The Shared Decision-Making model is a reformed method of choosing a cancer treatment. It combines inclusivity, autonomy, education, and clear communication between a provider, a patient, and a caretaker. Oftentimes, providers will prescribe a treatment without having a thorough conversation with the patient about alternate treatment options, what to expect with the prescribed treatment, or how it may impact their lifestyle choices. Furthermore, caregiver abilities, needs, and expectations are oftentimes overlooked or ignored in the treatment decision-making process as well. Lack of dialogue between the patient, doctor, and caregiver can lead to feelings of isolation and unpreparedness for what a particular treatment entails. Shared Decision-Making ensures patients and caregivers can make well-informed decisions at a time when very little may seem within their control. With further education, oncology social workers can use the Shared Decision-Making model to better advocate for and empower their patients and caregivers.

### Background: Does Doctor Know Best?

When someone is diagnosed with cancer, they are immediately faced with many difficult questions. Some of these questions include, but are not limited to:

- What are my treatment options?
- What side effects will I face?
- How will my diagnosis affect my immediate family?
- How will this affect my future?

Even though these questions may be pressing, the patient-provider relationship has typically consisted of a one-sided dialogue between the provider and the patient. This can create a dynamic that makes it difficult for patients and caregivers to obtain needed information and ask questions to learn more about their diagnosis. The idea that “doctor knows best” has been normalized, meaning whatever information the medical team presents to the patient is the only relevant information for the patient to know.

### Presentation Goals

- Educate oncology social workers unfamiliar with Shared Decision-Making about why this model is important for the doctor-patient relationship.
- Train oncology social workers to implement Shared Decision-Making in their own medical settings. Oncology social workers can guide patients by walking them through a personal decision guide or posing similar questions for them to answer.
- Guide oncology social workers in educating other medical team members about Shared Decision-Making. This will encourage doctors and nurses to communicate clearly with patients and caregivers about the treatment process and all possible side effects.

### Understanding the Diagnosis

1. **Medical professionals explain diagnosis clearly.**
2. **Medical professionals explain treatment process to patients.**
3. **Patient has input into decision making process.**
4. **Patient has been informed about alternate treatment options, if they are available.**

### Exploring Options

1. **Patient is provided with list of alternate treatment options.**
2. **All treatment options and side effects are presented.**
3. **Patient understands all the treatment options and their side effects.**

### Valuing Patient Input

1. **The patient’s lifestyle, values, and goals are deeply considered.**
2. **Patient and caregivers are provided with written aids or other tools to facilitate discussion.**
3. **Patient/ caregivers are able to discuss treatment options with their provider before making a decision.**
4. **Discussed with your caregiver or patient clients about alternate treatment options if they are dissatisfied with the treatment.**
5. **Encouraged your caregiver or patient clients to write down questions for the medical team and take notes during the appointment.**
6. **The patient’s wishes/values/preferences are so they can go into conversations with her team and get the support that both she and her son are hoping for.”

### Oncology Social Worker Role

- **Guidance on Decisions:** Directs patient and caregivers through Shared Decision-Making, aligning treatment with lifestyle and values.
- **Values and Goals:** Strengthens connections by exploring personal and cultural values, aligning treatment with lifestyle and values.
- **Communication Aid:** Helps articulate patient and caregiver preferences to entire healthcare team.
- **Empowers Patients:** Amplifies patient voices in treatment decisions, promoting autonomy and treatment adherence.
- **Support System Strengthening:** Bolsters patient support by engaging caregivers in the treatment discussion.
- **Inclusivity and Trust:** Contributes to safer environments for BIPOC populations and LGBTQ+ identifying individuals, whose needs and concerns are oftentimes overlooked in the medical field.

### Conclusion

While Shared Decision-Making is an inclusive and equal approach to treatment decision-making, there is minimal and outdated information about how it could be utilized in oncology, particularly by oncology social workers. Oncology social workers could play an even more integral role by educating medical team members, patients, and caretakers about Shared Decision-Making and guiding patients and caregivers through the process with a decision-making tool. This type of education would promote further health equity within the medical facility by providing support to vulnerable populations (BIPOC, LGBTQ+) while respecting and valuing patient autonomy. This does not require a complete overhaul of existing patient provider dynamics. Rather, it can include a clearer role of a social worker in harnessing patient autonomy and empowerment to create a more dynamic, communicative relationship between doctors, patients, and caregivers.