

การเติบโตด้านในของเยาวชนผ่านการดูแลผู้ป่วยระยะท้าย: การวิจัยแนวปรากฏการณ์วิทยา

สุปรีย์ส กาญจนพิศศาล¹

จิรัฐกาล พงศ์ภคเธียร²

สมสิทธิ์ อัสตรนธิ³

บทคัดย่อ

บทความนี้เป็นการวิจัยเชิงคุณภาพแนวปรากฏการณ์วิทยา ทำการเก็บข้อมูลโดยการสัมภาษณ์เชิงลึกรายบุคคล การสนทนากลุ่ม และการจดบันทึกประจำวันของเยาวชนผู้เข้าร่วมโครงการเยี่ยมผู้ป่วยระยะท้ายด้วยตนเอง เพื่อศึกษาการเติบโตด้านในของเยาวชนจากการปฏิบัติดูแลผู้ป่วยระยะสุดท้าย ผลของการวิจัยเบื้องต้นพบว่าสิ่งจูงใจสำคัญที่เอื้อให้เกิดการเติบโตด้านในของเยาวชนจากการปฏิบัติดูแลผู้ป่วยระยะท้าย คือ การตระหนักรู้ในตนเอง การพิจารณาด้วยใจอย่างใคร่ครวญ การมีเจตจำนงที่มุ่งมั่น การแสวงหาความรู้และการกระทำ การฝึกปฏิบัติอย่างต่อเนื่องจนกลายเป็นส่วนหนึ่งของวิถีชีวิต และการแลกเปลี่ยนเรียนรู้ร่วมกัน

คำสำคัญ: การเติบโตด้านใน การดูแลผู้ป่วยระยะท้าย การวิจัยแนวปรากฏการณ์วิทยา

¹อาจารย์, ศูนย์จิตตปัญญาศึกษา มหาวิทยาลัยมหิดล

999 อาคารประสาทสังคมคมอุดมพัฒน์ ต.ศาลายา อ.พุทธมณฑล จ.นครปฐม 73170

e-mail: supreeac@gmail.com

²อาจารย์, ศูนย์จิตตปัญญาศึกษา มหาวิทยาลัยมหิดล

999 อาคารประสาทสังคมคมอุดมพัฒน์ ต.ศาลายา อ.พุทธมณฑล จ.นครปฐม 73170

e-mail: supreeac@gmail.com

³อาจารย์, ศูนย์จิตตปัญญาศึกษา มหาวิทยาลัยมหิดล

999 อาคารประสาทสังคมคมอุดมพัฒน์ ต.ศาลายา อ.พุทธมณฑล จ.นครปฐม 73170

e-mail: supreeac@gmail.com

The Inner Growth of Youths through Hospice Care: A Phenomenological Research

Supre Kanjanaphitsarn¹

Jirattakarn Pongpakatien²

Somsit Asdornnithee³

Abstract

This qualitative research undertook a phenomenological research approach by collecting data through in-depth interview, focus group and day-to-day reports of field experience of youths who volunteered in the project to visit the patients in the last stage of lives by themselves . Six motives supporting the inner growth of youth from practically taking care of hospice patients were: self-awareness, contemplation, intention, acquiring knowledge and taking action, continuation of practices until it becomes a part of one's life, and sharing and learning, all of which could drive them for a great change to be evolving in their lives and further commit themselves to be a self-less service people to mankind and society.

Keywords: Inner Growth, hospice care, phenomenological research

¹Lecturer, Contemplative Education Center, Mahidol University

999 Prachasangkomudompat Building Salaya district, Bhudamonthon Distrivt, Nakhon Pathom Provine , 73170

e-mail: supreeac@gmail.com

²Lecturer, Contemplative Education Center, Mahidol University

999 Prachasangkomudompat Building Salaya district, Bhudamonthon Distrivt, Nakhon Pathom Provine , 73170

e-mail: supreeac@gmail.com

³Lecturer, Contemplative Education Center, Mahidol University

999 Prachasangkomudompat Building Salaya district, Bhudamonthon Distrivt, Nakhon Pathom Provine , 73170

e-mail: supreeac@gmail.com

Introduction

In 2008, in the state of Florida, United states of America, The Hospice of the Florida Sun Coast initiated a group of youth volunteers to take care of the hospice patients. The advantages of this opportunity came when the local high schools in the area had made a rule for students to deliver social services for at least 75 hours. In order to complete his education, Dustin, a youth of 17 years old at that time, recalled and expressed his feelings that he had an opportunity to take care of the hospice patients and had a chance to make a video record of the life story of Max, a man aged 101, who mentioned that “Being prepared for death made him realize the worthiness of life. It made me to lead my life with reality more than I was” (Learning How to Live, 2004).

