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# Spiritual Needs of Taiwan's Older Patients With Terminal Cancer

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**F**rom biologic, ecologic, medical, sociologic, cosmologic, philosophic, and ethical views, death is an inevitable event and a universal process in human life (Grogono, 2000; Hsin & Macer, 2006). Older people who are closer to death and have had full life experiences may have noteworthy needs to share.

Possibly because of increased life expectancy in Taiwan, more patients are dying from cancer. According to the Department of Accounting and Statistics (2005, 2008), Taiwan's older population (aged 65 and older) has increased from 7.6% of the total population in 1995 to 10.38% in 2008. An older patient with a terminal illness faces physical, psychological, spiritual, and moral suffering. Many Taiwanese patients with a terminal illness expect healthcare providers and family members to provide appropriate end-of-life care, care that creates peace of body, mind, and spirit during the uncertainty of the death-approaching phase (Lin, 2003; Tseng et al., 2005; Yiting, Doring, Fang, Li, & Baoqi, 2005).

Shih, Gau, Lin, Pong, and Lin (2006) indicated that quality care during the dying process can turn an expected loss into a positive for patients, the patients' families, and healthcare providers. In contrast, an unsatisfactory level of care may prevent patients from achieving a peaceful passage because of physical discomforts and an unsuccessful completion to life. Some patients may even believe that their afterlife is negatively affected during the dying process. Based on patient, family member, and healthcare provider suggestions, the elements of good death care include bodily peace (e.g., effective pain and symptom management, cleanliness, integrity of the body), peace of mind (e.g., yielding, settlement of all necessary affairs, not being lonely), and peace of spirit (e.g., a meaningful life, a sense of completion, affirmation of the whole person) (Steinhauser et al., 2000).

Among the domains of care, spiritual health is at the core of a patient's existence and affects, connects, and transcends all aspects of being (Isaiah, Parker, & Mur-

**Purpose/Objectives:** To explore the core constitutive patterns from the perspective of the older patient with terminal cancer, the major foci of spiritual needs, and professional actions that manifest tangibly as spiritual care.

**Design:** Hermeneutic inquiry.

**Setting:** Two leading teaching hospitals in Taiwan.

**Sample:** 35 older patients with terminal cancer with a life expectancy of three months.

**Methods:** Participatory observation and in-depth interviews were the major data collection strategies. Hermeneutic inquiry was used to disclose, document, and interpret participants' lived experiences.

**Main Research Variables:** The perceptions of older Taiwanese patients with terminal cancer and their particular healthcare needs across various transition stages.

**Findings:** Two constitutive patterns, "caring for the mortal body" and "transcending the worldly being," each with three themes and a related transformational process emerged from the data analysis. Two foci of spiritual needs were discovering patients' concerns about their dying bodies and their worldly being and facilitating the transcendence of the spiritual being from the physical realm.

**Conclusions:** Caring for older Taiwanese patients with terminal cancer and helping them transcend the fear of the unknown when they give up worldly being can produce insights into patients' primary concerns, perceptions, and spiritual needs to help them achieve a "good" death.

**Implications for Nursing:** The knowledge gained in this study and the six major spiritual care actions identified may empower oncology nurse educators to develop culturally valid spiritual care courses. Research-based guidance for nurse clinicians who are taking care of older Taiwanese patients with terminal cancer will be provided.

row, 1999). Spirituality has long been acknowledged as a basic human need associated with quality of nursing care. The defining characteristics of spirituality include establishing belief systems; mastery of life's challenges; experiencing a sense of love (e.g., belonging, protection,