

A study on a Comprehensive Model of Influence Factors and Outcomes of Ego Integrity of Elderly Patient in Long-term Care Hospitals

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Abstract. This study was conducted to test the adequacy for model of influencing factors and outcomes of ego-integrity among elderly who admitted in long-term care hospitals or under outpatient treatment. Results were as follows the influencing factors on ego integrity among elderly were age, pain, empathy, spirituality and ego integrity of elderly was influencing factor on death attitude among elderly

Keywords: Aged, integrity, influencing factor

1 Introduction

Improvements in standards of living and medical technologies have consequently increased the average life expectancy and the population of the elderly. What we face along with this rise in the population of the aged is an increase in medical expenses because most of the aged are likely to live the rest of their lives with one or more of these chronic diseases. When it comes to how to treat the chronic diseases, they would not need more advanced medical devices or technology but they would rather need assistance from other individuals who would support them with their disease management and daily lives. That being so, many of the elderly patients are hospitalized or receive outpatient treatment in long-term care facilities. Meanwhile, Erikson presented ego integrity as a developmental task to be achieved in one's old age. Ego integrity is understood as how one harmoniously combines his past life with both the present and the future, and when the person integrates the past with the present and the future, he is given a chance to learn the significance of life, to be satisfied with the present and even to have ideas and attitudes that are so positive which would lead the elderly to eventually accept his/her death [1]. In light of that, in order to improve the well-being of the aged, first thing to do is to help elderly to accomplish ego integrity. And which factors have positive and/or negative influences on ego integrity also need to be examined. Based on these works, strategies to enhance the positive influencing factors or to relieve the negative influencing ones might be established.

Previous studies reported that the ego integrity of the aged is related to the demographic characteristics [2] and religion and physical[1] and/or social-psychological factors [3]. In addition to these correlates, spiritual well-being has been shown to be associated with ego integrity of elderly from other studies. Some research reported that an aged persons' spirituality such as how one treats religion or how actively one participates in religious activities has influence on the ego integrity [4][5]. As already said, ego integrity is affected by all those complex factors from the physical variables to psycho-social and spiritual variables. However, many researches elaborated that social support or social interaction are key variables to impact on ego integrity [2][6]. In other words, if one wants to improve ego integrity, one first need to build up a good relationship with other people, and empathy is believed to be a prerequisite of one's keeping good relationships with others [7]. In the meantime, we can also regard changes in how one sees death as one of the other outcomes of ego integrity [8]. The elderly who has succeeded in integrating one's ego positively accepts his death but in case of the one who has failed ego integrity, one would have a negative attitude towards death, such as fear and anxiety.

Based on the influencing factors and the outcomes of ego integrity proposed by previous research, the study model has been derived as in Figure 1, and all those factors included in the model were investigated for the elderly who live at their home in the community. This study aimed to test whether the hypothetical model of ego integrity would appropriate to explain the ego integrity of the elderly who are currently being hospitalized and /or getting outpatient treatment in long-term care hospitals.

2 Method

2.1 Study Subjects

Of the elderly at ages of 65 and older who are staying and/or receiving outpatient treatment in two long term care hospitals located in Gyeonggido and Chungcheongbuk-do, this study selected a total 99 of them as research subjects through convenient sampling.

2.2 Research tools

The ego integrity of the subjects were measured by the elderly's four point-scale ego integrity tool [9] consisting of 16 items which was reported to have good content validity and reliability. Pain were measured by a 10 point scale NRS(Numeric Rating Scale), and as for activity of daily living such as dressing, washing one's face, bathing, eating a meal, traveling, using the restroom, controlling urine and feces, how much assistance was needed in those activities was measured on a three point scale. Three items of questionnaire with a five-point scale which was developed by Lawston and colleagues (1982) and revised by Jang (2006)[10] was applied to measuring the

perceived health status. A Korean version of IRI(Interpersonal Reactivity Index)[11] developed and verified construct validity and reliability by Davis (1980)[12] was used for measuring the empathy. In terms of social support, this study used the scale that Lee (2010)[13] revised with 12 items on a five-point scale based on MMPSS(Multidimensional Scale of Perceived Social Support) originally developed by Zimet et al (1988). As for spiritual well-being a Korean version of a SWB(Spiritual Well-Being) scale [14] originally developed by Paloutzian and Ellison (1982) was used. This Korean version instrument has 20 questions on a six point scale. 12-item of reconstructed one of death attitude scale developed by Kim (2010)[15] was adopted to measure death attitude in this study.

