Embracing the End with LOVE

— Palliative Care for the Ageing Group in China

“A loving heart is a hospice for the world.”

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Embracing the End with LOVE

“You matter because you are. You matter until the very last moment of your life. And we will do all we can. Not only to help you die peacefully. But to live until you die.”

— Dame Cicely Saunders “Founder of the Modern Day Hospice Movement”

Palliative Care for the Ageing Group in China

- Introduction of Palliative Care
- Development in China
- Experiences of America
- Challenges China Faces
- Solutions to the problems
- What Can We Help?
I Introduction of Palliative Care

• 1. WHO Definition
• 2. Goal of Palliative Care
• 3. How the Care Is Provided —by a Team
• 4. What Care Is Provided
• 5. Palliative Care & Hospice
• 6. History of Palliative Care
WHO Definition

Palliative Care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.*

Goal of Palliative Care

- not to cure
- to relieve suffering
- to provide the best possible quality of life
- mental health and spiritual needs satisfaction
How the Care Is Provided —by a Team

❤️ Palliative care doctors, nurses and social workers.
❤️ Chaplains, massage therapists, pharmacists, nutritionists and others.

What Care Is Provided

❤️ **Physical:** Pain and symptom control (relief from symptoms such as pain, shortness of breath, fatigue, constipation, nausea, loss of appetite and difficulty sleeping.)

❤️ **Emotional and Spiritual:** religion in the west (a comfortable atmosphere that reduces anxiety and stress, fear to death.)
Palliative Care & Hospice

❤ Palliative care: any time during illness. may be combined with curative treatment
❤ Hospice: terminally ill patients (expected to live ≤ 6 months) people who no longer seek treatments
❤ Palliative Care =? Hospice

History of Palliative Care

❤ Beginning: hospice movement in Britain
❤ 1967: Dr. Cicely Saunders & St. Christopher's Hospice
❤ Since then, palliative care has rapidly expanded over the world. esp. well delivered in developed countries (USA, UK, Australia)
❤ Today: > 60 countries and regions worldwide
❤ Global network: International Association for Hospice & Palliative Care (IAHPC)
Aim: promote H&P worldwide
Palliative Care Development for the Ageing Group in China

1. Social Background

2. Palliative Care Development in (Mainland) China
   - Forms of Palliative Care in China
   - Progress and Achievements
# Social Background In China

- **China: an ageing society since 2000**
- People > 65 years old: 7%

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<th>Percentage of the total Population (%)</th>
<th>Population over 65 years old (million)</th>
<th>Percentage of the total Population (%)</th>
<th>Number of death (million)</th>
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Social Background In China

❤ Physical & psychological suffering

❤ Demands: psychological consultation, health promotion and disease control

❤ need: set up and develop palliative care for the aged in China
Palliative Care Development in (Mainland) China

Term: Lin Zhong Guan Huai (临终关怀) — Caring for a Person Approaching Death

Forms of Palliative Care in China

- A small number of palliative care hospitals
- About 200 end-of-life wards in medical institutions -- the main form of service
- Home-based hospice service
  e.g. the 30 hospice “Ning Yang Yuan” (宁养院) established by the Li Ka Shing Foundation (LKSF)
Progress and Achievements

❤️ 1987 the first hospice in China — Beijing Song Tang Hospice
Mission statement: “To love everyone from the bottom of our hearts.”

❤️ 1988 the first hospice care research center
— Hospice Research Center in Tianjin Medical College.
- clinical ward established there in 1990
- training, publicizing, lectures and seminars
  - strong social reaction
  - hospice programs appeared in big cities

❤️ 1992 the First Eastern and Western International Hospice Conference
Ministry of Public Health: bring hospice care into the national medical and health development plans. — blossom of hospice programs later

❤️ 1993 Palliative Care Committee was set up in Chinese Association of Mental Health
Progress and Achievements

1994 The Committee of Rehabilitation and Palliative Care (CRPC, China) focus: academic and theory research

1996 Chinese Journal of Hospice

1998 China's first free hospice “Ning Yang Yuan” ( “宁养院” ) set up by Li Ka Shing Foundation (LKSF)
   -- home-based and free service for impoverished cancer patients

2001 The National Hospice Service Program by LKSF
   • annual funding: 25 million RMB
   • each Hospice Unit receives: 1.2 million RMB per year
     • 30 hospices, 30 cities, 24 provinces, > 70,000 patients.
     • 8,000 volunteers, 78% university students

2006 the Chinese Association for Life Care
   -- a nationwide regulatory organization

Now
Progress and Achievements

❤️ Today: more than 200 multiform hospices
❤️ courses and textbooks on palliative care
❤️ a mass of academic papers and literature published.

