

Wishes before the inexorable finitude: before i die i want to...

Desejos ante a inexorável finitude: antes de morrer eu quero...

Deseos ante la inexorable finitud: antes de morir quiero...

ABSTRACT

Objective: To understand what students and health professionals wish for before the inexorable finitude. **Methods:** This is a phenomenological study, based at existential phenomenology, carried out with 50 students and health professionals. **Results:** The participants' wishes were related to: "personal fulfillment" (graduating, having a good job); "Family formation" (getting married, having children), "social ascension" (improving my financial condition); "Going on national and international trips" (visiting all of Brazil, going to Europe); "Pet acquisition" (having a dog, purchasing cats), "food consumption" (eating chocolate, eating a good pizza). **Conclusion:** The Being-before-the-inexorable-finitude individual demonstrates a higher concentration of wishes in the social and self-fulfillment dimensions, translated in the search for happiness, freedom, and peace. The approach to the process of finitude must be strengthened in health education, by promoting events that favor dialogue and self-knowledge.

Descriptors: Needs; Nursing; Palliative care; Death; Health Personnel.

RESUMO

Objetivo: Compreender o que anseiam estudantes e profissionais de saúde ante a inexorável finitude. **Método:** Estudo fenomenológico, fundamentado na fenomenologia existencial, realizado com 50 estudantes e profissionais da saúde. **Resultados:** Os anseios relacionavam-se à: "realização pessoal" (me formar, ter um bom trabalho); "constituição de família" (me casar, ter filhos), "ascensão social" (melhorar minha condição financeira); "realização de viagens nacionais e internacionais" (conhecer todo o Brasil, ir para a Europa); "aquisição de animais de estimação" (ter um cachorro, adquirir gatos), ao "consumo de alimentos" (comer chocolate, devorar uma boa pizza). **Conclusão:** O ser-aí-indivíduo-ante-a-inexorável-finitude revela-se com maior concentração de anseios nas dimensões sociais e de autorrealização nas Necessidades Humanas, traduzidos na busca de felicidade, liberdade e paz. A abordagem do processo de finitude deve ser fortalecida na formação em saúde, por meio da promoção de espaços que favoreçam o diálogo e o autoconhecimento.

Descritores: Necessidades; Enfermagem; Cuidados paliativos; Morte; Pessoal de Saúde.

RESUMEN


Objetivo: Comprender lo que los estudiantes y los profesionales de la salud anhelan en la inexorable finitud. **Métodos:** Estudio fenomenológico, basado en la fenomenología existencial, realizado con 50 estudiantes y profesionales de la salud. **Resultados:** Los deseos de los participantes se relacionaron con: "realización personal" (graduarse, tener un buen trabajo); "formación familiar" (casarme, tener hijos), "ascenso social" (mejorar mi situación económica); "hacer viajes nacionales e internacionales" (visitar todo Brasil, ir a Europa); "adquisición de mascotas" (tener un perro, comprar gatos), "consumo de alimentos" (comer chocolate, comer una buena pizza). **Conclusión:** El estar-ahí-indivíduo-ante-la-inexorable-finitud se revela con una mayor concentración de anhelos en las dimensiones sociales y de autorrealización en las necesidades humanas, traducidas en la búsqueda de la felicidad, la libertad y la paz. Se debe fortalecer el abordaje del proceso de finitud en la educación para la salud, mediante la promoción de espacios que favorezcan el diálogo y el autoconocimiento.

Descriptores: Necesidades; Enfermería; Cuidados paliativos; Muerte; Personal Sanitario.


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INTRODUCTION

The world has undergone countless and major transformations related to the human race, especially with regard to socio-historical conditions and technical and scientific conceptions⁽¹⁾. And these changes impact our lives on a daily basis, being an intermediate moment between birth and death. With regard to death, it is configured as a certainty and the most evident reality for human existence⁽²⁾. The complexity of understanding and accepting the experience with death and dying stands out, which ends up causing discomforts and yearnings⁽³⁾. This fact is associated to the fear of the unknown and to the feeling of attachment to not lose the conceivable and experiential, and before the inexorable finitude there is fear and denial⁽⁴⁾.

