

Do we need Spiritual and existential needs in elderly care? – An empirical research

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In 2000 WHO¹ defined that palliative care shall include four cornerstones to which care providers should pay special attention; The patient's physical, psychological, psychosocial and *spiritual* needs. Searching through the literature we found few research attempts that shed light over the topic of spirituality in elderly care².

The aim of this paper is to discuss the existential and spiritual issues in a care situation with elderly people. The presentation will include an empirical study conducted to investigate the need of spiritual and existential reflection entailed in elderly care context, seen from the subjective perspective of the patient³, health care staff and relatives at Cathinka Guldberg centre, a nursing home in Oslo⁴. The focus in this small scale-study was on the existential and spiritual needs and experiences of patients who are 85 years or older, living in a nursing home, as they face death from a developmental perspective.

The last part of the presentation will be a 7 min. short DVD / video, showing the need of investigation, reflection and discussion of existential topics, among some of our elderly patients at the Nursing home in Oslo.

Methods:

The first part of the presentation will be a general theoretical reflection on aging seen from a philosophical point of view.

¹ WHO http://www.who.int/3by5/en/palliativecare_en.pdf

² A search in the Proquest on the keyword "palliative care", "existential", and "spiritual" gave only 8 results. Leaving out "palliative" in the search extended the number to 24.

³ The indoor patients have diverse social background. However, they all share the same need of health care. A major part of the patients has college education (59,2%) and 7,4% has a university degree or equal. Average age is 86,4 year. The major group of patients are above 90 years old (32,8 %). Average living time at the nursing home is 3.5 year. 39,7 % of the patients have a psychological diagnose or symptoms of depression.

⁴ In elderly care context experiences related to end of life situation includes a variety of existential issues. A recent explorative research study undertaken in Sweden (Bolmsjö, Hermeren, Ingvar; 2002) concluded that existential concerns are of great importance to those who are terminally ill, but these matters are seldom brought into focus in the care of patients.

The second part will be a presentation of a small scale study. This information was collected from structured conversations focusing on the participants reflections on existential issues. The sessions were tape-recorded⁵. The main questions were:

- a. What are the experiences, thoughts, and / or problems regarding existential and spiritual matters for the oldest old?
- b. What are the expectations regarding their own role related to others role concerning such matters?

The topic list was compiled from both elderly care literature and existential therapeutic literature, and was discussed with an expert of the field⁶.

Result: All participants had existential experiences related to own or others end of life situation. From the patients perspective it involves a great extend of dependency and restriction of freedom, as well as a struggle of daily life and survival. All participants had thoughts about the future, in particular the dying process, and reflection on their relations with relatives and significant others, including concerns about family and children and grandchildren. All patients were older than 85 and expressed that their lives were overdue, and they wanted to die in the near future. However, these statements were paradoxically contradicted by their future plans⁷. Rationally all patients knew that the forthcoming death was just around the corner, but they felt and lived emotionally as their own death was something far away in distant future. Existential and spiritual well-being was considered an important component of their mental health.

Ethical considerations: The Norwegian Research Committee of Medical Research ethics was sought for an ethical approval of the study.

Publication: A first theoretical paper of these issues was presented at the 1. International congress of Gerontology, Lisbon 23. October 2006⁸. A second practical presentation is to be given at the 19. Nordic Congress of Gerontology, May 2008.

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⁵ In this research, the method of organising and analysis the present phenomenological data was derived from Moustakas (1994:121), and the material was analysed with the aim of finding central themes in the informant's experience of spiritual and existential needs in a care setting.

⁶ Priest and psychotherapist, Staffan Engström, St: Lukas in Karlstad, Sweden.

⁷ Woman 98; "I will like to buy myself a new fur against the winter cold".

⁸ By P. H. Axell

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