*
Ⅲ Experiences of the United States

American Hospice Mode

- China: Learn from the US
American Hospice Mode

❤ 1974 The first hospice in New Haven
❤ Now: hospice— a significant part of the health care system.
❤ Covered by Medicare, Medicaid, most private insurance plans, and charity donation
❤ more than 4,700 hospice programs
❤ Benefiting 1.4 million people in the US in 2007

China: Learn from the US
❤ Expense mode can be applied to China
❤ Combine with the China Social Insurance Update.
IV The Challenges China Faces in Promoting Palliative Care

1. Insufficient Economic Input & Immature Health Care System

2. Traditional Cognition about Life and Death

3. Lack of Professionalism
Insufficient Economic Input & Immature Health Care System

❤️ lack of funding (government input & society Donation)
  --Lowers the quality and quantity of palliative care service

❤️ Hospice included in the insurance system:
  ● treatment and medicine costs covered (√)
  ● pay much for related care expense (×)

❤️ Hospice not included in the insurance system
  ● no expense covered, pay all

❤️ Root of the insufficient fund
  -- immature Health Care System
Traditional Cognition about Life and Death

The term Palliative Care still not been widely accepted:

❤️ China: a death-denying society (taboo) *

pursuit of longevity

❤️ Filial piety tradition: die in homes

hospice—lacking in filial piety
Lack of Professionalism

❤ Lack of knowledge and skills
● incompetent on emotional & psychological problems like depression, anorexia, etc.
● communication problem

❤ Lack of registered nurses and specialists
unprofessional nursing workers
V Solutions to the Problems

1. Policy and Financial Support from the Government

2. Public Education
   - Mind Revolution on Ideas of Death
   - Education of Respecting the Elderly

3. Professional Training and Academic Communication
Policy and Financial Support from the Government

- The essential solution to promote palliative care development

- policy and law

- PC as a social project → a part of Social Security System

- Learn from the American mode: hospice service should be included in the upgrade of the Medical Care System

- Government fund & calling for social donation
Public Education

❤ Mind Revolution on Ideas of Death

● Life & death: a full cycle
  Facing death: embracing the whole life.

● Death inspires → real meaning of their life
  Confucius: “未知生，焉知死？”→“未知死，焉知生？”

● Real filial piety—highest possible quality of life
  ✗ over-treat the terminal patients meaninglessly to extend their tortured time
  √ Respect & satisfy the individual emotion and needs
Public Education

❤ Education of Respecting the Elderly
→ to the society, esp. the youth

● Elder respect: the notable Chinese tradition

“老吾老以及人之老” - “Honor the aged of other family as we honor our own”

→ youth celebration → elder: more silent & neglected

● Real respect: inner appreciation and esteem

humanistic consciousness ← education

● family education, school education and self-education

● An invaluable lesson for young volunteers *

(rich social resources)
Professional Training and Academic Communication

❤ Specialization training
- not only: physicians, nurses, and nursing workers
- but also: psychiatrist, psychologist, pharmacists, and nutritionists—usually neglected in China

❤ Local & international academic exchange
  (publications, workshop, seminars, forums and international conferences, etc.)
VI What Can We Help in Promoting Elder Palliative Care?

• Be there with our family members at the end of their life.

• Be a volunteer in a hospice near your place.
“A loving heart is a hospice for the world.”

❤️ Be there with our family members at the end of their life.

● Consider: “What means most to someone who is lingering for the departure?”
  “His family members.”

● Love from one’s family

  → the **best** spiritual care *

● hold both of their hands: *
  reassurance and peace & power and courage

● share part of the burden of the society
Be a volunteer in a hospice near our place.

- listen to them, talk to them and help them achieve their uncompleted hopes

- Volunteers \(\xrightarrow{\text{happiness & laughter}}\) Elder
  
  Spiritual purification

  “it is more blessed to give than to receive.”

How we treat the aged today is how we will be treated tomorrow, and is also the nation’s destiny.

With a loving heart to the aged people, let’s help them embrace the end of life surrounded with **LOVE**!
Thank You for Your Attention!
References:


Song Tang Hospice
❤️ A Nursing Worker Is telling a Joke to Grandma.
The grandma is feeding an orange to Li Wei, the president of the hospice.
An elder is gently touching a small rabbit
Hand in Hand, Heart to Heart