

# Measuring Oncology Nurses' Psychosocial Care Practices and Needs: Results of an Oncology Nursing Society Psychosocial Survey

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An estimated 30%–43% of patients with cancer experience psychological distress at some point along the care continuum (Zabora, BrintzenhofeSzoc, Curbow, Hooker, & Piantadosi, 2001). Psychological distress is comprised of physical, emotional, and psychological responses to the diagnosis and treatment of cancer. Additional factors that can contribute to distress include access to care, treatment and resources, ability to work, and being under- or uninsured, as well as the hidden costs associated with care and treatment. Healthcare providers have recognized the significance of distress and the need for change to more adequately address this aspect of cancer diagnosis and treatment (Fulcher & Gosselin-Acomb, 2007; Hawkes, Hughes, Hutchison, & Chambers, 2010; Holland & Alici, 2010; Jacobsen, 2009; Jacobsen & Ransom, 2007). As more people are diagnosed with cancer and become survivors, broader changes are needed for patients, their families, healthcare providers, and the communities in which care is delivered.

The Institute of Medicine (IOM), (2008) released the report *Cancer Care for the Whole Patient: Meeting Psychosocial Health Needs*, which was developed at the request of the National Institutes of Health and outlined unmet psychosocial needs of patients with cancer and their families, the policy and workforce issues, and how psychosocial care should be delivered within the context of the healthcare system. The report comprised 10 broad recommendations (see Figure 1) that are considered key components of quality cancer care. IOM defined psychosocial health services as,

Psychological and social services and interventions that enable patients, their families, and health care providers to optimize biomedical health care and to manage the psychological/behavioral and social aspects of illness and its consequences so as to promote better health (IOM, 2008, p. 9).

An accompanying standard of care (see Figure 2) was developed to help guide a systematic, quality-driven

**Purpose/Objectives:** To develop and implement a survey of Oncology Nursing Society (ONS) members focused on their current practices and needs in relation to providing psychosocial care.

**Design:** Descriptive, cross-sectional.

**Setting:** Web-based survey of ONS members.

**Sample:** An invitation was e-mailed to 11,171 ONS members. Of those, 623 followed the link to the electronic survey and 64% of those (n = 401) completed the survey.

**Methods:** An ONS Psychosocial Project Team was convened in 2009. One of the team's goals was to develop a survey to assess members' needs. The final survey consisted of 24 items, including five items related to demographic characteristics. Response formats included Likert-type scale, yes and no, and open-ended questions.

**Main Research Variables:** Psychosocial care practices, education, and research.

**Findings:** Psychosocial concerns are assessed using a variety of methods. Nurse perceptions regarding primary responsibility for providing psychosocial services differ by group. Barriers to the provision of psychosocial care exist at the individual, institutional, and community levels.

**Conclusions:** Although nurses assess patients' psychosocial needs, multiple barriers still exist related to interdisciplinary communication; knowledge of the Institute of Medicine's recommendations; and resources at the individual, institutional, and community levels.

**Implications for Nursing:** The survey results were presented to the ONS Board of Directors, along with a three-year plan that included recommendations for future development of advocacy, practice, education, and research initiatives. Additional work is needed to effectively support RNs in their provision of psychosocial care to patients and families.

care approach that healthcare providers could begin to incorporate into their practice.

The Oncology Nursing Society (ONS), as a key stakeholder in the realm of nursing practice and a professional organization representing more than 35,000 RNs and other healthcare providers, has long been an advocate of psychosocial care. Publications and a variety of