

International Conference on **Hospice & Palliative Care**

August 31-September 02, 2015 Orlando, USA

Hospice nurses' perspectives of spirituality

Tiew Lay Hwa

National University of Singapore, Singapore

Aim: To explore Singapore hospice nurses' perspectives of spirituality and spiritual care.

Design: A descriptive, cross sectional design was used.

Background: Spiritual care is integral to providing quality end-of-life (EOL) care. However, patients often report that this aspect of care is lacking. Previous studies suggest that nurses' neglect of this aspect of care could be attributed to poor understanding of what spirituality is and what such care entails.

Method: A convenience sample of hospice nurses was recruited from eight hospices in Singapore. The survey comprised two parts: the Participant Demographic Details and the Spirituality Care Giving Scale (SCGS). This 35-item validated instrument measures participants' perspectives about spirituality and spiritual care.

Results: Sixty-six nurses participated (response rate of 65%). Overall, participants agreed with items in the Spiritual Care Giving Scale related to attributes of spiritual care; spiritual perspectives; spiritual care attitudes and spiritual care values. Results from General Linear Model analysis showed statistically significant main effects between race, spiritual affiliation and type of hospice setting with the total SCGS score and four factor scores.

Conclusions: Spirituality was perceived to be universal, holistic and existential in nature. Spiritual care was perceived to be relational, and centered on respecting patients' differing faiths and beliefs. Participants highly regarded the importance of spiritual care in the care of patients at EOL. Factors that significantly affected participants' perspectives of spirituality and spiritual care included race, spiritual affiliation and hospice type.

lay_hwa_tiew@nuhs.edu.sg

Integrating palliative care in the public health care system in Kenya

Zipporah Ali

Kenya Hospices and Palliative Care Association, Kenya

Palliative care should not be seen as a luxury, but as a necessary essential service; it should not be only for the few who can afford it, or for those living in better socio-economic conditions. Kenya Hospices and Palliative Care Association (KEHPCA) works together with its stakeholders such as the Ministry of Health (government hospitals), mission hospitals, hospices, community based organizations and training institutions to ensure that there is greater access across the county, thus scaling up palliative care services for all in Kenya to bridge the very significant gap between those who receive services and those in need. This encompasses addressing issues of accessibility, affordability, quality and patients' rights. KEHPCA advocates for the integration of palliative care for children, adults and the older people into all levels of health services in Kenya as a basic human right. KEHPCA has recognized the pain and suffering of many patients and families in Kenya who have no access to cure (where cure is possible), cannot afford treatment for cancer or other progressive chronic illnesses, are stigmatized or discriminated against because of their illness among many other dehumanizing issues. Therefore, KEHPCA exists to advocate for palliative care for such people; to be the voice for the voiceless. While the first hospice in Kenya was started over 24 years ago, palliative care remained an isolated service, available to only a few in the major cities where there was a hospice. Up until 2007, when KEHPCA stated fully functioning, there were just a few hospices in Kenya. KEHPCA is living up to its vision of ensuring that this services are accessible and affordable across the county, at all levels of care. By integrating these services into public hospitals, costs for patients in terms of travel, time, and service are greatly reduced. This presentation will focus on sharing service delivery models suitable for low middle income counties.

zippy@kehpc.org