

# SEARCHING AT THE END OF LIFE

The need for anger, blame, comfort and **hope**

## Background

In the crisis of life-threatening illness  
why are new questions asked?

Is it fear?

Do humans have a natural  
connection?

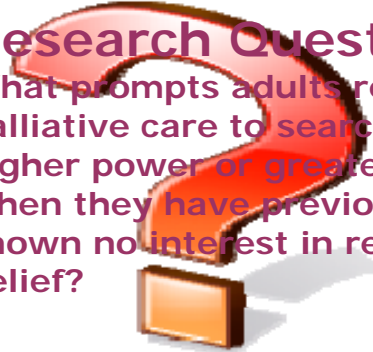
Is it hope?

*Fear*



## Research Question

What prompts adults receiving  
palliative care to search for a  
higher power or greater being  
when they have previously  
shown no interest in religion or  
belief?



*Hope*



## Results

The Need to:

- Hope for an afterlife
- Find meaning for this life
- Face positively complexity and the unknown
- Find someone able to facilitate a conversation about these issues

## Design & Methodology

- Lived experience and self report
- Semi-structured interviews

## Limitations

- Small sample size
- Single snapshot in a dynamic process
- Challenges in staff reluctance to recruit

## Recommendations

For education and training:

Education and training programmes to encourage staff in self-awareness and reflective practice. Understanding of self is essential in deciding at what level individual staff members might feel comfortable in delivering spiritual care

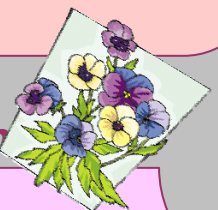
For healthcare chaplains:

Healthcare chaplains must become more proactive in recognising, training and encouraging healthcare professionals who feel comfortable in spiritual care delivery

For future research:

Research is required into why spiritual care delivery can prove to be difficult for some healthcare professionals. This will aid provision of more realistic expectations of staff

*Natural  
Connection*



## Research informing practice

- Necessity of defining religious/spiritual
- Need for patients to have continuing dialogue re:
  - Belief without belonging
  - Spiritual connectedness
  - Channeling emotion
  - Holding in tension
  - the present and the future
- Challenges to a multidisciplinary team