

# The Significance of Psychological Assessments for Well-Being and Quality of Life in Terminal Ill Diagnosis

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## **ABSTRACT**

As a critical medicine meaning in suffering plays a crucial role as terminal ill experience always accompanied several unwanted psychological and emotional sufferings. In the early stages of any terminal ill diagnosis cure becomes the primary concerned for both the patient and the family. However, in the face of medical helplessness psychological approach to terminal illness becomes essential to effectively deal with pain and non-pain symptoms. It is not a mere philosophical approach to terminal ill experience, but a humanistic approach that provides hope even in the face of inevitable death. The psychological approach to health and wellbeing becomes more essential as palliative end-of-life care aims to uplift the meaning making policy and purpose in suffering that contributed health to many. In fact, though there is no easy ways to deliver wellbeing of the whole and quality of life, but psychotherapeutic is an effective mechanism to deal with existential suffering, stress, loneliness, alienation, and discomfort usually inherit in the process of terminal ill experiences. The therapeutic aim is to minimize the existential issues that accompanied the terminal ill experience and act in the best benefit for the patient and family in clinical practices.

## **KEYWORDS**

End-of-Life care; Psychotherapeutic; Terminal illness; Emotional suffering; Mental disharmony; Quality of life

## **1. INTRODUCTION**

Cancer/terminal ill experience being pre-occupied with several unwanted ill experience is a worldwide phenomenon. In the course of illness patient usually undergoes several mental disharmony and psychological issues that makes life a living hell. Failing to acknowledge the psycho-emotional symptoms in terminal diagnosis greatly affects the patient health and sometime it worsens the patient physical ill condition. Health is a multidisciplinary term that consist the interventions of several medical professional teams including the

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psychologists, unlike the present existing health care system in India that acknowledge the physical pain symptoms alone and leaving the non-pain symptoms untreated. The psychotherapeutic approach to terminal health is a modern humanistic approach that aims at delivering the whole person treatment through its person centered therapy for quality of life even in the face of inevitable death. The psychotherapeutic approach has nothing to do with the philosophical approach of Sigmund Freud psychoanalysis towards the psychiatric patients, but purely goal oriented humanistic approach to one's illness

that address the ultimate needs of the dying individual for the wellbeing of the whole in any given environment. Thus, with an urgent necessity of the psychotherapeutic intervention in terminal diagnosis the present study has been form to uplift the palliative end-of-life care condition in India into its new horizon.

The study is form to identify the effectiveness of the psychotherapeutic intervention in the terminal ill experience and to ponder on how it delivers quality of life through its person center meaning making psychotherapy. The present study is an analytical approach on the existing literatures and documents through critical review.

## **2. THE CONCEPT OF PSYCHOLOGICAL APPROACH TO HEALTH AND WELLBEING**

It is the individual confrontation with the existential isolation, fear of death, anxiety, and meaninglessness in suffering resulted in inner conflict mainly those with advance medical ill experience. The concept of psychological approach to health is a psychodynamic, which is absolute practicable, concrete in its nature of existence, bearing positive impacts, and after all flexible in its approaches. The psychotherapeutic becomes essential as patients experience alienation, meaninglessness of life, feeling of being outcast in the society, and mental disharmony in the course of their terminal illness. When those confronted mental disharmony and psychological symptoms left untreated, the physical pain symptom treatment mostly produces negative results as mental wellbeing the core to patient recovery and healing [1,2]. However, the acknowledgement of distressing pain symptoms turns out to the most neglected areas of care resulted in leaving the terminally ill patients in the most traumatic conditions. The psychological approach to terminal care is a holistic approach that view human illness in associated with his/her biological, social, emotional, and spiritual needs that need special consideration in the clinical practices.

The fundamental beliefs of the psychological approach is to acknowledge the isolation, hopelessness, and meaninglessness that patient usually experience in the course of their illness and to inspire the dying individual that they are still in the condition of limitless achievement possibilities. It is also to help the patient in realizing that they have the freedom to exercise their responsibilities in fulfilling their wishes until the inevitable death strikes [2,3].

