Philosophical perspectives on the care of elderly people from the viewpoint of advanced practice nurses in Japan

Tsukasa Miyama · Ann Gallagher · Kyoko Numoto
Noriko Kawahara · Mikiyasu Tanabe · Yuki Takenaka

INTRODUCTION

In Japan, there is a declining birthrate and an increasing number of elderly people. The number of elderly people with dementia also continues to increase. It is an urgent task to improve the quality of elder care by promoting individualized nursing, considering the way of living and thinking of individuals.

The feudal era values of the Samurai, who dominated society over Japan’s long history, such as selflessness and strict loyalty to the group, have been formed as social values and are said to still remain to some extent. In addition, it is said that Japanese ethics emphasizes “relationships,” which comes from the concept of “interdependence” (mutuality) in Buddhism and “companionship” (friendship and human relationships) which is the basis of Confucianism. Furthermore, social norms, such as “leaving a decision to others” or “filial piety” also function in today’s Japan. The value of “filial piety” involves taking care of one’s parents as being one’s duty as an adult.

The values created by historical and social backgrounds suppress one’s own thought and value relationships with others and influence the ideas and values of elderly people in Japan. It may also be difficult to express myself well by dementia. The Japanese Geriatric Medical Association (2012) indicates that “elderly patients should bear in mind that their opinions are unstable and fluctuating and may not be able to fully express themselves”.

In elder care, nurses need to imagine or consider the feelings of elderly people.

“Guidelines for protecting the dignity of elderly people receiving medical care and nursing” created by the Japan Nursing Ethics Society (2015) present eight situations.

There are many situations in which aid must be invited from others due to deterioration of various physical and cognitive functions. The existence of values such as having to endure and accept help care from family members and others are important. In order to fulfill the
role of a patient's advocate, the nurse must understand the situation of elderly people and provide individualized care.

Based on this background, we invited advanced practice nurses to share their perspectives on philosophical perspectives of nursing elderly people.

**Literature review**

Among the special characteristics of such elderly nursing, a literature review was conducted to examine ethical perspective on nursing elderly people in Japan.

With the keywords of "elderly" "nursing" "ethics," we used Japan Medical Abstracts Society (Ichu-shi Web) to search for original papers from the past five years, 2012 to 2017.

As a result, 8 cases concerned support for decision making (Miyama, 2016, Ran, 2016 Ueda et al., 2016, Inonooku et al., 2015, Kaneyama, 2015, Okamoto et al., 2015, Sadanaga et al., 2014, Miyaki et al., 2013, and 5 cases concerned suppression were applicable (Imamura, 2016, Yokoyama et al., 2016, Shibata, 2014, Sugiyama et al., 2014, Wakamiya, 2014).

From this literature review, an important theme relates to ethical care of elderly people in Japan. This includes decision-making and surrogate decision-making and it is not just about respecting the individual's will, but rather about Japanese historical culture. It was suggested that consideration should be given to multifaceted consideration including the background and the relationship with the family members of elderly people. There is also careful ethical consideration on the way physical restraint has been used of elderly people.

However, there was no research clarifying the philosophical perspectives of advanced practice nurses regarding the promotion of ethical nursing practice for elderly people in Japan.

Therefore, in this research, the aims were to clarify the philosophical perspectives of nurses involved in advanced practice in elder care in Japan and to obtain suggestions that lead to better nursing.

**Research Question**

1. What is the philosophical perspectives of nurse performing advanced practice (hereinafter referred to as advanced practice nurse) in elder care in Japan?
2. What do advanced practice nurses consider to be better practice of elderly care nursing?

**Research significance**

The number of nurses engaged in care of elderly people in Japan will need to increase, leading to more nursing support tailored to the characteristics of elderly people in Japan. In
Philosophical perspectives on the care of elderly people from the viewpoint of advanced practice nurses in Japan. In addition, nurse education will also need to respond to the needs of nurses who practise elder care. Insights from this, and other such studies, will inform education provision with a view to increasing the satisfaction of elderly people with the care they receive.

**Definition of terms**

Advanced Practice Nurse: A nurse who pursues and practises high quality nursing and a nurse who is a Certified Nurse Specialist in Gerontological (hereinafter referred to as CNS), or nursing who has completed a Certified Nurse Specialist course in Gerontological nursing.

