

Original article

Meaning of life and its association with perspective towards life and way of living: A qualitative study in palliative care professionals

Soonthorn Limluck^a, Wiraporn Pothisiri^b, Teerayuth Rungnirundorn^{c,*}

^aProgram in Mental Health, Department of Psychiatry, Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand

^bCollege of Population Studies, Chulalongkorn University, Bangkok, Thailand

^cDepartment of Psychiatry, Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand

Background: Having the meaning of life plays an essential part in human life. It is shown to affect one's perspective towards life and way of living, and is positively correlated with physical and mental health status. However, the meaning of life in palliative care staff was not yet explored.

Objectives: This study aimed to uncover the meaning of life among the palliative care professionals, and to determine factors contributing to the meanings. The associations between the meaning of life and their professions and the way of life were also studied.

Methods: Qualitative descriptive method was employed. Twelve palliative care professionals in the Palliative Care Unit were interviewed face-to-face using a semi-structured interview guide. Data were collected and analyzed by step-by-step thematic analysis.

Results: Five themes emerged as the meaning of life in palliative care professionals which are: 1) transcendence; 2) love and attachment; 3) duty and contribution to the world; 4) appreciation of beauty and joy in life; and, 5) purposes in life. The key factors contributing to the meaning are the palliative professions and individual factors. The meaning of life is greatly contributed to each subject's perspective towards life and the way of living.

Conclusion: Working in palliative profession has greatly impacted the perception of life as an uncertain matter and the meaning of life which affect the ways of living. These findings suggest the promotion of having the meaning of life in other healthcare professions to enhance the quality of life of health professionals and to the society.

Keywords: Meaning of life, palliative care, qualitative study, spirituality, transcendence.

Human has questioned the meaning of their lives and has been seeking for the meaning for over hundreds of years. ⁽¹⁻³⁾ Having the meaning of life is associated with better mental health ⁽⁴⁾ and physical health. ⁽⁵⁾ As described in the Existential Theory by Frankl VE.⁽³⁾, having a sense of meaning in life is essential for healthy coping and mind. The meaning of life has been viewed as a multidimensional phenomenon and can arise from multiple sources. Two

dimensions of meaning in life were defined by Steger MF, *et al.*⁽⁶⁾: the presence of meaning and the search for meaning. The presence of meaning is the state with the sense that one's life is meaningful, while the search for meaning is referred to as the drive and orientation toward finding meaning in one's life. The presence of meaning was positively correlated with psychological status and well-being in various studies. ⁽⁶⁻⁸⁾ However, the search for meaning was reported to relate to lower well-being and depression. ⁽⁴⁾ Apart from the positive effect on mental health, the meaning of life was also shown to promote physical well-being. A study by Roepke AM, *et al.* ⁽⁵⁾ indicated that higher level of meaning were strongly associated with better physical health, as well as behavioral factors that decreased the probability of

*Correspondence to: Teerayuth Rungnirundorn, Department of Psychiatry, Faculty of Medicine, Chulalongkorn University, Bangkok 10330, Thailand.

E-mail: drteerayuth@gmail.com

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negative health outcomes or increased that of positive health outcomes. Finding the meaning of one's life is thus of great importance, especially in modern society where depression is becoming more prevalent, to promote psychological and physical well-being, and quality of life.

Palliative care is defined as an approach that improves the quality of life of patients and their families facing problems associated with life-threatening illnesses, through both prevention and relief of suffering.⁽⁹⁾ Palliative care focuses on spirituality and existential issues of the patients and family as they become more prominent during this stage of life.⁽¹⁰⁾ However, providing end-of-life care has been demonstrated to cause psychological distress.⁽¹¹⁾ The stress and tension from the aforementioned works was shown to greatly impact the staff's perception towards meaning of life and death. A study on the meaning of life in palliative care personnel is thus compelling. So far, there have been limited number of studies on the meaning of life in palliative care professionals. This study therefore aimed to identify the meaning of life among palliative care professionals, and factors contributing to the meanings, and to explore the effect of having the meaning of life on their ways of life.

