



KEY FINDINGS: Healthcare providers can be a source of knowledge and can help with decision-making about end-of-life care wishes. However, providers need to understand the key differences between patients who do or do not wish to talk about the end-of-life care they would want.

BACKGROUND

Research has described the benefits of people letting others know about the care they would want if they were seriously ill and unable to speak for themselves. While policy makers have promoted advance care planning, concerns persist about whether patients' end-of-life wishes are being honored. This has sparked interest in having older adults talk to family about their end-of-life care wishes. Many people welcome these discussions, but others avoid them. This study explored the experiences and attitudes of those who had discussed their EOL care wishes with family and those who had not.

STUDY METHOD

Participants were solicited from six West Central Florida senior centers and service organizations for a project funded by the Center for Hospice, Palliative Care, and End-of-Life Studies at USF. Thirty-six people participated in focus groups, answering questions about what inhibited and encouraged discussion of one's end-of-life care wishes with family or friends. Meeting recordings were transcribed and coded into categories based on recurrent themes.

RESULTS

Of the 36 participants, 17 had talked to family members about their end-of-life care wishes; 19 had not. Those who had not were younger, less educated, and less likely to have completed

written advance directives compared to those who had engaged in family discussions.

Five themes emerged from the focus groups:

1. Proactive vs. passive/reactive
2. Comfort in talking about death
3. Response to family resistance
4. Knowledge acquired
5. Health care providers role

Proactive-reactive

Those who had discussed their end-of-life care wishes were more proactive in their daily lives and talked about advance care planning as a responsibility. In contrast, participants who had not discussed end-of-life wishes or completed advance directives, seemed less concerned about planning in general.

Quote: "People who get their ducks in row. I hate people like that. Plan, plan, plan.... Why can't you just h