Throughout history, civilizations have built their own representations and ways of experiencing the issues inherent in finitude⁽³⁾. Nowadays, there is a transition from the death of homes to hospital environments, due to the phenomenon called “medicalization of death”, resulting from the construction of large hospital centers equipped with highly technological equipment^(1,3). Thus, modern death became the responsibility of the medical institution, ceasing to be considered a natural process and part of existential life, to be considered an event of pathological alteration and consequence of being affected by a serious disease⁽¹⁾.

Dialogue about death causes discomfort, since there is a confrontation with the inevitable and with the certainty of terminality. Although it has persisted since the beginning of humanity, the process of finitude is cause for distress, fear and agony^(1,5). It is noted that both patients and health professionals are not prepared to discuss or to deal with the process of illness and death, feeling incapable in the face of diseases that do not have curative treatment⁽⁶⁾. Therefore, it is ratified that death is seen as a failure to health professionals, as they feel helpless⁽¹⁾. Thus, the importance of training processes that prepare professionals for the daily reality of living is emphasized, in which death and losses are constantly present⁽¹⁾.

Thus, death becomes an event present in the hospital routine, highlighting the need to confront health professionals in the face of the terminality of life, especially the nursing professionals, responsible for direct care to patients⁽²⁾. In the meantime, it is emphasized that dealing with death provides gains to the human being, since it makes it possible to reflect and to

rethink their own human condition⁽⁶⁾. The results of a Brazilian study complement the argument, pointing out that the experiences are unique and, therefore, the feelings of being well and of the individuals' completeness are interdependent on the individual values and priorities⁽⁷⁾. It is also worth mentioning that the subjects' actions are guided by the values and beliefs that each individual brings with them⁽⁷⁻⁸⁾.

In this context, it is important to highlight palliative care, which consists of assistance provided by a multidisciplinary team, in an attempt to improve the quality of life of patients and their families, when they are facing a life-threatening disease⁽⁵⁾. The actions of this multi-professional team are based on early identification, impeccable assessment, prevention and relief of suffering and treatment of pain and other symptoms, whether they are physical, psychological, spiritual or social⁽⁵⁾.

In this context, the importance of reflecting on our own finitude is highlighted, in order to resignify the individual issues and issues that we have. Thus, in view of the aforementioned and the questions that pertain to “dying”, linked to the scarce literature on what healthy individuals would want, if they were facing death, the present study was carried out aiming to understand what students and health professionals want before the inexorable finitude.

METHOD

This is a qualitative study with a phenomenological approach, with the theoretical-methodological framework “existential phenomenology”⁽⁹⁾. It is ratified that through this methodological path, there is an understanding of the meanings and the unveiling of the human's senses of being, characterizing him “being-there-with” in his individualities and singularities, given in the daily life of living, circumscribed in the human world⁽⁹⁾, in which experimentation and experience are implied by the inexorable finitude.

Nowadays, existential phenomenology is used in order to envision care, through a new paradigm of care, going beyond the centered medical model, in search of care aligned with subjectivity, experience and experimentation of being⁽¹⁰⁾. In the meantime, phenomenology aims to understand the phenomenon, defined as what-is-shown-in-itself⁽⁹⁾.

Thus, in a phenomenological perspective, students and health professionals who were

experiencing a dynamic of confrontation with inexorable finitude were given a voice, in such a way that the experiments and manifestations could explain clues and remnants, only unveiled in the situation of experiencing the individual experience. It was taken into account the fact that death is a topic widely studied by the most diverse areas of knowledge, but without sufficient understanding of the aspects inherent to the sensation of experiencing and coping with death, since such experience is linked to anxiety^(6,8).

