

THE IMPORTANCE OF RESPECT AND DIGNITY IN END-OF-LIFE CARE

Relevance of choosing the topic/ Abstract

End of life care has become a risen issue in healthcare practice around the corner.

Special emphasis needs to be given in giving respect and maintaining dignity of patient's near their death in palliative care. I choose to carryout literature review on this topic to understand the depth of understanding in the medical fraternity and nursing caregivers when it comes to providing importance of respect and dignity for patients in end of life stage. End of life is defined as any patient about to die during hospital care or having medical treatment. It has been found that most of the patients near their death suffer from emotional stress, like loss of respect and dignity in society. They constantly curse themselves and want to end their lives as soon as possible. Relevant understanding and sensitization of this issue needs to be highlighted among the caregivers and medical specialties. The end of life care involving providing respect and subsequent dignity needs to be sensitized among the people close to patients. Most of the patients such as cancer patients, dementia patients, AIDS patients suffer from loss of respect and dignity. During literature review it has been found that the loss of respect and dignity do alters the treatment outcomes. Hence, it is very much important to provide subsequent emphasis towards providing better care in end of life cases.

Research studies have found the lack of interest towards this issue in most of the caregivers in countries both, developed, as well as developing, or under developed.

Like, in India, the caregivers in hospitals do disrespect patients from hepatitis C cases,

AIDS cases etc, due to social stigma attached to it. Disrespecting patients in such cases is very common in hospital premises and this affects the treatment outcomes. Western world is worse in providing care to not only life threatening patient cases but also to patients who are admitted due to an old age, when it comes to providing dignity and respect. Therefore,

Necessity at this stage is to give importance in providing relevant dignity and respect to a patient not only under palliative care but also to the family members of a patient after his death. Therefore, I have chosen this topic as it has logic to carry out literature review and develop a critical understanding towards importance of respect and dignity in end of life (EOL) care.

INTRODUCTION

Patient dignity means showing to patient that world cares about their position and that they have value in life, respect and dignity is what they have full right (Kennedy, 2016). Dignity is about small things that are extremely important (Logan, 2012).

Dignity is somewhat very personal to a patient's life. It is something which they deserve, no matter what position and in what situation they are in their lives (Dignity in care, 2013)"

Providing care to the patient, does involves maintaining the respect and dignity for a patient during hospital stay or in hands of healthcare practitioners care. This is one of the major principles of palliative care, the one which we cannot ignore. However, looking at the present trends followed in healthcare premises, the quality of care phrase seems to lose its relevance among healthcare practitioners (Kennedy, 2016). The need of proper respect and dignity doesn't ends when an individual enters in the care of healthcare practitioner, it somehow increases strongly among the patients, moreover among the chronic illness patients (Respect and Dignity, 2016).

Dignity originates from two Latin words, dignitus and dingus, which means merit and feeling of worth. The international committee of Nurses and code and ethics highlight that dignity doesn't ends when an individual becomes a patient. Moreover, it doesn't gets biased based on age, caste, creed, sex, ethnicity of the patient (Kennedy, 2016).

Dignity and respect in life or in end of life care is not about just providing treatments for particular disease the patient is suffering from. However, its moreover a holistic care, which the patients desire for. Supporting the patient during hos care in terms of emotional support and care for his family members, adds to the responsibilities of healthcare practitioners in order to achieve the goal of holistic care. Quality of life care is a phrase which redefines the care provided by healthcare practitioners to a patient in their care premises (Kennedy, 2016).

A normal individual who could look after himself personally suddenly feels dehumanized when he becomes a patient and has to move here and there to get proper treatment. The need of human approach while getting care becomes stronger enough, which needs to be understood, in order to fill the gap of missing on important care required during hospital stay. The care extends to the

complete treatment goals after the hospital stay too. This is the true meaning of giving quality of life care when it comes to understanding the importance of dignity and respect (Frampton, et al., 2008).