Youths have a chance to learn about life and death through taking care of the hospice patients, among other things, by helping the patients with their feelings to understand and mentally accepted with humbleness the fact that death is the reality of life. In addition, it could help both the youths and the patients involved in the project to become aware and understand that life and death are just on the other side of the same coin. Moreover, the learning process is not only just analyzing

intuitively but is learned by using one own experience. (Asdornnithee, 2013: 24) Consequently, the youths in the projects could be more open towards getting to know more about life in a new perspective, as well as understanding and approaching reality of all things.

For this reason, this research project was initiated and carried out by coordinating and collaborating with Department of Family Medicine, Faculty of Medicine Ramathibodi Hospital, Mahidol University. A sample of 15 students studying bachelor degree level at Mahidol University were selected from the total number of students who interested in this project for trainings on knowledge and attitude in taking care of the hospice patients in an appropriate manner. The selected students visited the patients in the ward of Ramathibodi Hospital, Mahidol University for at least once a week for a period of three months whilst holding a platform for monthly exchanges of knowledge.

Theoretical Framework

Reflecting from the concept and theory associated to this particular research, researchers had considered to choose Transformation theory by Jack Mezirow (2009), a professor on Adult Education of Columbia University, United

States of America, as main theoretical framework to explain the inner growth of youths who had practically taken care of hospice patients. Personal Transformation theory provides frame of reference of the person who had been conditioned on his point of view due to his experience from the past, the main paradigm of society and culture in which a person grew up, as well as a frame of reference by opening up to accept change that happens and the self-contemplating process and the conversation and exchanges on points of view with other people. Furthermore, the changes of these kind of attribute happen from new experience happening in life, which comes in and creates a confusion and conflict in the mind, that lead to observation and contemplation of self which consists of ten stages of changes as follow :

1. A disorienting dilemma
2. Self-examination
3. A critical assessment of assumptions
4. Recognition of a connection between one's discontent and the process of transformation
5. Exploration of options for new roles, relationships, and action
6. Planning a course of action
7. Acquiring knowledge and skills for implementing one's plan

8. Provisional trying of new roles

9. Building competence and self-confidence in new roles and relationships

10. A reintegration into one's life on the basis of conditions dictated by one's new perspective (Mezirow, 2009: 19)

However, Mezirow was criticize by many scholars that his theory is based too much on reasons and neglecting the reflection on factor of emotion and intuition.

Stages of Research

This research was conducted during June 2015 to May 2016. Researchers specified the target group of 45 participants namely, 15 patients from the last stage of life who were appointed for treatment and cure, and were admitted in the hospital during the period of three months and by field practice of the students who participated in the research since 10 August until 31 October 2015, doctors of the patients or doctors who had rights as representative for the 15 patients, and 15 students who took care of hospice patients.

This research was a phenomenological research. Researchers gathered data through in depth interview, focus group discussion and journals of the participating students. All

data were then analyzed and interpreted qualitatively by using content analysis method (Creswell, 2007).

Results and Discussion

The factors contributing to inner growth of youths through taking care of the hospice patients were as follows:

1. Self-awareness

Things that people participating in this research were clearly aware were that they realized their own misery and this was due to confusion on the new experiences they had never known beforehand, as some of the participants' response was: "when I first met the patients it was depressing and when they showed a sign of pain I felt it much too, so I wanted to get back to myself and watch what had caused the fear in myself" (Participant #5, interviewed, 27 May 2015). Another one was: "I stated questioning myself where were these feelings coming from, the fears, sadness, joy, confusion" (Participant #4, interviewed, 14 November 2015). This is in consistent to what Mezirow (2009) has explained that the personal transformation starts from confusion and conflicts within self which leads to a very strong feelings and self-observation. Being in awareness is the first step leading one to come and realize and self-observe, inspecting the thinking

process, the feelings and the expressed actions, which leads one to self-questions relating and comparing between the point of view and the believes that one use to have with the new information and knowledge received from new experiences. A contemplation would start taking an important role in order to drive and create a process to search for answers of the confusion and of doubts in the mind of the participants.

2. Contemplation

Most participants questions things according to their old belief structure, one of the examples being one of the response from the learning participants asking herself a question that how she turned into such a calm person. "I was very short tempered earlier, now it has changed towards betterment. I would like to know the reason behind it. It cannot be that I have been much acquainted with the patients" (Participant #4, interviewed 14 November 2015). Mezirow has explained this phenomenon as follow: when one starts to observe oneself there would be a state of thoughtfulness in contemplating and estimating their old belief, which would lead to being aware of one own misery and can lead to the process of inner self transformation (Mezirow, 2009; Nilchaikovit & Juntrasook, 2009).