The physical individual who relates to the other individuals who come to meet him throughout his life is defined by existential phenomenology as “being” and it is as being that shows him in this daily life⁽⁹⁾. In this study, the entity was the student and health professional who were experiencing the dynamic “Before I Die I Want...”, which occurred during a palliative care mini-course held in September 2018 at a Brazilian federal university. It is emphasized that when interrogating the entity, the researcher accesses the being and seeks to unveil his senses⁽⁹⁾. In this perspective, we highlight that there is a constant questioning, in relation to the sense of being, since we need to better understand the human being in the world as a being-of-possibilities⁽⁹⁻¹⁰⁾.

The collection of information took place by the responses of the participants to the different moments of the dynamic, which was structured in three moments. Initially, the participants were instructed on the dynamics and each one received a piece of paper in the shape of a “tree leaf” and a colored pen. In the second moment, the participants were given 10 minutes, so that they could reflect on living and, later, write their last wishes before the finitude, in the assigned papers. The writing was free, and the participants could use words, phrases or text to represent their aspirations and desires. As the participants finished writing, they already stood up and glued the paper to the wishing tree, whose trunk was made of brown paper, with an approximate width of 20 cm and height of approximately 80 cm, with branches in its upper extension that represented the branches, where the participants glued the papers on which they had written their wishes. In the third moment, to close the dynamics, there was a reading and a dialogue about the aspirations and desires placed in the tree of desires, also addressing the aspects inherent to death, with explanation and sharing of the feelings and perceptions experienced and perceived during of dynamics.

After the end of the dynamics, the authors collected the “wish sheets” and performed the analysis of the data presented, based on existential phenomenology⁽⁹⁾, which comprises the following steps: vague and median understanding and interpretive or hermeneutic understanding. In the first moment, the essential meanings that emerged in the statements of the participants emerged and, grouped as categories, a posteriori, allowed the construction of Units of Meaning. For the elaboration of such Units, the individuals' wishes were related to the Human Needs Theory⁽¹¹⁾. This theory considers that human needs are hierarchized in levels, which are, in order of priority, physiological, security, social, self-esteem and self-fulfillment needs, and must be satisfied to some reasonable level or degree, so that there is motivation and satisfaction of the needs immediately higher of the Human Needs pyramid⁽¹¹⁾. It is pointed out that, at the first moment, there is no knowledge about being, being the entity that is demonstrated in the dimension of the facts⁽⁹⁾. After the vague and average understanding, the hermeneutic analysis revealed the meanings of this being, revealing facets of the phenomenon⁽⁹⁾. This unveiling took place, based on the meanings that emerged from the 50 students and health professionals, who experienced the dynamics in which they should think about death, in the light of existential phenomenology⁽⁹⁾, the theoretical and philosophical reference of this interpretation.

The study respected the ethical precepts and was approved by the Ethics Committee in Research with Human Beings of the public university (CAAE 48394515.8.0000.5153), prior to the realization of the dynamic; The Free and Informed Consent Term was read, and the participants confirmed their consent by signing it.

