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The Possibilities of Life Review in Palliative Care

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Aim & Objectives

This presentation aims to outline the possible use of life review in palliative care

- Recognise the theoretical framework which underpins the intervention.
- Determine the main constructs of life review in relation to palliative care.
- Consider the differences between life review and Reminiscence.
- Identify the benefits and limitations of life review.
- Recognise the future use of life review in the clinical setting in relation palliative care.

Erikson's Modification of Psychoanalysis

Eight Ages of Man

- Early Infancy - Trust vs Mistrust
- Later Infancy - Autonomy vs Shame and Doubt
- Early Childhood - Initiative vs Guilt
- Middle Childhood - Industry vs Inferiority
- Adolescence - Identity vs Role Confusion
- Early adulthood - Intimacy vs Isolation
- Middle Adulthood - Generativity vs Stagnation
- Late Adulthood - Ego-integrity vs Despair

(Erikson, 1982)

Ego-integrity

vs

Despair



Being the final 'crisis' in a person's life, it tends to be associated with older people who experience an accumulation of losses and adjustments.

- Decreasing income
- Decreasing physical strength
- Decreasing social activities
- Deteriorating health
- Increased sense of inadequacy where their help is no longer requested

Criticisms of Erikson's Theory

- The notion of fixed stages tend to homogenise people thus failing to acknowledge individuality.
- The ideology of resolution may be unattainable for many individuals.
- Reaching a point of compromise or acceptance is more realistic.

(Davis and Clifton, 1985; Coleman, 1986; Boeree, 1997)

Achieving Ego-integrity in Palliative Care

- The adjustments made by older people mirror those required by terminally ill people, often in a shorter time-frame.
- Individuals able to take the long term view that their life had meaning and purpose have achieved ego-integrity.
- Those who do not may become pre-occupied with their failures and bad decisions and fear death.

Life Review and Ego-integrity

“Life review can be regarded as an important developmental task in older adulthood to facilitate ego-integrity”

(Erikson, 1982)

“Life review offers individuals the opportunity to integrate past experiences, whilst valuing the present with an eye on the future”

(Coleman, 1986)



Life review & Reminiscence

- Both interventions use memory as the tool and recall as the process to allow reflection upon the past.
- Both emanate from Butlers theory and often hold a therapeutic function for older people.
- Used therapeutically, the facilitator taps into the memory using guided recollections, allowing the person to re-establish their identity.

Reminiscence

- Less structured
- Often used recreationally
- Often occurs as a 'one off' session
- Can be initiated during other nursing activities
- Tends to focus on positive memories
- Tends not to be used for recent events

Reminiscence & Palliative Care

- Recreational use of simple or spontaneous reminiscence may not assist the terminally ill patient to the degree intended.
- The less structured focus on specific incidents may leave patients harbouring unresolved emotional and psychological issues.
- Patients may wish to engage in a more profound discussion relating to painful memories.

Defining Life Review

“Life review is a universally occurring mental process where people recall their life experiences and unresolved conflicts, which they evaluate and attempt to reconcile”

(Butler, 1963)

Life review

- Process of organising and evaluating the overall picture of one's life.
- Must be performed individually.
- Cover the entire lifespan.
- Address both positive and negative life events both recently and in the past.
- May address areas of conflict or disturbance in a persons life.

Life Review & Experiencing Form (LREF)

- Allows the entire life span to be covered through attending a one hour session over six consecutive weeks.
- The questions act as probes to guide the life review and cover:

Childhood
Adolescence
Family & Home
Adulthood
Summary

Example questions on the LREF

- Tell me about your work. Did you enjoy it? Did you earn an adequate living? Did you work hard during those years? Were you appreciated? (adulthood)
- What was the happiest period of your life? What made it so? Why is your life less happy now? (summary?)

Lester's Adaptation of The Life Review and Experiencing Form

- Reduced from 6 weeks to 3 weeks.
- Childhood (family life)
- Adulthood (work life)
- The present (Here and now)
- This structure allows the opportunity to consider the current situation and make links with the past in order to cope with the future

The Potential Benefits of Life Review in Palliative Care

- Reaffirmation of self esteem and identity
- Reduced feelings of loss or isolation
- Deeper insight into past and present relationships
- Renewed emphasis upon the positive aspects of their life
- Offers the opportunity to anticipate and grieve for the end of their life, thus assisting them in letting go
- Assist in clarifying their perception of the present.

Desirable Qualifications of Facilitators



- The facilitator aims to promote self-expression through supportive listening.
- Health care support workers, lay people or volunteers are effective facilitators (Haight and Olson, 1989).
- Qualified professionals are likely to possess the requisite skills necessary for effective facilitation (Lashley, 1993; Puentes, 1998).
- Advanced practice psychiatric nurses should facilitate the intervention. (McDougall et al, 1997).

'Can of Worms'



- Very few studies.
- Failure to allow patients the opportunity to choose their life review.
- Severe distress leading to despair and hopelessness.
- Previous mental health problems.
- Possible negative impact on facilitator.

Recommendations

- Training on life review in palliative care
- Simultaneous supplementary communication skills training
- Each facilitator would be required to identify a suitably qualified clinical supervisor
- To undertake a wider study with patients to generate further evidence to support the structured use of life review in palliative care