Materials and methods

Study design

This study employed a qualitative, descriptive research technique to uncover the meaning of life among palliative care staff. Semi-structured interviewing questions were employed to determine factors contributing to the meaning of life in the subjects and impact of meaning of life on their professions and ways of life. The semi-structured interviewing guide was developed from the literature under supervision of specialized psychiatrists. The eligibility and reliability of interviewing questions were confirmed by tested interview and analysis of the answers.

Ethical approval was obtained from the Office of the Research Ethics Review Committee for Research Involving Human Subjects, Chulalongkorn University (COA no.1045/2018). Access to Cheewabhibaln Palliative Care Center was granted by the Director of the Research Site, King Chulalongkorn Memorial Hospital, The Thai Red Cross Society. Verbal and written information was provided to all participants a few days before the interview. Informed consent was obtained before the start of the interview.

Confidentiality and anonymity of the subjects were protected throughout the study.

Data collection

The staff at the palliative care unit of tertiary care hospital in Thailand were recruited using the following inclusion criteria: 1) ≥ 18 years of age; 2) had > 6 months experience working in the palliative care unit; and, 3) agreed to be audio-recorded. The potential subjects were excluded if they had less than 6 months of experience in the Palliative Care Unit, and were unwilling or refused to be audio-recorded. Subjects were interviewed individually using a semi-structured question guide. Notes were taken during the interviews to facilitate recall and record nonverbal language.^(12,13) The conversations were recorded and transcribed verbatim before data analysis.

The data collection was conducted during December 2018 - January 2019. All interviews were carried out solely by the first author and in the Thai language. A total of 12 subjects were from the same palliative care unit with different/a range of 3 professional levels. Table 2 summarizes the socio-demographic profile of the subjects.

Data analysis

A step-by-step thematic analysis was performed as described by Hennink M, *et al.*⁽¹⁴⁾ and based on Grounded theory⁽¹⁵⁾ using Microsoft Excel. The interviews were transcribed verbatim and reread with the audio, along with notes on nonverbal data, to ensure accuracy of the transcribed data by SL. Codings were initially performed on the transcripts and later transferred into the Microsoft Excel sheet for convenience of analysis. The codings were subjected to pattern identification by focused coding, similar codes were grouped into subthemes. Then similar subthemes were grouped into themes. Excerpts of data analysis are given in Table 1. Revision was further performed by all authors to ensure consensus agreement and minimize social desirability bias data interpretation.

Study credibility

The credibility which refers to how true the data represented participants' reality was ensured. Interviews were designed to begin with informal conversation which promote relaxed atmosphere and good relationship between the interviewer and subjects. This thus enhance the reliability of the results.

The findings were supported by verbatim quotes to increase transferability and credibility of the study.⁽¹⁶⁾ Peer review was conducted by all authors to increase credibility and conformability. Interviews were recorded and transcribed verbatim and re-read with the audio to maintain transcription rigor, as well as increasing accuracy of data collection and credibility.

Results

The subjects in this study, as described in Table 2, were between 28 - 49 years old, with a mean of 40 years old; 10 out of 12 were female and 2 out of

12 were male. Their working experience ranged from less than 1 year to more than 5 years, with a mean of 5.55 years. Six out of 12 were master degree holders, and 5 out of 12 were specialized medical doctors. Interviews lasted between 48 - 143 minutes with a mean of 85 minutes.

Meaning of life in palliative care professionals along with factors contributing to those meanings were identified using a semi-structured question guide. Additionally, impact of the meaning of life on the subjects' profession and way of life was determined.

Table 1. Examples of data analysis.

