Putting Research to Work for Military Families



Spiritual Needs and Spiritual Care for Veterans at the End of Life and Their Families

Chang, B., Stein, N. R., Trevino, K., Stewart, M., Hendricks, A., & Skarf, L. M. (2012). Spiritual needs and spiritual care for veterans at end of life and their families. *American Journal of Hospice and Palliative Medicine*, *29*(8), 610-617. doi:10.1177/1049909111434139

SUMMARY: Male Veterans with life expectancies of less than 12 months and nine of their family members completed a semi-structured interview to assess their spiritual needs, the spiritual care they have received, and their satisfaction with spiritual care. Both Veterans and their families expressed a wide range of needs including the desire for Veterans to better understand some of their military and traumatic experiences.

KEY FINDINGS:

- Many participants defined spirituality in the context of religiosity, while others defined it in a secular manner.
- Spiritual themes included religious rituals, interpersonal relationships, support, and an opportunity to process guilt related to combat experiences.
- Veterans had difficulty describing the impact of their military experiences on spirituality, but many noted that their military experiences positively impacted their spirituality (e.g., increased compassion).
- Participants were very satisfied with the spiritual care received in the VA, but a few requested more frequent and longer visits from the chaplains.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Provide Service members and families a list of spiritual resources, including those offered by the military and in the community
- Partner with chaplains or religious leaders to support the spiritual needs of military family (e.g., inviting clergy to offer programs or classes in the family program facilities)
- Include spirituality as one component of wellness in their family education curricula

IMPLICATIONS FOR POLICIES:

Policies could:

- Continue to support chaplaincy service Service members and their families
- Recommend professional development for providers to learn about appropriate collaboration with clergy regarding spiritual care and end of life care issues for those they serve
- Encourage the development of training programs for individuals interested in working with military personnel who are nearing the end of their lives

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METHODS

- Patients who received palliative care at one VA hospital, had a life expectancy of less than 12 months, and had a family member or friend willing to participate were recruited.
- Veterans and their family members were asked questions about their spiritual needs and care.
- Veterans were asked about the effects of their military experiences on their spirituality.

PARTICIPANTS

- Seventeen male Veterans and nine family members were interviewed (100% of participants were White).
- The average age of Veterans was 70 years; 53% completed college, 47% completed high school.
- Fifty percent were Catholic, 40% Protestant, 6% Jewish, 6% endorsed no religion.
- Forty-four percent of family members were spouses, 33% were brothers, 22% were children.

LIMITATIONS

- The sample was small and homogeneous; these results may not generalize.
- Recruitment rates were not specified and could influence results.
- Data were collected from only one site, which could bias results.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Develop a spiritual need and care scale for Veterans and other patients who have a terminal illness
- Follow terminally diagnosed patients longitudinally to examine how spiritual care is associated with end of life outcomes and satisfaction with care for both the Veteran and family members
- Explore the most effective means of providing spiritual support to family members of terminally ill military patients

ASSESSING RESEARCH THAT WORKS







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