Considering the Dialogues in the Advance Care Planning: from the Viewpoint of Narrative Approach

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In the last ten years, advance care planning, or ACP, has become the most significant term in the field of end of life care. ACP is defined as "a process that supports adults at any age or stage of health in understanding and sharing their personal values, life goals, and preferences regarding future medical care."¹ The various kinds of research studies regarding ACP have been implemented so that the knowledge on ACP has been accumulating. Many of such studies include how ACP has been practiced validly or effectively by health care professionals, but little has been done from the philosophical perspectives. The object of this paper is to examine what the dialogue among patients, their family members and health care professionals in the process of ACP means to them in the light of narrative itself or narrative approach.

First, I summarize what narrative approach is. The concept and function of narrative, and unique characteristics of narrative approach: "externalization," "attitude of ignorance," and "reflecting team" are explained. Second, dialogues between patient and health care professionals in the process of ACP are examined on the basis of the concept and function of narrative approach.

Regarding the dialogue of ACP for patients, socialization, one of the functions of narrative, is utilized to clarify patient's values, or beliefs, and "externalization" as a unique characteristic of narrative approach would be meaningful to support their dialogue in the philosophical sense. On the other hand, regarding the dialogue of ACP for health care professionals, "attitude of ignorance" and "reflecting team" of narrative approach would make their dialogue facilitate and be meaningful in practical sense.

In conclusion, narrative approach would be meaningful in the process of dialogue of ACP in the philosophical and practical sense. I suggest that recognition of the unique method and thought of narrative approach among health care professionals could make their practices more meaningful.

1. Sudore RL, et al. Journal of Pain and Symptom Management 53.5 (2017): 821.