The phrase, “Care is a very intimate thing. The person who is closer to the patient, while providing care, the patient develops intimate relationship with the person. This is the importance of providing same amount of respect and dignity to the patient (Dignity in care, 2013).” truly explains the virtue of respect in intimate care at the end stage of patients.

Providing care with dignity holds very much importance in overall quality of care received by the patients. Caring about the physical needs alongwith caring about the emotional needs of the patient, both hold equivalent importance in providing a holistic care to patient. The care doesn't ends to patient itself, it however extends to his or her family members too (Kennedy, 2016).

(Respect and Dignity, 2016) suggests numerous ways of providing care with respect and dignity. It often includes the miniscle details about the patient, which can be added to the goals of overall holistic care in the end of life care.

These are,

- a. Respecting the patients privacy.
- b. Respecting his or her emotional and physical needs.
- c. Providing complete space with dignity and honor while handling the patient during care, these includes, helping him or her via closing doors during dressing or undressing procedures.
- d. Knocking the closed door when patient is resting in the room.
- e. Respecting the confidentiality of information of patient. Not discussing his information with others, and family members. Respecting the condition that doing so would hurt the patient deeply.
- f. Handling and caring the patients minute details, his wake up time and sleeping time.

Communication holds high importance during patient care. A good communication amalgamated with sympathy and empathy towards patient and his family members is very much importance. Choosing right words, which don't harms the patients emotional state is a necessity in caring the patient during end of life care and also in terms of quality of life care (Kennedy, 2016).

Maintaining the space during care s required in order to fulfill the goal of quality of life care. Understanding the age of patient holds equivalent importance. Behaving with the patient keeping these two logical points is required by the healthcare practitioner. Cases such as cancer patients, AIDS patients or Chronic illness patients shall be allowed to live normally. This is required to make them feel that everything is normal with them. Caring in such a manner which doesn't gets biased due to the condition or case of the patient holds the ultimate quality of care provided to a patient (Kennedy, 2016).

Quality of life care irrespective of the cultural or regional differences is its ultimate goal. The nursing assistant who is closer to the patient while providing care shall have knowledge and understanding of different caste, cultures, and regional habits. Inculcating the same knowledge in her deliverables is required to provide better quality of care (Kennedy, 2016).

(Jhonston, et al, 2015) too emphasizes the importance of knowledge and communication in providing complete best of its kind quality care to a patient. Maintaining complete understanding of patients information and inculcating the same during providing holistic care defines the true meaning of end of life care and quality of life care.

(Royal College of Nursing, 2015) in their report signifies the true importance of dignity and respect to the patient. If dignity and respect are missing during care, the patient somehow feels devalued, he gets demotivated and loses interest in life. The ultimate goal of care providers shall be to keep the life alive among their patients throughout the process. The report also lays importance of good communication among the healthcare practitioners while dealing with the patients.

(Centre for Health Services studies, 2009) reports that inculcating the dignity and respect for patients while delivering care does impact the treatment outcomes from the care provided to the patient. Better the healthcare provider in providing quality of care having both dignity and respect during their care giving does impact the perception of patients and their family members

towards the care provider. The belief systems gets revived automatically due to proper respect given to a patient. This also not only improves the quality of life of a patient but also increases the belief factor of other patients on the healthcare professionals, this means its purely a win win situation from both ends.

However, failure to do so increases the anxiety levels among the patients and their family members. Patient seeks god upon the healthcare providers, if dignity and respect is missing in the care, this single hope gets lost in air. This on other hand gets perceived as it's a crime to be ill in society. To remove this barrier inculcating respect and dignity is very much a necessity these days (Dean, 2012).

The Care campaign is intended to improve fundamental patient care across the UK. "Care" stands for C – communicate with compassion; A – assist with toileting, ensuring dignity; R – relieve pain effectively; E – encourage adequate nutrition (Dean, 2012).