Subjects	Data	Coding	Themes
P11	My greatest desire is to truly understand life and reach the state of nirvana.	Intuition, Transcend, Nirvana Spirituality	Transcendence
P10	What I think when speaking of my life, I would say it's all about being with the one you love. I feel like my life is relationships, as a unit, a family. My life equals to my family. My happiness is from seeing the one I love happy and I've got to take care of them	Being with loved ones, Family, Interpersonal relationship	Love and attachment
P12	Life is social role or duty, what we are assigned to do in the society. It can either be a role you chose by yourself or given by others ... The value and meaning of life is on the value or contribution that we have made to ourselves, other people and society.	Duty, Work, Responsibility, Value, Devotion, Contribution, Society	Duty and contribution to the world
P2	Life is like a short journey. Life is the breath we have now, is the sight of sunrise and sunset. Tomorrow morning, if we see the sunrise that mean we still have life. I think when we go to bed today knowing that we have done our best during the day, if we wake up the next day, that's life for me.	Appreciation, Breath, Life, Nature, Beautiful surroundings	Appreciation of beauty and joy in life
P8	My next goal is to just have a healthy body until the end of life. This is because I fear that I would become a burden. That's why I want to stay healthy or able to take care of myself at the end of life.	Goal, Purpose, Determination	Purposes in life

Table 2. Socio-demographic profile of subjects.

Characteristics	Subjects (n = 12)	Percentage
Gender		
Female	10	83.3
Male	2	16.7
Age (years)		
Mean	39.8	
21 – 30	1	8.3
31 – 40	6	50.0
41 – 50	5	41.7
Marital status		
Single	7	58.3
Married with children	2	16.7
Married without child	2	16.7
Divorced with children	1	8.3
Highest education level		
Bachelor degree	1	8.3
Master degree	6	50.0
Specialist (Medical doctors)	5	41.7
Position		
Medical doctor	5	41.7
Nurse	4	33.3
Social worker	3	25.0
Experience in palliative care		
Mean	5.6	
Less than 1 year	1	8.3
1 - 2 years	4	33.3
3 - 5 years	2	16.7
More than 5 years	5	41.7
Religion		
Buddhism	11	91.7
Islam	1	8.3
Religious practice		
None	1	8.3
Sometimes	5	41.7
Regularly	6	50.0
Length of interview (Mean)	85 minutes	

Essence of meaning of life

Five themes of meaning of life were found in palliative care professionals by thematic analysis of the data. These themes were: 1) transcendence; 2) love and attachment; 3) duty and contribution to the world; 4) appreciation of beauty and joy in life; and, 5) purposes in life. These themes were found to be interrelated or opposing and conflicting.

The most referred to as meaning of life among participants is transcendence. Subjects adopt mental practices to transcend themselves. Giving meaning of life as transcendence was found in both sexes and religions. Some referred to transcendence as an ultimate goal in life; “(The greatest benefit as a human

being) is to improve mentally, in order to reach a higher state of mind,” and a way to truly learn and understand life; “is to understand nature, is the understanding”. Major transcend path found in this study was mindfulness practice and meditation which might be influenced from Buddhism culture in Thailand. The practice was regularly performed to reduce ego and to reach nirvana. Interestingly, one subject took overcoming physical challenge to transcend oneself by aiming to compete in a marathon; “To complete a marathon for, firstly, to train your body and secondly, to make myself proud. Actually, I wanted to overcome my fear through my physical barrier”.

The second most spoken theme for meaning of life is love and attachment. Positive relations with other human beings and family members were described as meaning of life by subjects independent of sex and marital status. The meaning of life from this theme reflected by happiness from being with or taking care of people who have meaning to them; "Love propels life. Love gives to senses of warmth and safe place. It can either be loved between young lovers, parents and their child or love for your jobs.", and "What I think when speaking of my life, I would say it's all about being with the one you loved. I feel like my life is relationships, as a unit, a family. My life equals to my family. My happiness is from seeing the one I love happy and I've got to take care of them".

