

Journal Watch

“End-of-life care for seniors: public and professional awareness”

Ross M. M., MacLean M. J., Fisher R. *Educational Gerontology*, 28: 353-366, 2002

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Abstract:

Seniors living with disease or dying should be able to receive competent, comprehensive and compassionate end-of-life care that offer dignity, self-determination, and relief from pain and suffering. Such care is predicated on an informed public as well as health and social service providers who are well trained in end-of life issues and appropriate approaches. There is, however, little evidence that seniors and their families are adequately informed about end-of-life issues or their treatment and care options. Furthermore, health and social service providers do not predictably receive the education and training necessary to ensure a high quality of end-of-life care for seniors. This paper discusses public and professional awareness and offers strategies aimed at increasing awareness of end-of-life issues. These strategies also support the development of an approach to end-of-life care for seniors that is caring, compassionate and ethically, spiritually, and culturally appropriate. The article contributes to an emerging agenda directed at ensuring that all seniors receive end-of-life care that allows a positive conclusion to their lives.

Comments:

Strengths:

- The authors base their approach on the principles of maintenance of autonomy and self determination in decision making, stating seniors are well aware of the naturalness of dying (in contrast to the current medicalization of dying). This is discussed within the model of the “heightened awareness of finitude” (Marshall, 1986). This was an interesting and helpful view.
- The authors discuss that gerontology and palliative care tend to work in isolation from one another and encouraged multidisciplinary collaboration. The discussion of the difficulty in working in multi/interdisciplinary teams and encouraged redefinition of roles to include interdependence.
- Good summary of the need for heightened professional awareness discussing medicalization of death, neglected area of research, and an emphasis on individual rather than collaborative practice.

Weaknesses:

- The discussion of awareness of finitude among families seemed to be focused on one study of wives giving up care for their husbands and institutionalizing them. It does not fit with the context of the article
- Although the strategies seem appropriate and discuss increasing both public and professional awareness, they are very broad in nature
- The authors do not discuss how to increase “public debate to clarify individual, community and societal perspectives” It is our experience it is difficult to engage the public in discussions about dying unless they have experience with family.

Relevance to Palliative Care:

- It is helpful that journals not usually focused on palliative care discuss the broader context of dying for seniors. The discussion is consistent with palliative care literature.