Dignity...for everyone, everyday

Little things aren't so little...

This presentation asks you to redefine your notion of dignity on a micro-level...

Abbreviated abstract: This presentation asks us to redefine how we consider and approach the notion of dignity. I propose that by scaling down our conception of what dignity really is, by anchoring it to 'little things', we can dramatically expand the end of life experience that we facilitate. Finally, I will forward that a distinction between end of life care 'without indignity' and end of life care 'with dignity', is fundamental in the provision of person centered care.

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Related publications:

- B.J. Miller, What Really Matters at the End of Life?, (2015)
- R.N. Remen, Generous Listening, (2012)



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Previous work, challenge, and approach

Redefining dignity on a micro level.

Dignified

- Feeling heard, seen and respected
- Maximum level of independence and choice

Non-Dignified

- Feeling neglected and ignored
- Feeling like an object, not a person

The little things aren't so little. The everyday duties of healthcare professionals, are not regular occurrences for the majority of people.

We need to "set our sights on well-being, so that life and health and healthcare can become about making life more wonderful, rather than just less horrible." – BJ Miller



Providing dignified end of life care is not a question of expertise, it is a question of humanity. By redefining how we approach a persons dignity, we also redefine how we approach a person.





Techniques and Methods

'Without Indignity' vs 'With Dignity'

I propose a mode of working that distinguishes between end of life care 'without indignity', and end of life care 'with dignity'. Our current, overarching understanding of dignity, as per the lists from the previous slide, are extremely successful in *avoiding* indignities.

However, avoiding indignities is NOT the same as respecting dignity. We may only have one chance to get it right. Dignified practice is a question of considering, being aware of, and taking time to familiarise with, the uniqueness that each individual possesses.

Rachel Naomi Remen proposes, through her concept of 'generous listening', that by simply listening, not for what we are trained to listen for, but simply for what is true for that person at that time, we facilitate a safe interaction, where "something can happen which is larger than before."



These moments are so often stolen as we close them down in our quest to avoid indignities.





Results and Conclusions

Patient Quotes:

"I might forget what you said or what you did...but I will never forget how you made me feel." – Jersey Hospice Care Patient

"I'm 1-0-8. It's my room number. That's how I'm referred to around here by the caregivers...talking to one another about me. It's that way with every resident...I do have a non-numerical identity too, my name is Dick, that's what my friends in the real world call me."



Redefining dignity on a micro level, allows us to remember that even lying on a bed, with people looking down on you, can be overwhelming, and even belittling.

I'm asking us to redefine how we approach not only a persons dignity, but a person.