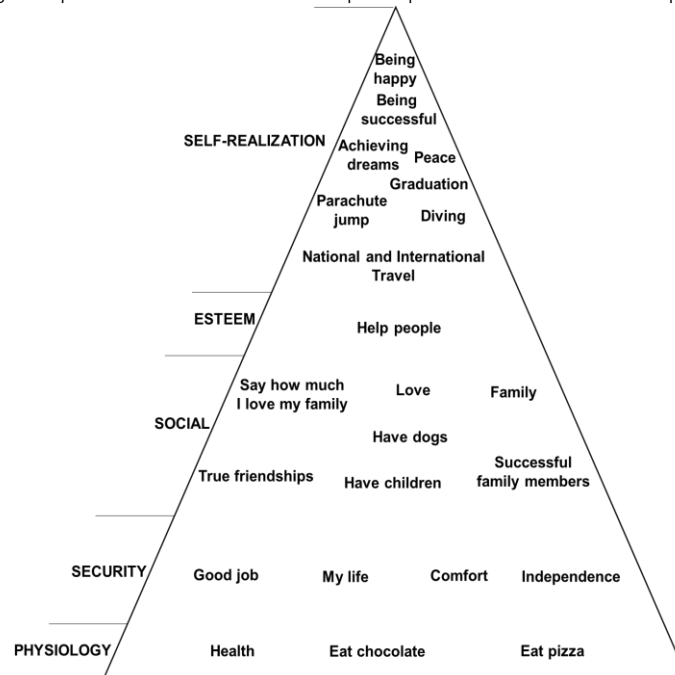
RESULTS AND DISCUSSION

Out of the 50 individuals who participated, 37 are female and 13 male. All were students and professionals in Nutrition, Nursing, Medicine and Psychology, aged from 19 to 67 years-old.

The desire expressed by being-there-individual-before-the-inexorable-finitude was used only once, with repetitions of “wishes” discarded. The analysis of the student and health professional's existential movement, which is confronted by its inexorable finitude, revealed what is configured as the last desire of these individuals, through five Units of Meaning: I crave

physiological aspects; Longing for security; I long for social issues; Cousin by esteem; Desire for self-realization, which can be seen in Figure 1.

Figure 1 - Digital representation of the wishes of participants in the Human Needs pyramid.



Source: It was created by the authors.

In hermeneutics, the being-there-individual-before-the-inexorable-finitude showed up in needs and desires, using the explanation of his desires before death in analogy to the human needs of a need; however, in an attempt not to reveal himself, he believes that the being may have spelled out some need, when, in fact, he intended to have another one satisfied⁽⁹⁾.

Yearning for physiological aspects

The participants made it clear that they want physiological aspects before they die, which refer to the first stage of the Human Needs pyramid. The participants argued that they would like to “consume food” (eat chocolate and pizza) and be “healthy”. It can be seen, from the aforementioned excerpts, that there was a demonstration of “elementary” needs on the part of the dynamics participants. It is noteworthy that the explanation of these needs signals the Reestablishment of the Balance Function (RBF), an aspect inherent to the human race, being characterized as ubiquitous and independent of action and location⁽¹²⁾. It is a general control function that automatically restores the processes of balance and stability that the entity, unconsciously, desires when it is in a situation of imminent terminality.

It is also noted that the results of deregulation of the RBF are perceived, through the feeling of anguish, boredom, loneliness and instability, in addition to fatigue and, ultimately, death⁽¹²⁾. Thus, it is clear that when aiming for the physiological and essential needs, the being-there-individual-before-the inexorable-finitude are, in fact, aware of the occurrence of unpleasant developments and, consequently, of a poor quality of death.

It is noteworthy that these needs are at the bottom of the hierarchy and encompass all the bodily impulses that exist to promote immediate survival and homeostasis of the organism⁽¹¹⁾. Thus, it is considered essential to address these needs before any others, and in order to be able to satisfy physiological needs, it is essential to have income and/or family contribution, given that we live in a capitalist society in which goods and items have value⁽¹³⁾. Corroborating this data, a Brazilian study found that individuals financially supported by their families have greater physiological needs⁽¹⁴⁾. However, it should be noted that the appearance of physiological needs may, in fact, be masking desires related to comfort or dependence⁽¹⁵⁾, therefore, even more detailed instigations are necessary in relation to the philological needs

desired by the being-there-individual-before-the-inexorable-finitude.

Yearning for security

It was also unveiled that the participants yearn for security, with this item having the second step in the Human Needs pyramid, closing the primary needs. The wishes of the participants in this unit are related to achieving financial "independence", having a "good job", living "their own life" and having "comfort". It is ratified that safety is a priority, in all conditions, having personal security, financial security and well-being is essential for the quality of life⁽¹⁶⁾. Assuming the importance of security, a North American study proposes that security needs be placed at the base of the pyramid, thus promoting reorganization in the hierarchy of needs in the theory of Human Needs⁽¹⁶⁾.