The uniqueness of the psychotherapeutic in terminal experience lies in its phenomenological inquiry towards the dying patient's ill experience by leaving no room for clinician personal beliefs, theories, and assumptions. The psychological intervention focus on encountering with the patient conscious experience and the sub-conscious issues that bothers the patient feeling through its humanistic psychoanalysis. More importantly, it explores and investigates the happening issues and place human experience in its central focus [4]. The aim is to acknowledge the inter-correlation between illness and social responsibility of a person and to strengthen the individual to face the existential challenges through its person center therapy. The psychotherapeutic approach to existential sufferings helps the patient to understand their existential issues that pre-occupied the individual and designs the methodologies to deal with it effectively in the clinical practices [5]. It also serves as a platform where the palliative end-of-life care staff can organize their tools and mechanism to meet the patient needs in the most effective ways. As an agent that responses to the patient needs in the face of medical helplessness and explores what it means to human in the light of limitless possibilities. Moreover, in working with the dying patient the psychotherapeutic approach to care helps in delivering patient self-awareness, freedom and responsibility associated with illness, the search for meaning in suffering, and effective coping mechanism against death anxiety and psycho-emotional challenges [6].

### **3. THE SIGNIFICANCES OF PSYCHOTHERAPEUTIC APPROACH OF CARE IN TERMINAL ILL DIAGNOSIS**

Palliative end-of-life care in an interdisciplinary approach with an ultimate aims to focus on pain and non-pain symptom management and to deliver quality of life through any possible means until the inevitable death strikes a worldwide phenomenon in the clinical practices. The psychological assessment is the key factor that plays important roles in dealing with patient physical discomfort, distressing pain and non-pain symptoms, emotional sufferings, and in quality decision making [7,8]. However, the psychological approach to care is an alien term in Indian medical setting, while in some regions it existed as a mere theoretical approach. On the other hand, the acknowledgement of the psychological dimension of care in clinical practices among the clinical staffs will enhance the quality health care in the palliative care unit. In developed countries psychologists are place in a forefront to help the psycho-emotional needs of patients, families, and the health care professional in the clinical setting. Looking at the nature of its existence the chronic illness, cancer, dementia, and respiratory ailments demands extensive amount of care and support, in which the intervention of psychotherapy has seen as an effective mechanism with extensive amount of positive outcomes. The inclusion of psychologists helps in examining the psychological consequences of the disease, treatment policy in patient best interest, and in releasing several built-up tensions along the disease continuum [9,10].

Moreover, with the recent development of the biopsychosocial-spiritual model of medicine in terminal ill diagnosis, the psychotherapeutic intervention becomes imminent mainly to deliver quality of life for the dying individual and the loved ones. The evolution of psychology to health science helps the terminal patient to explore sense of hope, give sense of comfort, certainty of

being respect and valued until they die. It restores the sense of dignity as being human apart from being with the terminal illness and deliver a peaceful death with meaning in it [11]. Moreover, it's a worldwide phenomenon that there could be no palliative end-of-life care without the psychological approach to care and it satisfy the meaning of what it means to be a good palliative care. The psychological intervention gives the patient supportive presence in the midst of several existential sufferings, helps in controlling physical pain symptoms, helps in recognizing purpose in life through systematic life review, reframing life goal with limitless possibilities, and helps the patient to focus on healing in the face of medical helplessness. However, failing to acknowledge those unwanted feelings like sense of hopelessness, burden to others and loved ones, loss of will to live, will resulted in worsening patient physical ill condition and sometimes led to suicidal activity [10,11].

The psychological approach to care is a person-centered therapy deeply rooted in human existential theory and practices; the mechanism that brings awareness about death and dying that makes every act counts. The therapy gives the patient a desire to live in the face of death anxiety, isolation, and the inner conflicts through courage to face the existential challenges and commitment over human responsibility towards his/her choices. Alongside the addressing of the patient psycho-emotional issues, the psychotherapeutic also helps the individual to embrace what life gives and to live courageously with curiosity. The prime focus of the therapy is to explore patient choices and the 'why' of living and the ability to do away with despairs and burdens. Most importantly the sense of ownership over life and death through its person-centered meaning making psychotherapy [6,12]. The therapy also serve as a guiding mechanism for the patient to live more authentically in relationship with life by taking responsibility over their choices that has the advantage of hindsight. The therapist on the other hand does not

impose their personal beliefs, rather act as a guiding factor that accompanied and built quality relationship between the patient and the clinicians. The authenticity of the psychotherapy lies in the fact the therapist itself is a human who experience the existential sufferings and psycho-emotional challenges with a prime focus to uplift the patient conditions through transformation experience and deliver quality of life. It focuses on the inter-correlation and intrapersonal nature of human existence that has no room for the philosophical dimensional approach to human existence in its clinical practices and respect human personal values, beliefs, and human limitation. In another sense, a wounded healer therapy recognizes the existence of inner conflict within self through its humility approach of to heal and be healing [13-15].

