

## CHAPTER 1

### INTRODUCTION



We want to know what life and death is all about, but death has always been a mystery for all of us, and it will remain so.

In Belgium I first faced death at home, later in the hospital as a nurse. These were my first experiences, and they taught me about the perception of death and dying in the West, where most people die in hospitals or in institutions. Later on, while working in Bangladesh, I observed that death had another dimension, it was much more a part of life: in every family children had passed away, and it was the custom that old people died at home. They were buried on the compound of their own family homes. During my sojourn in Thailand, it became apparent that there is a great influence of Buddhism regarding dying.

In all those different societies cultural and social influences are to be considered. I wanted to know more about these and about the care of the dying: I was interested in palliative care, a specialty which has emerged during the last decades.

The result of my exploration of the last few months can be summarized in one single question: How can the health care system answer the need regarding palliative care? This became the title of my thesis and also the question which I address throughout my thesis.

A significant development in the health-care provision during the last decades is the aging of the population and with this the increasing number of chronic diseases, characteristic for old age. The number of cancer and AIDS patients is also expanding. These are patients who need palliative care. Moreover there is a decreasing proportion of caregivers to caretakers (Stjernsward, 1993).

The need of palliative care will increase in the future and it calls for intervention from policy makers together with the medical professionals. The need for palliative care has become a political issue to be dealt with in the near future for there is not much time left.

The contents of this thesis include an essay, a proposal and an data exercise. In the essay, chapter two, I defined palliative care and explained briefly the background of palliative care. I tried to analyze if there is a need for palliative care in Thailand. By looking at the perception of death and dying in the West, I compared it to Thailand, in terms of changes in society and changes in medicine. I also looked at global needs and place Thailand in its context. Eventually I came to the conclusion that there is a need.

There will be changes necessary in the health care system to meet this need, and education will be part of it. The medical profession will have to play a substantial role in these changes and physicians are the people who have the power to introduce change. The training of physicians, therefore, is a priority regarding implementation of palliative care. Taking this into account I wrote a proposal aimed at: creating an addition to the existing curriculum for medical students concerning knowledge, attitudes and skills in palliative care. Moreover, the proposal endeavors to formulate recommendations about the realization of the implementation of palliative

care throughout the health care system of Thailand. This proposal constitutes the third chapter.

Physicians may have to be considered as agents of change related to palliative care, but nurses are the professionals who are closely involved in caring for terminal patients: they will build close relations with patients and families. For this reason and the need to explore the context of the proposal, the next part, chapter four, of the thesis is an exploratory study of which the aim can be formulated as follows: to define training needs for Thai nurses related to palliative care, taking into account the cultural aspects related to death and dying and the influence of Buddhism on the society's perception of death and dying.

Chapter five is a brief summary of my oral presentation together with the overheads which I used.

At the end of this work, in chapter six, the annotated bibliography is added, which covers my literature review. This deals with a much wider range than just palliative care and its educational aspects. Related topics are: the different aspects of death and dying, bereavement, the near death experiences, Buddhism in Thailand and Tibet, Thai culture and psychology of the Thai people.

#### Reference.

Stjernsward, J. (1993). Palliative medicine - a global perspective. In D. Doyle, G. Hanks and N. MacDonald (Eds.), Oxford textbook of palliative medicine (pp. 805-816). New York: Oxford University.