographically diverse populations
- RCTS of interventions
- Economic burden
- Impact of Models of care on psychosocial outcomes
Current and Future Landscape of Mental and Behavioral Health Care in Cancer Survivorship
 Speakers

- **Elyse R. Park, PhD, MPH**
  - The Affordability Care Act’s Implications for Mental Health Services

- **Lee Ritterband, PhD**
  - Role of Information Technology in Addressing Mental Health Needs of Cancer Survivors: E-health, Evidence based IT interventions, and other IT advances

- **Ruth McCorkle, PhD, RN, FAAN**
  - Tracking and Monitoring Mental Health Before, During, and After Treatment
Panel Discussion

Questions:

- Barriers, facilitators and/or best practices for identifying, monitoring, and treating the psychosocial health care needs of cancer survivors and their families

- What are strategies that we can use to improve effective communication between cancer survivors and care providers about mental and behavioral health?

- Discuss one promising practice, program, or area of research that will be important to the future of effectively addressing the psychosocial needs of cancer survivors?
THANK YOU

The findings and conclusions in this presentation are those of the author and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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For more information about CDC’s public health role in cancer survivorship, please visit:

• CDC’s New Websites on Cancer Survivorship:
  www.gov/cancer/survivorship