2.3 Analysis

A multiple regression analysis was performed to identify the significant influencing factors and the outcomes of ego integrity.

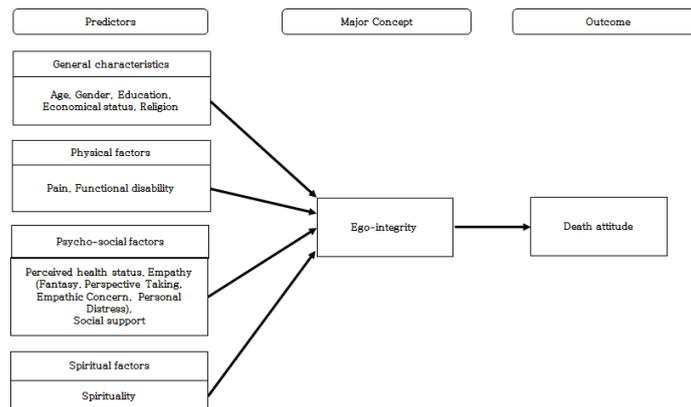


Fig. 1. Study model of influencing factors and outcome of ego integrity

3 Results

68.7% of the subjects were female and 31.3% were male. 45.5%(45 of the research targets) turned out to be at the age of 65-69. From the results of regression analysis, age ($\beta=.23$, $t=2.15$, $p=.017$), pain ($\beta=.31$, $t=1.87$, $p=.032$), and fantasy ($\beta=.20$, $t=1.94$, $p=.028$), perspective taking ($\beta=.20$, $t=1.94$, $p=.028$), personal distress ($\beta=.34$, $t=3.23$, $p=.001$) and spiritual well-being ($\beta=.23$, $t=2.11$, $p=.019$) were appeared to be significant influencing factors. The variance of the ego integrity explained by those

factors was 35% (Adjusted R=.35), and that was statistically significant (F=5.24, p<.001)(Table 1). Of all the factors, the most influential one was empathy with personal distress, Meanwhile, influence of ego integrity on the death attitude was shown to be statistically significant (β =.19, t=1.90, p=.030) and the higher the ego integrity, the more positive attitudes toward death (Table 1).

Table 1. Influencing Factors of Ego Integrity and Death Attitude (N=99)

Outcomes	Predictors	β	T(p)*	R ²	F(p)	
Ego-integrity	Age	.23	2.15(.017)	.35	5.24 (<.001)	
	Pain	-.31	-2.15(.017)			
	Empathy	Perspective Taking	.20			1.94(.028)
		Fantasy	.25			2.02(.023)
		Personal Distress	-.34			-3.23(.001)
Spirituality	.23	2.11(.019)				
Death attitude	Ego-integrity	.19	1.90(.030)			

*One –tailed test

4 Discussion

According to the study results, ego integrity is significantly influenced by variables of age, pain and empathy such fantasy, perspective taking, personal distress and spiritual well-being. Among demographic characteristics, only age was appeared to have a significant influence on ego integrity, and the older an aged person, the higher the ego integrity. In case of the aged living at home in community, it had been shown that the older they are, the worse they physically feel, and they are more severely suffered with any activities. The previous researches presented that age has negative influences on ego integrity [6], however, the result of this study was different from that of other study. This study found that as they get older, they tend to accept their past days by integrating the present with the future. The findings also reported that the more severe the pain, the lower the ego integrity, and that was what corresponds to the result of the previous research [1] reported that chronic pain negatively affect ego integrity of the aged. Of empathy, sub-categories to be significantly related to ego integrity were perspective taking and fantasy belong to cognitive empathy and personal distress belongs to affective empathy. With a higher level of the cognitive empathy, the elderly have good understanding of others and build up harmonious interpersonal relationships [7], consequently cognitive empathy could have a positive influence on ego integrity. Meanwhile, empathy with personal distress makes one experience a sense of discomfort because of connecting with others' painful experience [11][12]. Even though empathy with another person's suffering helps one to truly understand the person himself, it also give one some psychological pain or burden. The study result showed that the greater the spiritual well-being, the higher the ego integrity, and that was the same results as reported from previous research [5]. In addition, ego integrity was presented to be positively associated with positive death attitude. Same results had elaborated in other study [8].

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