Philosophy: The fundamental nature of things, the love of knowledge and the quest for truth. In this study, this is a fundamental element in delivering high quality nursing care for elderly people.

**METHOD**

**Participants and recruitment**

1. Participants: A nurse who practices nursing for elderly people who participates in a research group of nursing professionals for elderly people, and who gained consent by understanding the purpose of this research.

**Data collection**

1) Data collection day: May 2018
2) Data collection method: Focus group interview (FGI): 90 minutes
3) Interview themes:
   (i) What are the perspectives of advanced practice nurses concerning elderly people in Japan?
   (ii) What examples are there of exemplary ethical elder care services?
4) Data collection location: Room at researchers’ institute for about 30 people.

**Data analysis**

We analyzed the content of the transcription obtained by FGI qualitatively as data. Analysis of the content of the transcription was performed using the following procedure.
(1) Carefully read and encode the content of the transcript.
(2) Encode and collect similar categories, categorize them, and name them.
(3) Share the process of (1)(2) with joint researchers, discuss with them and increase the relevance of the contents.
From the obtained categories, we examined the philosophical perspectives concerning elderly nursing by advanced practice nurse in Japan.

**Ethical Considerations**

The project proposal was considered by the University of Surrey self-assessment ethical review process, and approved by a Kyoto Tachibana university ethical review board (No18-2). Researchers explained freedom of participation in research and freedom of withdrawal of consent, and concerning the protection of personal information.

**RESULTS**

**Attributes of participants and situation of interview**

Attributes of Target, age is 30's - 50's, female (7), male (1). Five of the participants were in medical facilities and three were in the aged facilities.

Four were CNS and four were CNS candidates after graduate school CNS course was completed. The interview time ended as scheduled in 90 minutes.

**Philosophical perspectives of nurse in elder care in Japan (table1)**

As a result of organizing the results obtained by FGI for nurses who practice nursing for elderly people, the following four philosophical perspectives were derived

1. Maintaining dignity as a person
2. Being by the side of elderly people (=YORISOU)
3. Accepting that aging is natural
4. Maintaining the connection of their life

In the text, categories are indicated as 【】 and subcategories as 《》.
### Table 1. Philosophical Perspectives of Elderly Nursing Caught from the Viewpoint of Advanced Practice Nurse in Japan

<table>
<thead>
<tr>
<th>Philosophical Perspectives</th>
<th>Category</th>
<th>Subcategory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintaining dignity as a person</td>
<td>Involving as a person even with dementia</td>
<td>I don't want treated as a person not to know anything.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Even if dementia, I want you to greet and involve as a person.</td>
</tr>
<tr>
<td></td>
<td>Carefully care of everyday life in daily</td>
<td>I want to receive careful day-to-day care.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I want to spend to excrete as self-reliant as possible and feel comfortable.</td>
</tr>
<tr>
<td>Being by the side of elderly people (＝YORISOU)</td>
<td>To make it in accordance with the intention of the person</td>
<td>It is good to be able to fulfill his/hers thoughts and wishes.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I want to accept convinced care.</td>
</tr>
<tr>
<td></td>
<td>To try to understand the person</td>
<td>I want you to understand me.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I want you to make efforts to know my thoughts.</td>
</tr>
</tbody>
</table>
|                            | To draw out the needs, to make a thought | It is important to capture the needs of the elderly by being near elderly people.
|                            |          | I want you to feel with my idea.                                            |
|                            |          | You should be able to welcome you at the place where there is a person who will draw a little nuance. |
|                            |          | I would like you to read and enjoy what you want and happiness.             |
|                            |          | To recognize, to have the ability to sympathize.                           |
| Accepting that aging is natural | Excessive medical care hinders natural aging | Correct excessive medical care at hospital.                                |
|                            |          | Treatment is interfering with natural aging.                              |
|                            |          | The number of elderly people who can not return to their original lives by active treatment is increasing. |
|                            | Discussing with elderly person, family, professionals and thinking about how to spend the last period | It is important that you have the opportunity to choose while consulting with yourself, the family in the side, each occupation. |
|                            |          | It is time for people to think how to spend their terminal days.            |
|                            |          | There is a relationship with the family, even the elderly may do CPR (cardiopulmonary resuscitation). |
| Maintaining the connection of their life | It is good to let you stay in the familiar environment and people's involvement | Some people can live if you are involved with familiar areas and people.   |
|                            |          | It is good that you can spend by being supported by the familiar environment and people. |
|                            |          | It will be a good last term to die at home.                               |
|                            |          | I want to spend the last in a familiar person, place.                      |

1. **Maintaining dignity as a person**

   This philosophical perspectives consisted of two categories: **[Involving as a person even with dementia]** [Carefully care of everyday life in daily].