The difference between philosophy and psychology lies in the fact that the psychotherapeutic approach to illness is to uphold that everything in life has a meaning in it, meaningless is the process in which the meaning had not been discover yet. The psychological approach to illness and suffering prioritize the search for meaning in every human circumstances and human has the ability to self-discover and reflect upon their existence. Thus, the underlying principle of its therapeutic approach is to promote patient's authentic relationship with self, others, and the world and to promote self-awareness on responsibility and liberation over life, feeling, and choices. The aim of the psychotherapy is to liberate oneself from the captivity of their circumstances and to make them responsible for their life through active participation against the existential challenges [14,16]. However, in the face of inevitable death and suffering finding meaning and purpose is never an easy task that requires specific skills and techniques in the clinical practices. The psychotherapeutic approach enables the terminal ill patient to accept what had already happened and helps them to create a new worldview that gives

creative ways of living with an illness alongside the psycho-emotional challenges. Even in the faces the crisis of emotional instabilities, dysfunction, and death anxiety, it is the psychotherapeutic model of care that embraces the individual condition as it is and gives different worldview of life, which has meaning and purpose in it [4,13]. The therapeutic ultimate aim is to let patient experience freedom of choice over life and death, to widen the clinical domain by allowing the interventions of the socio-spiritual assessment, and to acknowledge the neglected areas of care in its clinical practices to produces quality of life and wellbeing of the whole. Thus, the therapy helps in minimizing the existential anxieties and a platform where the dying individual can construct a new worldview that suits them the best.

#### **4. CHALLENGES**

At present, the role of psychologists and its psychotherapeutic approach to care barely existed in the academic realm alone in most cases. The involvement of the psychological approach to terminal care mostly misunderstood with the psychiatric treatment and not an option even in the patient's choices of the treatment policy, due to its unavailability in its clinical practices. Terminal ill diagnosis is always a crucial moment for the patient and the family that requires the whole person treatment which includes the emotional suffering, mental disharmony and the psychological symptoms to deliver quality of life for the patient and the loved ones. Yet, the prime focus in Indian terminal diagnosis mostly deals with the physical pain symptoms alone while leaving the non-pain symptoms untreated. The reason could be the absence of the psychological approach to care in the curriculum of the oncologists and other clinicians as a whole. On the other hand if effectively implemented, as a critical medicine it could serve as a healing therapy and the meaning making policy in the face of medical helplessness, but the minimal availability of the clinical psychologists in its clinical practices is of the greatest

concern. The core emphasis of the psychological approach to terminal care is to make patient realizes on the awareness that they are in the possible condition of limitless achievements, to find meaning in suffering, and to understand the deeper meaning of life that serves as an effective coping mechanism when cure is not possible. Psychotherapy is an effective tool to deal with patient mental disharmony and emotional sufferings and to make the patient utilizes their limited leftover time in the most productive ways.

Moreover, in a country like India, which is a hub for the terminally ill patients the psychological approach to care is the need of the hour. The immediate challenge is to implement the psychological domain of care in the training of the clinicians and the involvement of the psychologists in the terminal diagnosis. Spreading awareness on the importance of the psychological dimension of care in terminal diagnosis and it has nothing to do with the psychiatric treatment among the people is also the emerging challenges in India today [17]. The

minimal availability of the palliative care centers with maximum needs is also another great concern.

## **5. CONCLUSION**

The needful task is to implement proper policy and structure of care of the palliative end-of-life care and the participation of the well-trained health or clinical psychologists in its medical team for quality assessment and positive health outcomes. Meeting the needs of the dying individual place the psychotherapeutic approach to terminal ill becomes the patient preference care as found by many experimental researches and the therapy that deliver healing as an alternative to cure in clinical practices. Not only the patient and the family, the therapy also enables the clinician working in the palliative care centers to be mentally and emotional prepared in the midst of hectic environment. The therapy also extend its domain and works effectively even in the bereavement period and enables the loved ones to have sense of recovery from their lost.

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