

Coping strategies for managing neurocognitive impairment among non-CNS cancer patients at a tertiary hospital in Gauteng

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Background and Objectives: Neurocognitive impairment, often referred to as cancer-related cognitive impairment (CRCI), is increasingly recognised among patients with non-central nervous system (non-CNS) cancers. These impairments affect memory, attention, executive functioning, and processing speed, compromising daily functioning and psychological well-being. Despite growing global evidence, research remains limited in the South African context, particularly regarding how patients cope with these challenges. This study aims to explore the coping strategies used by non-CNS cancer patients experiencing neurocognitive impairment at a tertiary hospital in Tshwane and to examine their impact on daily functioning and psychosocial well-being.

Methods: A qualitative interpretative phenomenological design was used to explore patients lived experiences. Purposive sampling recruited 6–10 adult participants diagnosed with non-CNS cancers who self-report neurocognitive impairment. Data were collected through semi-structured interviews conducted in English and Setswana. Interviews were audio-recorded, transcribed verbatim, and analysed using thematic analysis with NVivo software. The study is guided by the Transactional Model of Stress and Coping.

Results: Preliminary findings indicate that participants use both problem-focused and emotion-focused coping strategies. Problem-focused strategies include memory aids, structured routines, and task simplification, while emotion-focused strategies include social support, acceptance, and stress reduction. Social support, particularly from family and healthcare providers, facilitates adaptive coping. However, gaps in psychoeducation and limited access to cognitive rehabilitation services remain barriers.

Conclusion: Findings highlight the need for integrated psychosocial and cognitive support within oncology care in South Africa. Promoting culturally relevant coping strategies may improve patient outcomes and support holistic cancer care.

Keywords: Neurocognitive impairment; integrated mental health care; non-central nervous system cancers; coping strategies; psycho-oncology; clinical psychology