   **[Involving as a person even with dementia]** is derived from *I don't want treated as a person not to know anything* *Even if dementia, I want you to greet and involve as a person*, even if there is dementia as a person I extracted it from the viewpoint that I care
about it carefully.

【Carefully care of everyday life in daily】 is derived from the subcategory 《I want to receive careful day-to-day care》, 《I want to spend to excrete as self-reliant as possible and feel comfortable》. I extracted from the viewpoint that the nurse’s carefully care of everyday life such as excretion care is important.

Based on the two categories of 【Involving as a person even with dementia】 and 【Carefully care of everyday life in daily】. whether they have dementia or not, maintaining dignity as a person and of supporting carefully daily life was caught as a philosophy of elderly nursing.

2. Being by the side of elderly people (=YORISOU)

This philosophical perspectives consisted of three categories 【To make it in accordance with the intention of the person】 【To try to understand the person】 【To draw out the needs, to make a thought】.

The category 【To make it in line with the intention of the person】 was derived from the subcategory 《I want to follow his/her intention》 《It is good to be able to fulfill his thoughts and wishes》 《I want to accept convinced care》.

The category 【To try to understand that person】 was derived from the subcategory 《I want you to understand me》 《I want you to make efforts to know my thoughts》 and it was extracted from the perspective to understand elderly people themselves.

The category 【To draw out the needs, to make a thought】 was derived from the subcategory 《It is important to capture the needs of elderly people by being near elderly people》 《I want you to feel with my idea》 《You should be able to welcome you at the place where there is a person who will draw a little nuance》 《I would like you to read and enjoy what you want and happiness》 《To recognize, to have the ability to sympathize》. I extracted from the viewpoint that the nurse have to draw out the needs that elderly people do not express.

Based on the three categories of 【To make it in accordance with the intention of the person】 【To try to understand the person】 【To draw out the needs, to make a thought】 elderly people often do not clearly express their own thoughts, so to draw out the needs of the elderly people and aiming at care in line with the intention of elderly people was caught as a philosophy of elderly nursing.
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3. **Accepting that aging is natural**

This philosophical perspectives consisted of two categories **[Excessive medical care hinders natural aging]** [Discussing with elderly person, family, professionals and thinking about how to spend the last period].

The category **[Excessive medical care hinders natural aging]** was derived from the subcategory **(Correct excessive medical care at hospital)** **(Treatment is interfering with natural aging)** **(The number of elderly people who can not return to their original lives by active treatment is increasing)** **(Do not take excessive medical care)**, and It was extracted from the viewpoint that the reality the excessive medical treatment to elderly people is being done and the natural aging is hindered returning to the original life and it is in a state where they can not return to original life.

**[Discussing with elderly person, family, professionals and thinking about how to spend the last period]** was derived from the subcategory **(It is important that you have the opportunity to choose while consulting with yourself, the family in the side, each occupation)** **(It is time for people to think how to spend their terminal days)** **(There is a relationship with the family, even the elderly people may do CPR (cardiopulmonary resuscitation))**, and elderly people often live by relationship with the surroundings. Therefore, we extracted from the viewpoint that discussion with family is important and that there is a necessity to think about how to spend the last days talking with professionals who support decision making.

Based on the two categories of **[Excessive medical care hinders natural aging]** [Discussing with elderly person, family, professionals and thinking about how to spend the last period], the importance of accepting aging as a natural course was caught as a philosophy of elderly nursing.

4. **Maintaining the connection of their life**

This philosophical perspectives consists of the category **[It is good to let you stay in the familiar environment and people's involvement]** and derived from subcategory **(Some people can live if you are involved with a familiar area and people)** **(It is good that you can spend by being supported by the familiar environment and people)** **(It will be a good last term to die at home)** **(I want to spend the last in a familiar person, place)**.

