Project Details	
Project Code	MRCPHS24Ex Price
Title	Understanding and addressing inequalities in the cancer diagnostic pathway for people with anxiety and/or depression
Research Theme	Population Health Sciences
Summary	This multi-disciplinary PhD builds on Exeter and Cardiff research aiming to advance our understanding of the barriers, facilitators and decision-making processes for people with anxiety and/or depression who are referred by their GP to secondary care for cancer tests. This high-quality, practice- and policy-relevant research aims to develop an intervention to reduce inequalities in the cancer diagnostic pathway experienced by people with anxiety and/or depression.
Description	Background Pre-existing anxiety and depression are associated with poor cancer outcomes. Our SPOCC Study (SPOtting Cancer among Comorbidities, NIHR201070) reports diagnostic disadvantage among patients with anxiety and/or depression, with these patients more likely to visit their GP three+ times prior to referral, be diagnosed via non-urgent referral (i.e. via emergency departments), and die within 30 days of diagnosis. This suggests that barriers to accessing the cancer diagnostic pathway in the transition from primary to secondary care could be one factor contributing to poor outcomes. Patient and Public Involvement for the OSCA study (NIHR School for Primary Care Research grant 641) highlighted influences of cancer fear/fatalism conflating anxiety and low mood/motivation due to depression (unable 'to get out of bed'). Pilot interviews from the OSCA study will inform the development of a survey instrument for use in choice modelling in this PhD. Research question Does anxiety and/or depression impact decision-making processes to attend secondary care for testing following primary care referral for suspected cancer? If so, how does anxiety and/or depression impact decision-making and what interventions can we develop to facilitate attendance in secondary care? Aims This multi-disciplinary PhD builds on the SPOCC and OSCA studies, aiming to advance our understanding of the barriers, facilitators and decision-making processes for people with anxiety and/or depression who have been referred by their GP to secondary care for cancer tests. This high-quality, practice- and policy-relevant research aims to develop an intervention to reduce inequalities in the cancer diagnostic pathway experienced by people with anxiety and/or depression. Objectives 1. Systematic review of the literature on interventions to facilitate access to cancer and non-cancer healthcare services in people with anxiety and/or depression. 2. Choice modelling to identify cancer diagnostic strategy preferences in people with anxiety and/or depression with survey items tested for face validity in think-aloud interviews. A purposive sample of survey respondents will be invited to qualitative in-depth interviews to explore decision-making in more depth. 3. Intervention design to reduce inequalities at the primary and secondary care interface for people with anxiety and/or depression using established approaches (e.g. Behaviour Change Wheel) and underpinned by the MRC framework. The developed intervention will be tested for acceptability with potential users (i.e. patients and/or health professionals). Student ownership Throughout their PhD, the student

	will have ownership of: - The focus of their research (i.e. which cancer site(s) to focus on) - Study design (i.e. application of new methods to estimate preferences (e.g., by estimating individual preferences first and from that inferring aggregate preferences (Loria-Rebolledo, Ryan and Krucien, presented at Health Economics Study Group, Oxford, June 2023) to more accurately model the diversity of responses) - Selection of methods (i.e. intervention development framework e.g., Behavioural Change Wheel or Intervention Mapping) The student will be supported by the supervisory team to make decisions that are data-driven (i.e. via their systematic review, and emerging findings from OSCA and SPOCC), to align with the rapidly changing policy context, and their training needs.

Supervisory Team

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