

# Hope

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# Hope: Outline

- Definition
- History
- Attributes
- Assessment & Intervention
  - Research Utilization

# Definition of Hope

“ An essential experience of human condition...(Which) function as

a way of feeling,

a way of thinking,

a way of behaving, and

a way of relating to oneself and one's world

Farran, Herth & Popovich, 1995

# Definition

- Hope in palliative care is multi-dimensional (not a uni-dimensional hope for a cure), underresearched, and of therapeutic value.
- The nature of hope in palliative care should be viewed more as a process rather than a state to be obtained.
- There is a strong connection between hope and a person's belief system.
- **The importance of healthcare professional includes giving information, time, and space for exploration and the assurance of continuing support.**

# History



# Attributes

- Confidence in the outcome
- Ability to relate to others
- Possibility of a future
- Spiritual beliefs
- Active involvement
- Strength that comes from within

(Nowotny, 1989)

# Assessment & Interventions

# Confidence in the outcome

## Assessment

- The outcome is that the person will die.
- How one goes about dying--psychologically, socially, and spiritually--is not predetermined.
- Three most common questions
  - the question of cure
  - the question of symptoms and problems
  - the question of whether he/she can get through the process

## Intervention

- Nurses help build hope by focusing on the question of how the patient goes through the process. All religions have a specific belief in the outcome: what happens after death.



# Ability to relate to others

## Assessment

- The absence of relationships creates hopelessness. Activities support relationships help build hope. Relationships need not be with live people: people already dead can even be central in some patients' lives. Many patients feel failed and abandoned by their community.

## Intervention

- Nurses facilitate this by supporting and accepting the relationships between the patient and his or her important one (s)

# Possibility of a future

## Assessment

- Religions offer possibilities about the future (life after death)...still doubts....

## Interventions

- Nurses response to such doubts by
  - stay with and support the patient whether the patient is doubting or not
  - help the patient who doubts refer back to religion by providing materials, facilitating visits by monk, etc.

# Spiritual beliefs

## Assessment

- **Spiritual beliefs have positive effects on patients with life-threatening illness. Over the course of a life, many patients fail away from the faith in their early years. The time of dying is a good time to have another look at faith.**

## Interventions

- **Nurses provide..**
  - **A visit from monk or... could be very helpful if a visit to a place of worship is not physically possible.**
  - **The rituals, audio tapes, books, and songs of a patient's faith may be better than counseling.**

# Active involvement

## Assessment

- The underlying principle of active involvement is autonomy: the patient is free to choose and be in charge of his own spiritual direction.

## Interventions

- Nurses provide an atmosphere of acceptance.

# Strength That Comes From Within

## Assessment

- It is important to use the patient's own strengths in exploring the difficult psychological and spiritual landscape of terminal illness.

## Interventions

- Nurses should be willing to leave patient alone with the unanswered questions that the patient must face. It may be difficult but necessary. Each patient needs to discover and personally experience his own doubts or fears. “...We cannot understand a thing until we have experienced it inwardly.” (Jung, 1953, p338 cited in\*)

# Interviewing Questions

- **What is the meaning of hope?**
- **What are your sources of hope?**
- **What sustains you and keeps you going?**
- **How hope is important to you?**
- **Does hope help you? How?**
- **Has being sick affect your hope?**
- **Is there any thing that I, as a nurse, can do to help you regarding your hope?**

# Research Utilization



**Wong, Y-f. M., & Chan, W-C. S. (2006).**

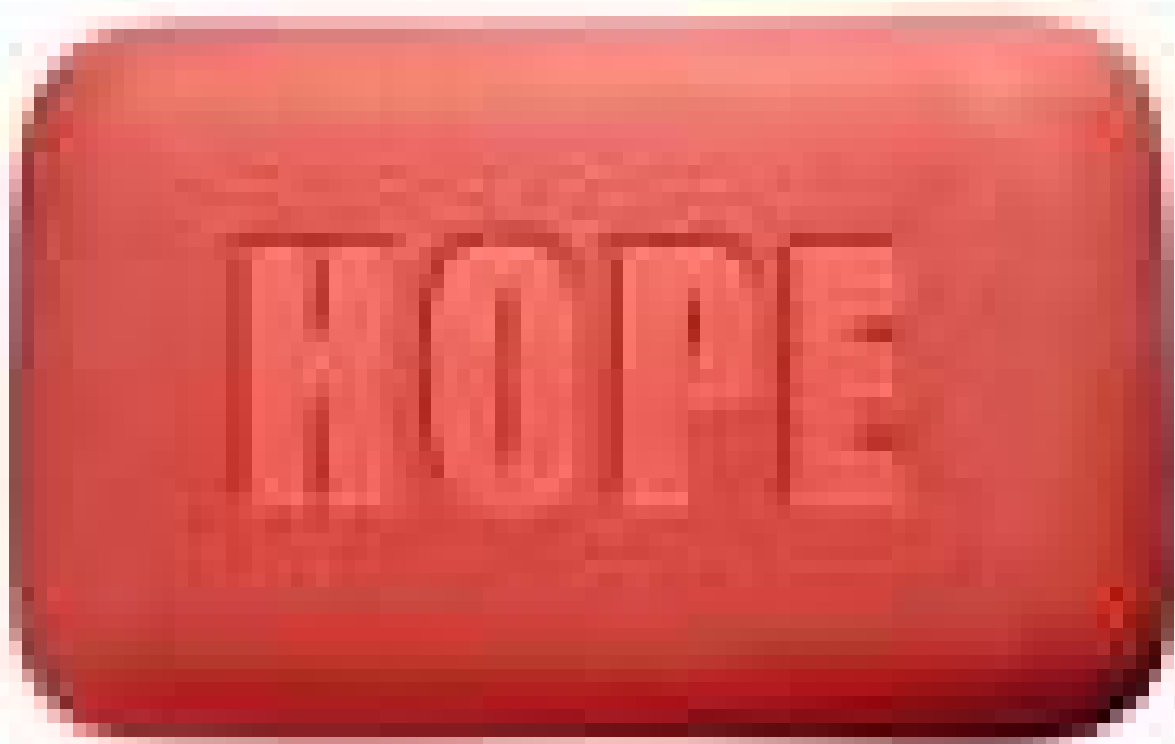
**The qualitative experience of Chinese parents  
with children diagnosed of cancer.**

***Journal of Clinical Nursing, 15. 710-717.***

# References & Recommended Readings

- Black, J. M., & Hawks, J. H. (2005). *Medical-surgical nursing: Clinical management for positive outcome*, (7<sup>th</sup> ed.). St. Louis, Missouri: Elsevier Saunders.
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- Feudtner, C. (2005). Hope and the prospects of healing at the end of life. *The Journal of Alternative and Complementary Medicine*, 11(S1). S23-S30.
- \*Kemp, Charles. (1999). *Terminal illness: A guide to nursing care* (2nd ed.). Philadelphia, PA: Lippincott Williams & Wilkins.
- Mauk, L. K., & Schmidt, N. A. (2004). *Spiritual care in nursing practice*. Philadelphia, PA : Lippincott Williams & Wilkins.
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