From the viewpoint that elderly people should be able to spend their time in relation to the familiar environment and people, keeping the connection in life until then was caught as the philosophy of elderly nursing.
DISCUSSION

The philosophical perspectives of Japanese nursing care for elderly people obtained by this research were discussed together with the characteristics such as Japanese history and cultural background. In addition, we will obtain suggestions for improving the quality of elderly nursing in Japan. Incidentally, what is indicated by “italic” in the text is the actual story included in that category.

Eight of the study participants, four were CNS and four were CNS candidates after completing the postgraduate CNS course. Therefore, based on knowledge and experience in working as a CNS or knowledge and experience in the process toward acquisition of CNS, it is a subject who is working on daily practice of nursing to aim for better elderly nursing. From that point, we gained a perspective on the valuable elderly nursing philosophy.

First of all, the philosophical perspectives of “Maintaining dignity as a person” is a part which should not be forgotten as a philosophy of nursing before the historical cultural background of Japan. In the nursing ethics code indicated by the Japan Nursing Association (2003), “1. Nurses respect human life, human dignity, and rights. ~ (abbreviation) ~ Nurses should stand on the basis of the protection of life, personality, and dignity anytime in making judgments and conducting themselves, should respect self-determination of people while securing access to information and opportunities for decision making, and should always treat people with warm personal thoughtfulness. Nurses are required to have high ethical standards.

Elderly people who have to receive assistance from others in their daily lives have many different circumstances and may feel sorry for their caregiver. There are many situations that lose dignity. That is why nursing staff should be aware of such situations, respecting elderly people as a person to the very end of their lives, supporting their roles in their daily lives, and supporting them to engage with people I think that it is important.

“We should be able to receive careful day-to-day care, such as proper excretory care and painless care” or “I will be greeted even if I become demented and cannot talk I want you to have it”, these talk shows how important everyday things is and it is a philosophy of elderly nursing, which should be valued precisely because it is a nurse who supports everyday life as the most familiar existence.

Next, I think that the philosophical perspectives of “Being by the side of elderly people (=YORISOU)” is the viewpoint of elderly people’s characteristics that it is difficult to follow his/her intention.
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This is, arguably, the most important viewpoint in Japan's elderly care, as it contained the most subcategories in the category 【To draw out the needs, to make a thought】. The talk “It is important to watch the patient and elderly people by the side by being near. So being able to see what the elderly people wants.” it can be said that it is a way of support of a nurse of elderly people (=YORISOU).

The negative image of elderly people, also has an influence on the background that this philosophical perspectives. While opportunities related to elderly people are decreasing, it is necessary to consider the involvement of young people who are aiming to be nurses and will feel encouraged to have positive feelings for elderly people.

In addition, the philosophical perspectives of “Accepting that age is natural” suggests that we should think about the ideal way of decision of elderly people at the medical site. “I think that there are more aged people who are not able to return to their original lives because there are aggressive treatments when they are in the hospital quite well”, practice nursing for elderly people the nurse who was doing the problem on the disadvantage due to elderly life-prolonging treatment of life extension.

Sodei (2012) say “It is important to realize QOD (Quality of Death/Dying) seeking peaceful death rather than QOL asking for a positive attitude towards” life “when death comes close.” It can be said that it is important as an end-of-life support method for elderly people whose death is regarded as immediate, considering QOD rather than lifespan. Also, in supporting the terminal decision of elderly people, we must consider paternalism.

Paternalism is “entrusting medical care to skilled physicians”, and the doctor is considered to be a patient with a childish thought with a sincere attitude (paternity, paternityism) (Japan Society of Medical Association, 2000). In Japan, the revision of the “Medical Law” in 1997, the informed consent was clearly stated as a medical doctor’s effort obligation under the medical law. However, there are situations where doctors and their families can make decision-making, especially as older age.

Elderly people may have great trust in the existence of a doctor and as a result may lead to the desire to leave decision-making to the doctor. Therefore, this paternalism is not absolutely denied, it is important to grasp the circumstances leading to the thoughts and the beliefs of elderly people. Also, since there are historical and cultural backgrounds that take care of “interdependence” and “rich” (fellowship and human relations), the significance of families’ involvement is very large. Therefore, in Japan’s elder care nursing, it is important to carefully consider the relationship with families, to support medical care and care that can be convinced by themselves, taking into consideration the relationship with various surroundings, I think that it will lead to a better end of life for elderly people.
As the talk suggests "I think what is the correct answer is the intention of the elderly people, but it is important to have opportunities to choose a treatment policy by convincing family and their occupations." Sodei (2012) say “We need to bridge the gap that exists among policy makers, health care workers, patients, families, and the general public, not discussing death as a taboo”. We have opportunities to talk about better end times held by patients, families, and health care workers, and to support patients and their families with peace of mind in death, I think that it is important within involvement. Okamoto (2009) said, “In order to improve the QOL of elderly people at the terminal and families, and when falling into a dilemma, it is necessary to learn various views of life and death in order to guide the direction of solution”. In the face of death as a nurse, I think that it is necessary to cultivate my own idea of death and life.

