

## Original Article

# Training Intervention for Health Care Staff in the Provision of Existential Support to Patients With Cancer: A Randomized, Controlled Study

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## Abstract

**Context.** When a patient receives a cancer diagnosis, existential issues become more compelling. Throughout the illness trajectory, patients with cancer are cared for in oncology wards, by home care teams or in hospices. Nurses working with these patients are sometimes aware of the patients' existential needs but do not feel confident when discussing these issues.

**Objectives.** To determine the effects of a training intervention, where the focus is on existential issues and nurses' perceived confidence in communication and their attitude toward caring for dying patients.

**Methods.** This was a randomized, controlled trial with a training intervention comprising theoretical training in existential issues combined with individual and group reflection. In total, 102 nurses in oncology and hospice wards and in palliative home care teams were randomized to a training or non-training group. Primary outcomes, confidence in communication, and attitude toward the care of dying patients were measured at baseline, immediately after the training, and five to six months later.

**Results.** Confidence in communication improved significantly in the training group from baseline (before the training) to both the first and second follow-up, that is, immediately after the training and five months later. The attitude toward caring for the dying did not improve in the training group.

**Conclusion.** This study shows that short-term training with reflection improves the confidence of health care staff when communicating, which is important for health care managers with limited resources. Further studies are needed to

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*Accepted for publication:* January 28, 2013.

explore how patients experience the communication skills of health care staff after such training. *J Pain Symptom Manage* 2013;46:785–794. © 2013 U.S. Cancer Pain Relief Committee. Published by Elsevier Inc. All rights reserved.

### **Key Words**

*Existential support, nurse, palliative care, training, education*

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## **Introduction**

Living with a life-threatening illness means living with the knowledge of a limited future and involves suffering and deterioration in quality of life.<sup>1</sup> Existential issues refer to concerns about human life, such as meaning, freedom, loneliness, and death.<sup>2</sup> Challenges such as these arise when a person is facing death.<sup>3</sup> These issues, including spirituality and religiosity, are well recognized as factors that affect the patients' quality of life, quality of care and satisfaction,<sup>4</sup> and need to be addressed by those close to the afflicted person, that is, relatives or health care professionals.

In a study that explored hospice patients' suggestions regarding professionals' spiritual training, it was found that patients expect that health care professionals feel comfortable when discussing existential issues with patients and address these concerns sensitively.<sup>5</sup> Affirmative relationships enable patients to identify their inner resources. The expectation among patients at the end of life that a good death includes open communication also was found in a qualitative study.<sup>6</sup> Relationships and communication are the key elements in dialogues dealing with existential issues. This is acknowledged in a metasynthesis, where spiritual care was synthesized to be relational, provided in a relationship with others and with a focus on presence, journeying together, listening, connecting, creating openings, and engaging in reciprocal sharing.<sup>7</sup> The importance of confirmation in communication has been acknowledged by Näden and Saeteren,<sup>8</sup> where outer confirmation was found to involve being understood and being taken seriously and inner confirmation involves maintaining human dignity and human worth. Although patients with cancer have a desire to discuss existential issues,<sup>9</sup> health care staff found it difficult to respond to the patients' demands.<sup>10,11</sup> In a study of 355 oncology nurses,<sup>12</sup> it was found that age,

length of experience as a nurse, and experience of caring for dying patients influenced the nurses' attitudes; older and more experienced nurses had a more positive attitude. Besides age and previous experience, personality traits, such as a sense of coherence, also could influence the health care professionals' attitude toward working in palliative care.<sup>13</sup>

Interviews conducted with patients receiving palliative care and with palliative care professionals addressed the question of optimal content of end-of-life discussions. Existential issues were found to be important although health professionals did not feel that it was their role to discuss such issues and preferred openness and being able to listen to the patients' concerns.<sup>14</sup> Another study involving health care staff from a number of cancer care units showed that although the staff is aware to some extent of which existential issues are important to patients with cancer and how those issues should be approached, they often fail to take the initiative to discuss these issues.<sup>11</sup> A knowledge overview from the Swedish National Board of Health and Welfare states that there is an extensive need for training and support for health care staff in palliative care, including how to talk about death. The staff also requires support to satisfy existential needs and training to meet the general needs of dying patients.<sup>15</sup>

The literature also indicates that training for health care staff in existential issues is insufficient and that there is a vagueness regarding their role.<sup>16,17</sup> A study involving health care staff at nursing homes found that they expressed a fear of death. The staff attempted to keep death at a distance by concentrating on practical tasks, avoiding elderly patients who were dying, and not becoming involved on a deeper level in the life situations of the elderly.<sup>18</sup> In an integrative review of the research literature in the existential area related to

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