Exploring Spiritual Needs of Taiwanese Inpatients with Advanced Cancer and their Family Caregivers

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Abstract

Abstract -- This study explores the spiritual needs of inpatients with advanced cancer and their family caregivers in one southern regional teaching hospital in Taiwan, and elucidates the differences of spiritual needs between their differences and influence of Chinese culture. Background. In clinical settings, many nurses express difficulty with understanding what spiritual needs are, or how it relates to nursing and how to 'assess' and implement it. Little research reports the different phases of spiritual needs, and the potential impact of Chinese cultural values on the spiritual needs. Qualitative inquiry was used. Data were collected through participant observation, semi-structured, and in-depth interviews. Transcribed interview data were analyzed by using qualitative content analysis. Twenty-one patients with advanced cancer and twenty-two family caregivers were recruited from one southern regional teaching in Taiwan. The participants claimed four spiritual needs: the sense of spiritual needs in human love and forgiveness, hope and faith/confidence from medicine and God, facing death peacefully, and understanding the meanings and values of life. During hospitalization, all the participants identified spiritual needs both the palliative phase and the dying phase: (a) the need to foster faith/confidence and hope for medicine and/or God; (b) to understand the meaning and values of life; (c) to experience more reciprocal human love and forgiveness; and (d) to obey God's/Heaven will. Furthermore, the differences of spiritual needs between patients with advanced cancer and their family caregivers are as follows: (a) family caregivers emphasized the need to inform relatives and say goodbye in order to die peacefully; (b) patients highlighted a need to maintain a certain physical appearance in order to preserve their dignity; nurture one's willpower; learn about the experiences of cancer survivors; and identify one's own life experience for understanding the meaning and values of life. Moreover, the dissimilarity of spiritual needs is that, the patients pointed out the need to understand God's will during the palliative treatment phase. However, the family caregivers identified the need to forgive each other, and inform relatives and say goodbye to PAC in the dying phase. The discrepancies of spiritual needs are gender related. The female caregivers mentioned symptoms relieve, and caring and gratitude for others. Health professionals will be encouraged to detect and to develop individualized care strategies as early as possible.

Key Words. advanced cancer, spiritual needs, family caregivers, Chinese culture, qualitative research.