Although it was revealed that advanced practice nurses were conscious of “old” as natural, there were views that accepting “death” and “old” as natural is not only of medical workers but also people who need to think holistically.

From this viewpoint, Ashino (2018) also said, “As we face the final stage of life and the current state of death to be welcomed, we spend the last stage of life that is meaningful as much as possible, and on how to prepare for the peaceful death and how to prepare for it. We need to make information provision as a national campaign.” In order to change the way of medical care at the end of the life of Japanese elderly people, the influence of the view of life and death of Japanese as a whole, that change is urgently needed.

Finally, the philosophical perspectives of “Maintaining the connection of their life” is important not only to the characteristics of the vulnerability to the change of the environment of elderly people, but also to the importance of involving and involving the person’s past experience of life I think that it shows. We live in the local environment and in the connection with people. A house that lives for many years has a habit of land and is a place where you can calmly spend peacefully in the presence of connections with neighbors.

Since 2006, a regional comprehensive care system has been proposed to build a support system that allows people to live their lives to the last in a familiar area, and a structure for establishing a network in other occupations and other organizations. Even if the nationalization of nuclear families advances and elderly people pose challenges, support for elderly people from professional and local people will support the living in their home should be possible. The affiliation of this collaborator is a hospital and a facility, and it seems like there was a story that “there are people in situations where you can live if you have a little support in the area you are used to and the people,” ideal and reality I was able to read the situation of doing nursing activities while embracing conflicts in. Ultimately, by
Philosophical perspectives on the care of elderly people from the viewpoint of advanced practice nurses in Japan understanding the philosophical perspectives of keeping it that there are various connections in the past life of elderly people, it will lead to a satisfying end of elderly people.

From the above philosophical perspectives, in elderly nursing, I think that it is fundamental that preserving the dignity of elderly people and by the side of elderly people (=YORISOU). Furthermore, I think that it may be necessary for nurses to support the view of death and life and ethics, and to support elderly people to keep connections in their lives.

CONCLUSION

· As the philosophical perspectives concerning elderly nursing by advanced practice nurse in Japan, there were four guidelines: “Maintaining dignity as a person” “Being by the side of elderly people (=YORISOU)” “Accepting that aging is natural”, “Maintaining the connection of their life” was led.

· With respect to the philosophical perspectives of “Maintaining dignity as a person”, elderly people who must live with the assistance of others in their daily life while living in the last years of their life, may feel sorry for the caregiver, the circumstance that it becomes impossible to fulfill the role of myself or the situation that can lose the dignity as a person is considered as the background. Carefully respecting elderly people as a person until the end of his/her life is an important focus of care.

· The philosophical perspectives of “Being by the side of elderly people (=YORISOU)” is that elderly people who do not directly express their wishes due, for example, to dementia, require caregivers who are sensitive to different forms of communication and who are committed to learning about the person from other sources such as family and friends.

· The philosophical perspectives of “Accepting that aging is natural”, the idea that considering QOD is important as an end-of-life support for older people whose death is regarded as imminent is more important than lifespan.

· The philosophical perspective of “Maintaining the connection of their life”, the understanding of keeping it that there are various connections in the past life of elderly people.

· In elder care nursing, this study suggests that advanced practice nurses and other caregivers need to take time to get to know and to be alongside elderly people. They are in a position to better understand perspectives on ethics and elder care, keeping the connections of elderly people's lives so that people live as well as possible until they die.
Limits of research and future issues

The number of study participants is small (n=8). Elderly care nursing comprises multifaceted viewpoints and a limited number is discussed here. The research team would like to extend the study to capture more wide-ranging philosophical perspectives of, for example, nursing care for elderly people of nurses who support elderly people at home and continue their research and also the viewpoints of elderly people themselves and their families.

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