

DEATH BECOMES US

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Y O'MEARA KALEIDOSCOPE 30TH MAY 2017

THEORY & PRACTICE

- Anticipatory Grief
- Working Systemically
- Genograms
- Case Study
- Discussion

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ANTICIPATORY GRIEF

"encompassing the process of mourning, coping, interaction, planning, and psychosocial reorganization....in part response... impending loss of a loved one and the recognition of associated losses in the past present and future...."

(Rando: 1986 & 2000:24)

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THE PATIENTS & FAMILIES EXPERIENCE

*"It is like being given a **death cert** though you are still alive..."*

*"The best way that I can describe what my family and I are going through is similar to being on **death row**..."*

"The family that once was, not longer exists, it's harrowing to watch the demise of your loved one and your family all at once"

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TIME FRAMES AFFECTING THE ADJUSTMENT PROCESS

- The shortest and longest periods of AG... associated with poor outcomes.
- Prognosis of 6 months or a longer period of 18 months had a negative effect on adaptation. A mean time of 12 months assist the families adaptation to impending loss.

(Rando 1983 & Sanders 1982:83)
(Parkes 1983)

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ANTICIPATORY GRIEF: THREE TIME FOCI

- Past
- Present
- Future

(Rando 1986, Gilbert 1996-2007)

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INFLUENCING FACTORS

- Development stage
- Age-specific tasks of dying
- Timelines of death
- Psychosocial and spiritual resources of Patient and Families.
- Strengthen bonds or not (self perceived burden, depression /suicidal)

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FOUR TASKS OF ANTICIPATORY GRIEF

- 1 Satisfy bodily needs
- 2 Maximise psychological security
- 3 Sustain and enhance those interpersonal attachments
- 4 Identify, develop or reaffirm sources of spiritual energy

(Corr 1991-1992)

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SYSTEMIC APPROACH

“Operating from a family systems, theoretical framework offers an insight into systems and relationships that is not available when operating from any of the theoretical orientations in practice with individual therapy”.

(Overton and Cottone 2016)

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Proof...

- Evidence indicated that 2/3 cases improve with systemic psychotherapy
- Evidence based practice specific to couples, psychosexual, acute and chronic illness, mental health diagnosis palliative care and bereavement (Kissane)
- 22 studies over 20 year systemic therapy is more cost-effective than individual therapy
- Systemic therapy leads to medical cost-offsets (use fewer medical services after family therapy)
- Family therapy contributes to alleviating suffering and “making the world a better place” (Carr 2016)

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OBSTACLES

- Resources
- Logistics
- Cost
- Physical environment
- Therapeutic styles
- Difficulty with research

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GENOGRAMS

- Important Clinical Tool
- Structure to the interview
- Gathering information (medical, behavioral, genetic, cultural and social aspects of family systems).
- Exploring themes

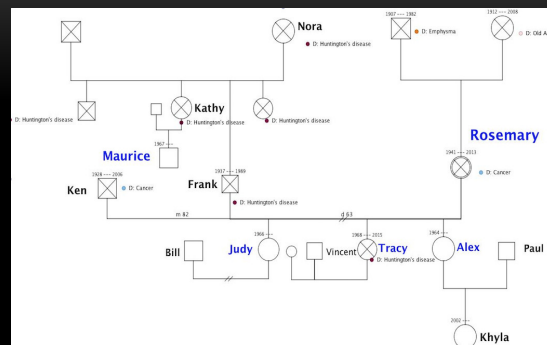
(Papadopoulos et al 1997)

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GENOGRAMS CONTINUED

- Clarifying patterns and punctuates relationships within the family.
- Reframe family issues (detoxified/normalizing).
- Life events- time lines.

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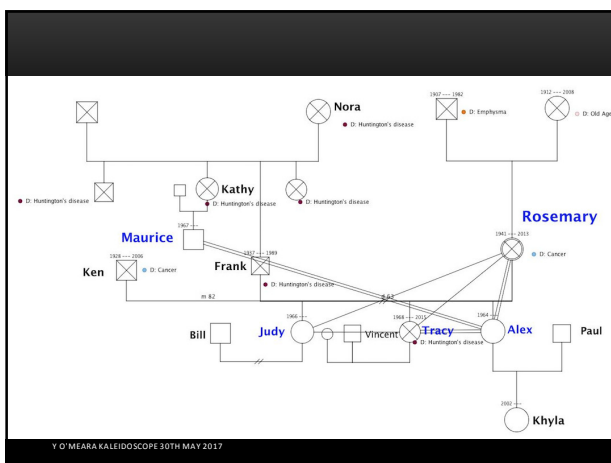
INFLUENCING FACTORS

- Loss of self-important concern expressed by the patient
- Sadness and grief in response to the losses accompanying disease progression and physical deterioration
- Expression of grief were related to previous, current and anticipated losses

(Cobb 1999)

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"Primary care givers are both physically, mentally and financially fatigued, not uncommon for a wish for the death to take place so that the burden of care can be over".

Dickinson and Leming (2007:181)

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EXPECTATIONS OF THE FAMILY

- Acknowledgement of the reality of the death
- Sharing experience of the pain and grief
- Reorganization of the family system
- Redirection of family goals
- Important that families include the patient in the grieving process-complete unfinished business, resolve interpersonal conflicts and reach closure

(Chang et al 2010)

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"... one of the good things about those illnesses... that enables us to predict when a person will die is that they give the family of the dying person time to prepare themselves for the event... one of the bad things is that the family often fail to take this opportunity"

(Parkes 1996:100)

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ROSEMARY AND HER FAMILY

- *"We got to speak about things that we would not have brought up"*
- Having the space
- Non judgmental
- Facilitated a deeper connection to one another

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Thank you

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