Nurses should ask patients about their regular toilet habits and the words they use to describe them. Toilet regimens should be tailored to the needs of the individual patient (Andrews, 2013). Maintaining dignity is paramount in continence management but can be particularly challenging when working with people with dementia. Ensuring patients have privacy when using the toilet is crucial (Logan, 2012).

SEARCH STRATEGIES:

The search strategies used were extensive and focused. The planning involved the selection of key words, applying search limits and using different search engines to fulfill the completion of innovative document on the given topic.

KEY WORDS:

The keywords correspond to the needful words or phrase which limits the search only to the given domain. It saves time and directly provides the required information from World Wide Web.

The basic keywords used in this document include: changing nature in the end of life care; dignity; respect; empathy; specialist care; importance of patient dignity; palliative care; dignity in personal hygiene; privacy and dignity; nursing strategies.

SEARCH LIMITS:

The limits to search options help to save time and energy of the researcher. The idea of finding most appropriate articles seems to get easier with the involvement of search limits. In the present document the limits placed were basically of the year range, type of format and limits of specific field. The publishing year was limited to 2013-2016 journals and articles and the field was limited to dignity and respect of end-of-life-care patients only.

SEARCH ENGINES:

The search engines are software systems that are designed to search valid information in World Wide Web. These engines help to get the required information in a detailed manner and thus help user to select useful part from the wide range of information.

The search engines most frequently used in this document are pub med; research gate; Google scholar; care-givers resources; PMC-NCBI.

PRESENTATION OF SEARCH RESULTS:

(Geller, 2015) states the goal of quality of life care as providing care with full dignity and respect. It is also ethically a way to provide higher quality of care or during end of life care in patients diagnosed with serious diseases.

(Street, 2001) states the gap in palliative care these days. The author also signifies the impact of absence of dignity and respect over goal of complete treatment. Respect and dignity is somewhat the patient deserves completely and in absence of which the abnormalities start emerging. So, its high time that healthcare providers and healthcare professionals start

understanding their importance and start inculcating them into their habits practically while providing a true quality of care.

(Baillie, 2009) states that its responsibility of whole hospital staff in maintaining the privacy of the patient. Behavior of staff shall not be biased due to cultural and regional differences. Their behavior does have direct impact over physical and emotional well being of the patient and their family members. Thus, it becomes the sole responsibility of whole hospital staff in order to provide complete quality of life care to an individual or in other terms the patient.

REFLECTION ON THE EXPERIENCE:

Having right communication with the patient on their arrival by the hospital staff does provide important details about the patient. This information can be very helpful as it can be used to provide quality care to the patient (Frampton, 2008).

(Respect and Dignity, 2016) states the important steps in over all care giving to the patient while they are in hospital premises. These include, **respect his / her Privacy, & Physical and Emotional needs. Respect his right to make choices, treating him or her with dignity,**

Behaviors have huge impact on patients care outcome, hence sensitive about patients dignity and respect while behaving with them results in better quality of care and better outcome of treatment goals decided for the patient (Geller, 2015).”

(Jhonston, 2015) states the importance of patients dignity questions. This holds very much importance in clinical practice and care to patient given by the clinicians and other supportive staff.

(Commission on dignity of care, 2012) states the responsibility of complete healthcare professionals in maintaining dignity and respect in their services while dealing with patient.

Facilitated discussions with reflective questions, such as “How would you like to be cared for if you were in care and needed help to use the toilet?”, can improve caregiver empathy and promote patient dignity (Centre for Health Services, 2009).

(Griffiee, 2015) states the steps where dignity and respect could be inculcated. Take for e.g. hospital. Right from patients diagnosis to patients admission for care, the way they are behaved shall be focused on based on respect and dignity. Maintaining the respect of patients identity and keeping things official and confidential is sole responsibility of hospital staff. They shall not in any way make the patient feel inferior about his condition. A great quality of care is one which makes the patient's life full of joy, happiness and being just normal.

Conclusion

Dignity and respect is the right of patient no matter what is the care he is having. Hence, providing care focused on giving proper respect and dignity is of much importance and necessity in nursing care.

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