3. Acquiring knowledge and taking action.

When the participants started with the process of being aware of self and leading to contemplation of their thoughts and feelings that had evolved in their mind and the relationship with others, the next step was acquiring knowledge and taking action. Most participants spented time acquiring knowledge on the subject that they had doubts on and confused with, and they tested the acquired knowledge and found out the appropriate way for themselves. One of the participants found a correct method to take care of the hospice patients: “I have taken care of patients for many times when I visit the ward. I hardly have met the last stage of life patients. I just want to do it correctly. Maybe I it could be of some help, so I just tried to find books on the subject, took advices from the professors and seniors students and implemented it. When I visited this uncle again, I tried to see if I had done well enough what should be done to improve it” (Participant #8, interviewed, 10 April 2016).

Moreover, some of the participants mentioned searching for information on attentive listening and how to implement it in their own life-style, such as: “I read the books that professor

recommended. I used the method written in the book to listen to the aged auntie, adapting this and that, and also used it with my friends. My friend said I am a changed person” (Participant #2, interviewed, 6 February 2016); “I search for some information on the internet then I try to use it to listen to the patients, listening to friends in my university faculty, and listening to mother when she is being grumpy. I understand them more now. Now on what matter I could keep quiet I would. I just listen, not much of back-answering” (Participant #7, interviewed, 6 February 2016). Mezirow explained this process of transformation as follows: when there’s a realization that misery could be a contributor to inner changes within self, there will be observation of roles, relationship and plan of practical ways to acquire knowledge and skills to help oneself to follow up the planned steps gradually well, then the practical trial of new role (Mezirow, 2009; Nilchaikovit & Juntrasook, 2009), would start in steps similar to the explanations of Cassandra Vieten, which stated that a person would start practicing when he finds a structure or method suitable to himself (Harryman, 2010).

4. Intention

It was found that some of the participants mentioned that they had

intention of taking the subject of attentive listening to use it with their friends and families: “I know that listening beneficially makes us understand patients more when I am helping them during the physical therapy, I plan to use it with friends. Listening to my friends makes me understand them more and more. I also get to know how I feel while listening to them. It helps me chose the things on what should be said, and what should not be” (Participant #2, interviewed, 6 February 2016). “I am more careful with talking now. I am more thoughtfully before saying anything out” (Participant #3, interviewed, 6 February 2016). “When I pay attention on listening to my mother, her tension is lessened. She is more open to hear my reasons, not that there’s no argument nowadays, but it has decreased and also more comforting now” (Participant # 7, interviewed, 6 February 2016). One of the participant mentioned on the topic of doing best to take care of patients as follow: “I see them as one of the relative. I try to empathize that if this is okay that if I am the one being the patient here. What would I want. I just want them to get a good feelings in return. It feels good that I am able to fully take care of them”(Participant # 8, interviewed, 6 February 2016). Therefore the fact that

participants had the intention to take this knowledge from this experience that they gained and all that they learned to a beneficial use of self-transformation even though in a different circumstances. Their different reasons were seen as the first important step to help them continuously practice in their daily routine which would eventually lead to the genuine inner growth.

5. The continuation of practices until it becomes a part of one’s life

The continuation of practice in our daily routine resulted in inner growth of the participants. It was also noticed that the behavioral changes, such as ability to control their temper and the sympathetic feelings towards other, helped some participants to become more calm after visiting the hospice patient: “I reevaluated myself I found out I am a better listener. The listening attitude has changed me. Earlier when I use to get up set, I just swing a bad facial expression, raising voice. Now those close to me said I don’t swing my face so much. They thought I had been on a course at the temple” (Participant # 4, interviewed, 6 November 2015). Moreover, researchers noted relaxed gesture and a softer tone of speech. They thought I had been on a course at the temple” (Participant # 4, interviewed, 6 November 2015).

It was also noticed and found that these kind of changes which helps inner growth had routed into the hearts of participants. Their way of life is now progressive and never go back to the same old structure. A participant mentioned a change in the relationships in her family that: “My relationship with my mother improved. I listened to her and she also started listening to me, and we were able to talk to each other more comfortably than before” (Participant # 7, interviewed, 6 February 2016).

