

Definition and Elements of Core Attitude in Palliative Care

Results of a Representative Survey of Professionals in Palliative Care in Germany

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Background

Palliative Care (pc) is a discipline that requires specific competencies, skills, and attitudes of professionals in the care of the dying patient. 'Core attitude' can serve as a label describing the professional's self-image.

Aims

To explore the general and pc specific understanding of core attitude of professionals in pc and to identify certain features of core attitude.

Sample and Methods

A survey with five free-text questions was conducted of which analysis of question one and two is presented here. This survey is part of a broader study including a questionnaire with closed-questions and free-text. Participants were asked (a) to define the term 'core attitude', and (b) to describe their core attitude in the work with severely ill and dying patients. The questions were developed on the basis of a pilot study with ten qualitative interviews (1). 87 institutions in northern Germany were contacted by mail and telephone (non-random sample). Data were analysed using qualitative content analysis (2) and free-text analysis (3).

Table 1 – Sample characteristics

<p>N = 350 Response rate = 51.3 % Age: mean = 43.8 years (SD = 9.1) Gender: 78.3% female, 21.7% male</p>	<p>Institutions: 26 palliative care units (hospital) 21 hospices (inpatients) 21 hospice home care Work experience in pc: mean = 13.5 years (SD = 8.2)</p>
<p>Professions: (8.9% no data)</p> <ul style="list-style-type: none"> 62.2% nurses 12.0% physicians 8.3% psychologists and social workers 3.7% chaplains 4.9% other (e.g. physiotherapist, management) 	<p>Special training in palliative care:</p> <p>Legend: no data (yellow), yes (red), no (orange)</p>

With respect to b) Core attitudes in pc are grouped into three areas (see Figure 1). Values were named regularly and seem to be central for the concept of core attitude. The care of the dying patient is characterised by respect, acknowledgement, and unconditional positive regard. Patient-centeredness is expressed in the estimation of individuality and dignity.

Figure 1: Elements of core attitude in palliative care

Personal characteristics	Values in pc work	Skills in the care
<ul style="list-style-type: none"> • attitudes towards death and dying • faith, spirituality • gratitude and satisfaction in the work • self-image: resources, strengths, faults, interest in others • to acknowledge one's own limitations • own ambitions • inner support 	<ul style="list-style-type: none"> • acceptance of individuality • respect, respecting autonomy • dignity • openness • tolerance • positive regard, esteem • love • caring • authenticity 	<ul style="list-style-type: none"> • competencies: empathy, communication and listening, balance of closeness and distance • getting involved and being present in relationships, • balance between active support and letting things go, restraint • enduring hard moments • holistic model of care • professionalism and teamwork

Results

350 professionals of 63 palliative and hospice care institutions completed the questionnaire (see Table 1).

With respect to a) "It [core attitude] is my fundamental attitude towards my own life and towards the people around me. The core attitude determines the thinking and the actions of a person. It forms the basis and 'character' of our actions." (nurse, 47 years, palliative care unit).

Professionals named a variety of concepts which can be grouped into the following categories:

- image of man,
- ethical principles, values,
- beliefs,
- foundation, cause, base,
- basis of action,
- philosophy of life,
- personality/identity, and
- attitude.

These descriptions can be regarded as complementary and overlapping demonstrating the concept's complexity.

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Furthermore, caring for patients and relatives is described as a process of getting involved and being present in the encounter with the other. Care of the dying alternates between active support and restraint as well as closeness and distance.

Despite values and skills, personal characteristics like attitudes towards death and dying, own ambitions or acknowledgement of own limitations are ascribed an important position in the concept.

Conclusions

Professionals conceptualised the term 'core attitude' as certain values and skills which are realised in the relationship to the dying patient. A definition of the concept has to take into account a variety of complementary concepts such as image of man or philosophy of life. Because participants named personal characteristics and their identity as elements of their core attitude, the concept can not be equalised with 'ethical principles' or 'competency' alone.

Literature

- (1) Simon, S., Kruschke, N., Ramsenthaler, C., Bausewein, C. & Geiss, G. Core attitudes of professionals in palliative care – a qualitative pilot study. *Supportive & Palliative Care* (submitted).
- (2) Mayring, P. (2003). *Qualitative Inhaltsanalyse: Grundlagen und Techniken*. Weinheim: Beltz.
- (3) Garcia, J., Evans, J. & Reshaw, M. (2004). "Is there anything else you would like to tell us" – methodological issues in the use of free-text comments from postal surveys. *Quality & Quantity*, 38, 113-125.