Furthermore, in view of the scores in this category specifically relating to "financial security", it is emphasized that, in fact, the absence of money and goods interferes and damages individual, family and social levels and, ultimately, prevents the access to better health conditions, directly interfering with the probability of achieving motivation and happiness⁽¹⁷⁾. Therefore, with the findings of the present study, we have to being-an-individual-before-inexorable-finitude, when sharing the world with others, presents the need for financial security, relating it directly to access to goods and to not facing death in a painful and traumatic way, since this is the greatest fear of being⁽⁶⁾. It is also confirmed that money is an instrument that can provide the satisfaction of other human needs⁽¹⁷⁾; thus, it is also understood that, when scoring on "financial security", in fact, the participants intended to fulfill other human needs.

Yearning for social questions

The participants' anxieties were also observed in relation to social issues, these referring to the third step in the Human Needs pyramid. In this step the needs are characterized as "psychological". This understanding was revealed by the statements represented in the clippings: "loving" and "saying how much I love my family", "having children", "having dogs", having "true friendships", forming "family" and seeing my "family members well successful". It appears that the relationship that the being establishes in his daily life, in the present study, is a relationship of

the being-with-the-others that is characterized by proximity, in which the being-there depends on the existence of another to live.

In this perspective, a study demarcated that having social cohesion and acceptance and, therefore, being integrated into the community is essential for the well-being of being, above all, because being is constituted in being social^(9,18). It is also signaled that social support is positively related to subjective well-being and, in contrast, loneliness is negatively associated⁽¹⁸⁾. From this point of view, research has shown that social participation is one of the promoters of motivation, helping to solidify lasting happiness⁽¹⁷⁾. A Brazilian study evaluated what was missing for healthy individuals and cancer patients to be happy and there was a difference in the response of the two groups in relation to "good interpersonal relationships", since the group of healthy individuals needed this item more than the individuals being treated adjuvant or exclusively in palliative care⁽⁷⁾. This issue can be explained by the fact that, in contexts of illness of being, their enclosure closes and their cycles of friendships and relationships become less extensive and more intense^(4,7).

It is also observed that the condition of human existence is an impediment to neutrality on the part of being, so it is expected that, when experiencing mourning, people will be affected⁽¹⁹⁾. Thus, when faced with his finitude, the being-there signals the social need, explaining that he needs to love and be loved and, as a result of this feeling, he cares about others, knowing that someone has watched over him simultaneously. In this way, the being demonstrates knowing that he will be supported in his departure process and that, even if he experiences physical terminality, he will remain in the memories and feelings of his loves⁽¹⁹⁾.

Striving for esteem

What follows are the excerpts that express the wishes related to esteem. It is highlighted that this fourth step, in the pyramid of Human Needs, has two aspects: recognizing ourselves as capable and the recognition of others regarding our tasks and roles performed. The participants' statements were tangent to the second aspect, since they demonstrated that, before dying, they would like to "help people". It was noticed that the being-there-individual-before-the-inexorable-finitude is preoccupied only with the secondary aspect,

striving for collaboration with others, in order to contribute to better living conditions.

It is emphasized that the subjectivities and feelings that the being carries with him are indispensable to be a singular and unique being⁽⁹⁾; in this respect, the being under analysis is the student-being/health-professional, and it is worth noting that their professional choice is often related to the sense of surrendering to their gift and thus caring for those in need⁽²⁰⁾. These findings are strengthened by a North American study that explained that medical residents, exercising their profession, when they are seen as figures of justice, respect and control, their esteem was increased, with the feeling of professional well-being and usefulness⁽²¹⁾.

Thus, triangulating the findings of the present study with the aforementioned, it is understood that the being has the need to prove useful and, therefore, will not carry the feeling of having lived in vain⁽²²⁾. In a Brazilian study, the authors showed that even in nowadays' technological conditions, we are still not prepared and humanized to welcome the pain and distress of someone who is at the end of life⁽²³⁾. In this context of search for esteem, while providing assistance, the being is in a situation of confrontation with his existential reality, given that he is aware of his condition of being-for-death, and it is in this place of confront that he will reach many essential aspects so that he can deal with his own dilemmas and desires⁽²³⁾.

