

Attitudes of elderly Korean patients toward death and dying: an application of Q-methodology

Eunja Yeun*

Department of Nursing, Konkuk University, 322, Danwol-dong, Chungju, Chungbuk, 380-701, Republic of Korea

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Abstract

The aim of this study was to identify the attitudes of elderly Korean patients toward death and dying using Q-methodology to aid in the development of basic strategies for nursing care of elderly Koreans. Thirty participants at a university hospital sorted 40 selected Q-statements on a nine-point scale. Data analysis identified three types of attitudes toward death and dying in elderly patients in Korea: religion-dependent, science-adherent, and sardonic. Religion-dependent elders are highly dependent upon religion as evidenced by their reply that they would like to rely on God and a minister the most. Science-adherent elders have great affection for life and believe in modern medical advancements. The sardonic elders regard death as the dispensation of nature so there is no need to be afraid of death and dying. This study will contribute to the understanding that nurses and other health professionals have of the perceptions of elderly Koreans about death and dying. Also, the findings may provide the basis for the development of more appropriate strategies to improve death and dying education programs of health professionals.

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1. Introduction

The perception of death and dying differs between individuals and the resulting behavior when facing death is diverse and complex (Morgan, 2001), varying with sociocultural background, time and place of death, and individual values, philosophy, and behavior toward life (Cicirelli, 1999; Depaola et al., 2003; Fishman, 1992; Johnson and Bourgeois, 2003). Understanding the experience of death and dying has been approached scientifically, but arguments about death itself have continued since ancient times (Lee, 1970; Morgan, 2001). If death is considered an inevitable stage in life,

how we accept death is a very important developmental issue. Further, it is important to design studies that allow scientists to examine the cultural aspects of death-related customs and attitudes. Caring for dying people requires that attention be provided to the individual perception of his/her experience.

Most studies on death and dying in Korea have utilized questionnaires developed in Western societies (Cho, 1976; Han et al., 1990; Kim, 1978; Park et al., 1984; You, 1974), and the items in these questionnaires do not reflect Koreans' feeling or attitudes toward death and dying. There have been few reports on the subjective meaning of death and dying among healthy elderly Koreans (Kim, 1994). Because death is an extremely subjective and unique experience, it is important to try to understand the subjectivity of death and dying (Yeun and Kim, 1998). Q-methodology allows the researcher

*Tel.: +82 43 840 3951; fax: +82 43 851 9329.
E-mail address: eunice@kku.ac.kr (E. Yeun).

to elucidate and explain a person's subjective experience by objectifying his/her perceptions (Kim, 1990, 1996).

Understanding and developing an efficient health delivery system for elderly persons has become an emergent social problem in many societies including Korea, because of the increasing elderly population and the complexity of degenerative diseases (Park et al., 2004). Therefore, nurses, as providers of health care, must possess an in-depth understanding of health behavior, the experience of diverse health problems, and especially changes in attitudes toward aging and death (Jacelon, 2002). The present study explored the attitudes toward death and dying among hospitalized elderly patients within the context of the Korean society.

2. Aim

The aim of this study was to identify the perceived attitudes of elderly patients toward death and dying, to understand the structure and characteristics of perception based upon attitudes, and to obtain baseline data to improve the education of nurses and health professionals on death and dying.

3. Background

Since birth, the human has an inseparable relationship with death (Morgan, 2001). What distinguishes humans from other life forms is that we are aware of death and therefore live a life in which death is inevitable. Traditional philosophies attempted to address death by dealing with the life and extinction issue, but they were not able to deal with death seriously (Chung, 1980). In the 19th and 20th centuries, people's interest in their lives increased and existential philosophy came to the fore, making death something to be confronted rather than something to be avoided (Chung, 1980; Lee, 1970; Morgan, 2001).

Contemporary Korean people's attitudes toward death and dying can be identified as either traditional, as represented by the Buddhist ideology, or Western, as represented by Christian ideology (Lee, 1970). The Korean view of life and death is placed in between these two ideas. Many Koreans view death as liberation from life (Lee, 1979), and as the Atonement for one's sins. That is, death saves people from the troubles they face in this world, and hence these people palliate death and wish for eternal peace (Lee, 1970, 1979). Moreover, death is viewed as the beginning of eternal life as well as realistically the greatest loss. Through the process of death and dying, humans gradually experience physical, psychological, and social deprivation that leads to fear and loss of hope, and reveals various psychosocial needs (Ro, 1986).

Korean studies (Kim, 1978, 1994, 2000), using structured questionnaire and phenomenology, interpreted the meaning of death as a final, natural process of life for elderly people, and reported their feeling more pain from parting with the things they love than from death itself. In other words, elderly Koreans tend to believe in actualizing one's death, giving up roots of life, depending on God, and accepting human limitations (Kim, 2000). Yoon (2000) asserted that there are various factors, such as faith, educational, background, and the experience of the loss of a loved one, which affect the level of acceptance of death by the elderly.

An examination of attitudes toward death and dying reveals diverse changes even within individuals, ranging from avoidance, denial, and disquieting resignation to acceptance. In addition, attitudes toward death and dying may vary depending on the individual's health status, age and gender, religion, philosophy, culture, concept of family, and personal experience (Cicirelli, 2001; Depaola, et al., 2003; Fishman, 1992; Johnson and Bourgeois, 2003; Thorson and Powell, 1988, 1990). Educational level may also influence attitudes, with the fear of death decreasing with increasing educational level (Devich et al., 1990; Lester et al., 1974; Yoon, 2000). Coping with disease and death is a highly individualized experience, which is influenced by the culture, religion, morality, and values of the individual (Bookwala et al., 2001; Lockhart et al., 2001; Robinson and Wood, 1983; Vincent, 2001; Viney, 1983). All these studies suggest that attitudes and opinions about death and dying vary with the type of death, circumstances under which the death occurs, sociocultural background, religion, philosophy, values, and experiences.

4. Method

4.1. Research design

This study was conducted applying a Q-methodological approach to explore and describe the attitudes of elderly patients toward death and dying.

4.2. Q-methodology

In order to understand elderly patients' attitudes and perceptions toward death and dying, Q-methodology was used. Q-methodology is based on abductive logic and self-psychological credo (Stephenson, 1967). This methodology provides a scientific method for identifying perception structures that exist within certain individuals or groups. Therefore, the focus is peoples' attitudes and perceptions that have been gained from personal experience (Kim, 1996). Because Q-methodology deals with the measurable subjectivity of the

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