6. Sharing and Learning

It was found that researchers and participants had an opportunity to exchange and learn from each other at least once a month for the period of three months of practice on taking care of hospice patients, including meetings with groups of doctors and nurses who took care of hospice patients ward, controled the situations and symptoms that occurred before meeting with the patients, all of which were aspiring factors in helping the inner growth of youth participated in the project. One of the participants noted in the personal diary that it felt good every time when I came together for sharing and learning of knowledge here: “I learned so much every time that there’s a meeting of discussion. I listened attentively and

came back to review myself. I saw myself with more courage” (Participant #6, personal journal). “I grew up every time. When there’s a meeting, I wanted to listen to advices of professors and experiences of friends” (participant # 7, personal journal). Nancy Southern mentioned the importance of building communities of learning together in the process of learning for changes that change of point of view in meaning perspective usually happened when facing with a different point of view and ways. If the point of views was coming from our loved ones, respected ones, trusted ones, we were more likely to be reflecting on our own point of view, the value process and assumed theory that we had a strong believe earlier (Southern, 2007 cited in Nilchaikovit & Juntrasook, 2009).

Conclusion

There were six main factors which influenced inner growth of youths from taking care of hospice patients as follows:

1. Self-awareness by being aware of present moment and can feel the misery that the self is going through from the new experiences that is coming into life and could realize one own potential, the values and meaning of life.

2. Contemplation by using a good judgment to be considerate of internal state and of external expression of own-self and by questioning the old belief structure and opening up to welcoming new experience coming into life.

3. Acquiring knowledge and taking action is a step of planning actions appropriately with self through acquiring more knowledge on the issues still in doubt, in confusion and unresolved problems and start the experimental by the way that it had been assign, if the experience from the experiments it was realized that this has not been able to resolve the minds problem, this new learning experience will be a starting point to start another learning process.

4. Intention or having a purpose towards objective which encourage inner growth at all time.

5. The continuing of practices until it becomes a part of one life by accumulating experiences and knowledge gained to become a part of life's routine which would results in changes of behavior and thinking structure from previous this also include the relationship with others and the surrounding society.

6. Sharing and Learning is an open ground for listening to various point of view from group of people having with similar learning objective, or from group

of people having different way of life from ours, this sharing and learning together makes us reflect on our attitude, believes, give a meanings to things and assumptions in the heart, besides that these type of learning promotes the inner growth process continuously and consistently.

Lastly researchers found out that restorative changes that occurred to their life is an important steps, which would greatly help the inner growth process occurring continuously and expand out to a selfless service to mankind and society truly.

Recommendations for developing research

1. In the case that the target groups are university undergraduate students, the visiting patients period could be extended from three months, or flexible according to the study time table of different courses, considering the time which could facilitate visiting the hospice patients of students continually and having the analysis of lesson learned sessions because changes in attitude and behavior in daily life is part of putting up questions on issues and incidents that one faces repeatedly.

2. The nurses in the patient ward who were directly responsible for taking care of patients and were nearest to

patients got an opportunity to join in the meeting on the analysis sessions with others. Nurses in the ward are considered to be the persons who are always next to the patients taking care of them, and being beside the doctors, the patients and their relatives most of the times. They would be a great contribution on providing point of view, thoughts and useful information for uplifting the method in improving mental and spiritual health of the patients.

3. Research team, doctors of the patients and volunteers should be together to describe details of the project, its consequence, answer the questions of patients and their relatives and request them to accept to participate in the project by verbal

conversation, in order to jointly create a correct understanding and lessened the affects feeling of the patients and their relatives.

4. This type of research should be repeated for participants of at least 15-20 people, since less number of participants would make it difficult to get a the total ole information and its variation, conducting this type of project repeatedly for many times will enable us to collect lots of information enough for examining, comparing and analyzing to find conclusion for developing a course to train volunteers to take care of hospice patients which can support in developing the spiritual dimension of youths.

References

- Asdornnithee, S. (2013). **Acquiring Knowledge through Contemplative Education Method: Epistemology and Methodology**. Nakhon Pathom: Contemplative Education Center, Mahidol University.
- Creswell, J.W. (2007). **Qualitative inquiry and research design: Choosing among five approaches**. (2nd ed.). Thousand Oaks, CA: SAGE.
- Learning How to Live: Hospice Teen Volunteers Receive More Than They Give.** (2004). [online], available from: <http://www.whatkidscando.org/archives/featurestories/hospice.html>. Retrieved June, 14, 2014
- Mezirow, J. (2009). Transformative Learning Theory. In J. Mezirow & E.W. Taylor (Eds.). **Transformative Learning in Practice: Insights From Community, Workplace, and Higher Education**. (pp.18-31). CA: Jossey-Bass.



- Nilchaikovit, T. & Juntrasook, A. (2009). **The Arts of Facilitation for Transformation: Handbook for Contemplative Facilitator.** Nakhon Pathom: Contemplative Education Center, Mahidol University.
- Harryman, W. (2010). **Cassandra Vieten (IONS) : Why We Need to Study Transformations of Consciousness.** [online], available from: <http://www.elephantjournal.com/2010/04/cassandra-vieten-ions-why-we-need-to-study-transformations-of-consciousness/> Retrieved November, 5, 2016