Good example of literature review on the process of hospice utilization

Sociology, Social Issues



Hospice caregiving is described as that which is patient and also family centred in a way that it is designed to cater for the needs of the patients (the survivor) as well as the needs of the caregiver. As the process of caregiving is initiated, many memories are formed too. These are the most touching memories in the patient's life as the same case supplies to their families as these are the last moments of their lives that they get to share with their close loved ones: the most important thing to note when initiating an end of life care. Serving as a caregiver, may come suddenly or after many years of treating a long prevailing illness. It is therefore advisable for the caregivers to maintain a personal observation within and do an evaluation of the strengths and weaknesses (Callone, 2006).

Unlike what many individuals perceive overload, caregiving is always rewarding although it is always accompanied with a great deal of unpredictable demands and costs. Although some patients might prefer to be treated from their residential homes, it is always advisable for the caregivers to have their own set self-care which will help them to take care of their loved ones at a closer view during crucial times (Hospice, 2002). Care givers sometimes find themselves not able to fulfil their duties of treating their patients in due times which sometimes lead to death or their patients suffering a lot due to the geographical distances that is between them. In relation to this, the caregivers are of recent taking initiatives to construct their own residents where their patients can be collectively treated and given special care as per their degree of urgency requests (Chapple, 2010).

Racism and discrimination has been one of the most fabric factors of

America that has adversely been of great impact to the minor population and the health care system generally and the nursing profession in general.

Differentiation in the type of services offered depend on the race, gender, ethnicity, ability, sexual orientation, and any other distinguishable characteristics through which human beings can be distinguished with (Monsen, 2009).

The American Nurses Association (ANA) is fully committed towards working on the matter of any form of discrimination or racism of any kind in the profession of nursing. This effect has been extended to the fields of training for nurses, in the nursing daily activities as well as places of work for the nurses. It is an organisation geared towards egalitarianism and fair promotion of justice in promoting access and the delivery of health care to all people without any form of discrimination (Callone, 2006).

Despite of the unending war against discrimination of individuals in terms of treatments by the nurses, there are factors that hinder the full implementation of this law. Differences in health of some Americans, has been one of the factors pulling down the fair-services-to-all program implementation. This is due to the fact that some minorities suffer from certain diseases five times more than the white Americans. On the other hand, the Chinese and the Vietnamese are the main people affected by cancer (Hospice, 2002).

The difference in the research methods involved require all the health care providers to come up with new strategies, incur costs of consulting experts in the minority communities, and ensuring of research of factors that affect minorities in a negative way are evenly distributed in communities. ANA

works under the beliefs that human beings deserve respect and health care service to at any costs to keep them healthy as a means to ensure efficient running of the economy (Chapple, 2010).

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