Be more and do more – multitasking in daily life and multitasking in health

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We are all accustomed or well-versed in taking on a multitude of roles in pursuit of our valued life goals. This modern approach to living can lead to many great rewards as well many daily hassles and nuisances; for some of us at times, even misery! It is a challenge to meet demands associated with each of these roles and we all may find ourselves falling short at times or failing to do a great job at our various tasks. Multitasking in everyday life is the norm and for most of us this is to a great extent a life choice. Interestingly, resources and policies (e.g. flexi working times) have been set in place to facilitate and empower us to continue with this way of living.

In the domain of health, multitasking and dealing with many competing demands is also the norm. Given the demanding and busy nature of coping with chronic illness, in this special issue we sought to focus on aspects chronic illness that extend beyond medical treatment. We wanted to convey a more holistic conceptualization of chronic illness that fits with the aims and scope of the discipline of Health Psychology. Our articles in this issue aim to reflect the complex nature of chronic illness across the illness trajectory, with papers about symptom management and acceptance (Kostova, 2014), multimorbidity and the struggles associated with it (Griva, Lee and Kang, 2014; Mc Sharry, 2014; McBain et al 2014) and the issues associated with continuity of care (Corbett and Ivers, 2014). Illness - in particular chronic illness - does not simply exist within the walls of the hospital, but rather extends into the community and everyday life of those who live with it.

People with chronic illness (and often with multi-morbid chronic illnesses) are called to negotiate their life roles whilst managing and regulating multiple coexisting conditions and related treatments. Difficulties in acceptance and coping strategies can severely impact the quality of life of these patients, leading to poorer outcomes. The clusters of coexisting illness are numerous: long-term conditions with vascular complications, coupled with conditions associated with degenerative ageing processes (i.e. dementia or arthritic conditions) to be further aggravated by mental health conditions that typically accompany ill health. These issues impose heavy and complicated workload of demands that may outweigh both capacity and/or other resources of the individual, and the systems where individual lives. It is of note that, while the vast majority health care service users today have multiple and complex health care needs, health care systems and services are not well designed for patients with long term chronic and co-morbid illnesses.

Care fragmentation plagues our systems. Health Psychology research has similarly been dominated by single disease focus. However, this is now changing, with a surge of recent work on multi-morbidity and quality of life in chronic illness. This issue is brought together to outline perspectives on chronic illness. The papers highlight the challenges for patients of living with long-term, complex and intertwined conditions and the challenges these present for health psychology research.

We hope you enjoy this issue!
References

Corbett, T., & Ivers, M. (2014). Health Psychology and life after cancer: Recognizing the need for continued support. The European Health Psychologist, 16(6), 234-239.


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