Desire for self-realization

The participants meant that they had the desire to self-fulfill themselves, and this desire was related to the last hierarchical level of the Human Needs pyramid. The wishes presented by the participants that related them to this item were: "parachuting", "diving", "training", making "national and international trips", "making dreams come true", "being happy", "being successful" "and have peace". It is noticed that the feeling of freedom calls for being-there-individual-before-the-inexorable-finitude and this freedom may be linked to aspects that involve adrenaline, joy or inner peace.

It is understood that the apex of the pyramid is directly related to happiness, given that the being is motivated in the intention of having the reach of happiness. Thus, it is perceived in a Brazilian study to reveal that interior goods generate much more happiness⁽¹⁷⁾. It is ratified that

these goods cannot be acquired with money, and, in fact, must be experienced through the contemplation of existence⁽²⁰⁾ and the Source of existence⁽⁴⁾.

It is understood that this was the category with the highest number of responses due to the fact that the being is aware of its finitude and knows that it is necessary to self-fulfill to experience a death in a serene manner^(6,20) and without the possibility to load pending items⁽⁴⁾. In the case of needs that involve the potential of being, he is what he can be⁽⁹⁾, stripped of all morality and without all speculations in relation to himself, being able to do what, even having potential to be and have what he wants⁽¹¹⁾. And here, all that the being seeks is authenticity and happiness, expressed in freedom and peace, it should be noted that the being-there has this desire in the face of inevitable death. It is proven that individuals expressed the search for what they consider important for their lives and which is currently lacking.

Finally, in view of the experiential process of being-there-individual-in-the-inexorable-finitude explained in the present, there is a need to rethink the way we see and dialogue about the process of finitude⁽²³⁾. In this perspective, a study carried out in the Philippines explained that even elderly individuals, considered to be experienced in the art of living, would need effective learning, both at the social level and at the level of self-realization in order to understand more realistically death and dying⁽²⁴⁾.

Regarding the adopted framework, it was found that when triangulating the findings of the present study, in which human needs are intertwined and interdependent, with a Dutch and an American study, we understand that, in fact, the needs of the theory Human Needs should be interconnected at the same level and not be dependent at different hierarchical levels^(18,21).

CONCLUSIONS

The results of the present study allowed the understanding of the desires of being a student and health professional in the face of the inexorable finitude, expressed in the desires related to Human Needs. The analysis from an existential phenomenological perspective revealed that the meaning of the finitude of life was linked to physiological, security, social, esteem and self-fulfillment aspects, with a greater concentration of

desires in the social and self-fulfillment dimensions.

In view of the phenomenon unveiled, it is understood that being-there-individual-in-face of inexorable-finitude seeks, primarily, the satisfaction of inner needs, of being himself, aiming at authenticity, happiness, freedom and peace, which are translated in the search for self-knowledge. It is noteworthy, based on this research, that it is not possible to access and act together with the reality of the other who suffers, the patient and their family in the process of finitude, death and grief, without the health professional understanding their own perceptions, meanings and desires in the face of finitude and death.

Thus, this study presents as contributions to the work of Nursing and the health team, the reflection on the processes of finitude and death and the importance of their incorporation in the care of patients and their families. In addition, it signals the need for health professionals to seek training processes that unveil the meanings of their own being, that walk in the search for self-knowledge, so that they develop internal resources and skills to deal with coping and mourning of others, providing greater quality of life and finitude to those who care.

As limitations of the present study, there is an investigation of the phenomenon, from a comprehensive age perspective, without questioning based on age groups consistent with life cycles. In addition, it is confirmed that the work/function of the being under analysis has a pre-disposition, for better acceptance of the inexorable finitude, having no record of the wishes of the general population.

Finally, it is expected that this discussion of desires before the uncertainties of life related to finitude and death point to the realization of more studies that can qualify the care provided to the patient and his family, easing fears and anxieties and providing comfort, better understanding of the meanings of life and therefore greater happiness.

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