

Coloring Narrative Therapy for Hospitalization Patients of Hospice Palliative Care Wards without Special Psychological Test: A Case Report

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Abstract

Art therapy would help end-of-life care who hospitalized in hospice palliative care wards. This case report aims to examine Yeonmyeong (Prolongation of life) cure or spontaneous healing and so on have developed over the last 3 years. The case report provides an analysis of palliative care through coloring narrative therapy from torture and injection of ill treatment. Significant developments include the following: (1) The older persons who have chronic terminal cancers realize their here and now. (2) The patients have terminally accepted their end of life. (3) Their families were greeting adieu with their palliative care clients. In Korea, Yeonmyeong cure is approved by modern society patients and their families. Therefore, medical palliative care groups are thinking more well-being healing method for human being.

Key words: Approve of end-of-life, Coloring narrative therapy, Palliative care, Yeonmyeong cure

INTRODUCTION

Well-dying is a radical issue for modern society medical area nowadays. Yeonmyeong cure is a sensational issue of long-lasting life desire people. Many patients think that they will be survival recover beings in these days. Natural healing, that is to say, spontaneous healing means to save life from death through their metabolic immunity recovery in the forest nature or in the mountains. However, we are in basic end-of-life health-care environment. Hence, we think availability of end-of-life care. Therefore, we yield cost and quality of end-of-life care (The presbyterianism Church of Korea the 99th session general assembly hospital medical mission workshop p. 20). Human being is a holistic person, so hospice and palliative care need (p. 26).

Dying is a human and communal experience but is not a medical Event (2019 Korea Journal of Hospice Care, p.17).

CASE REPORT

Here, I will introduce end of life-related idioms. Euthanasia (-mercy killing) is contrast with passive euthanasia. We can see death with dignity, physician-assisted suicide, assisted dying, well-dying, natural death, advance euthanasia directives, and Medical Futility Law (2019 Korea Journal of Hospice Care, p. 10~11).

The other sayings as follows:

Uniform determination of death act. An individual who has sustained either

1. Irreversible cessation of circulatory or respiratory function, or
2. Irreversible cessation of all functions of the entire brain, including brain stem, is dead (2019 Korea Journal of Hospice Care, p. 6).

The Hospice palliative care is divided into holistic care, interrelated care, palliative care, and supportive care (The importance study on volunteer service and spiritual Care provider role for all-round care in hospice palliative care, p. 25).

I will show my patients' coloring therapy data. There are 6 types Palliative care. Table 1 shows hospice Palliative Care

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Steps of Coloring Narrative Therapy Results. The patient and his family are understood as these data.

DISCUSSION

View point of death in Won Buddhism is just seeing change and unchanged about death. They think that everyone has new started and has to prepare ahead in everyday life in Won Buddhism (Hospice Palliative Care and Clinical Art Therapy, p. 76(KOREAN Edition)).

This means that human life-death just like to Breath in and Breath out or asleep and awake, therefore like this life-death is not two sides directions but is one whole circle. Originally, there is no birth and death, the realized person knows this as change.

Like this, same is given to death and life value, therefore, death is life's basic origin and life is basic origin of death. That is to say, death is beginning from life and life is beginning from death.

In the truth aspects of one circle shape, there is not human death in fact. Death is physical body's change absent-to-disappear, so spiritual human is to exist eternally (p. 76). Death means not only flesh body appearing reality but also divided phenomena from life of disappearing body and flesh body.

Now let us examine the Philosophy of Hospice.

1. Hospice care and be behind a terminal patients, dying patients and their family. That is to say, hospice care unit is patients and their family
2. Hospice should help patients live as they can comfortable and full life
3. Hospice have to positively accept their life and accept death which is natural parts of life
4. Hospice is to be not lengthen or shorten of life but make full and abundant remnant life
5. Hospice helps to prepare death through advocacy and sufficient of needs such as physical, social, psychological, and spiritual needs by using all able satisfaction of patients and their families.

There are death stage theories.

1. Kubler-Ross death stages.
 - Denial

Denial stage patients' saying and behavior examples are as follows:

- Not serious speaking of symptoms like another person's matter.
- They turn the words promptly about speaking of death and never say about death.
- Publically they say "I don't believe it."
- Effort of non-medical therapy or healing through God.
- Don't asking of himself disease or symptoms.
 - Anticipating of naturally disappearing symptoms and refusing of treatment.
 - Don't recognizing of the radical change in body or appearance.
 - Slightly saying of disease.
 - Explaining of not yet die reason.
- Affirming of recover surely himself although he knows his disease.
 - (2) Anger
 - (3) Bargaining
 - (4) Depression
 - (5) Acceptance

2. Stage theory's Three Big Category

- Avoidance: shock, denial, distrust
- Confrontation: sadness, emotional reaction of loss
- Recovery: Returning of everyday life condition from sadness gradually.

Reaction of Death and Hospice care can be seen.

1. Fear
 - Fear of being unknown
 - Fear of loneliness
 - Fear of loss of family and friends
 - Fear of self-control ability loss
 - Fear of body loss and powerlessness
 - Fear of pain and suffering
 - Fear of identification loss
 - Fear of sadness
 - Fear of regression
 - Fear of cutting and corruption and burial

Table 1: Coloring narrative therapy outcome from hospice wards

Types	1 week	2 week	3 week	1 month	2 month	6 month	1 year
Recovery going out step			1				
Adieu saying step			1				
Nutrition absorbing step						2	1
Passing by step							
Don't accept their parents death						1	
Recognizing of their family's patient's death						1	

2. Depression and despondency
3. Anger and hostility
4. Sense of guilt and shame.

CONCLUSION

I have trained art therapy volunteer service since last 3 years in Wonkwang Hyodo Yoyang Hospital Hospice Palliative Care Wards. Here, I can classify as following types. We can see Table 1. The hospice palliative care results are as follows:

1. Recovery his health so goes out the hospital
2. Understanding of his life merits so takes his future life step of adieu
3. Continuously nutrition absorbing so keeps their lives together their family's care
4. According to the doctor's diagnostic decision so goes to future life with passing by
5. Patients' family recognizes their parents' health but they don't prepare to accept their parents' death and don't say their parents' death
6. Patients' family recognizes their patients' death so they say death.

These conclusions are used by time series investigation.

I read about moral problem related hospice. They are divided into eight types.

1. Autonomy
2. Veracity

3. Nonmaleficence
4. Beneficence
5. Confidentiality
6. Justice
7. Fidelity
8. Informed consent.

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