Duty and contribution to the world were also defined as meaning of life in some subjects. Duty identified on this study can be classified into: 1) duty as an individual's responsibility to oneself and to others; and, 2) duty to contribute to the society and the world. We found that subjects strongly give meaning to their profession and to exceed in their roles such as parents, teachers or even patients facing the end of life; "The meaning of life is the ability to perform our duties and our responsibilities such as a son, parents, teacher, doctor, runner or even a good patients. These duties often create proudness, building a sense of security. People with duty will feel like they are worthwhile. Value of one's life is one's duty and whether one can succeed that duty".

Another aspect of meaning of life is the appreciation of beauty and joy in life. Appreciation of breath, present moment and normal physiological function reflected one side of beauty and joy in life. As one subject cited "The fact that I am able to eat, to wake up, to do basic daily life activities, to walk and to use my special senses creates happiness. It just that both body and mind work together perfectly, that's one kind of happiness. Another one is acceptance, of what you have, of yourself or acceptance from other people". Another part of beauty and joy in life was the appreciation of surrounding environments which create happiness; "My life is happiness and joy in each day. I am an easily pleased person. Riding a bus to work can make me happy, like I can write poem on the way. I can appreciate the bus driver. Happiness to me doesn't have to come from money or material things, it's all about the mindset". Of note, one common aspect that generate the feeling of gratitude towards life among participants was the palliative profession. Taking care of patients at the end of life led to acknowledgement of self-

worth; "We should be the one who thank them (the patients), not those thanking us" and "They (the patients) helped us feel like our life is meaningful. When we are taking care of them, it's like they helping us in return".

Lastly, various purposes in life were regarded as meaning of life. The purposes both short and long term were the reasons behind everyday life; "My objective goal is to clear off my mortgage", "My goals are to see my family succeed" and "I think my purpose in life is like every women dream. I want to get married and build my own family". Some of the purposes were inspired from the palliative works; "Purpose of my life is to balance working and family. I got this idea from seeing many patients regret not taking care of their families".

Palliative profession contributed to subjects' meaning of life and perception towards life and profession

The palliative profession highly contributed to the meaning of life found among palliative care staffs. Two groups of patients were mentioned by all subjects: 1) patients who are able to accept death and handle dying peacefully; and, 2) patients who are not able to accept death, holding on to life and suffer the dying process; "In the first group, patients can accept the fact that death is a part of life and want to die naturally. Another group is patient who cannot accept death. They think that death is a negotiable issue. This group of patient tends to hold on to life and will do everything to extend their lives". This insight significantly effected subjects' perception on life and death. The uncertainty of life was widely accepted by all subjects and attributed to meaning of life; "Death is so closed. Every cases here are dying patients of all ages. This make me think of myself, like what am I doing? what's my next plan? I see death people every day. I got to see that everything is uncertain. We have to do each day like it's our last". Furthermore, compliance with the nature of life and death was shown in all participants and this led to the determination to do their best each day both as a palliative care staffs and human beings; "The concept of being born, getting old, being sick and death is a common fact. It (Life) is what it is. This effects my perception about life. I am able to let go easily to things I used to hold on to. We are all going to die anyway, let's just focus to the present" and "We don't know when we going to go (die), we should focus on creating something good. Why getting mad at someone for, since we don't even know whether we will have tomorrow or not".

Discussion

As meaning of life was shown to have great impact on human's life, promotion of meaning of life in society is of great importance. This study thus aimed to define meaning of life in palliative care staffs and identify factors contributing to the meaning. The effect of meaning of life on subjects' way of life both personally and professionally was also determined. Data from in-depth interview was subjected to thematic analysis. Data interpretation was performed by all authors to ensure creditability.

The most spoken of as meaning of life in this study is Transcendence. Transcend process was through religion-based practice to reach an upper state of mind. Subjects whose majority were Buddhist adopted mindfulness and meditation as ways to reduce ego and attachment to self. This interrelation between religion and transcendence was similar with previous study.⁽¹⁷⁾ Mindfulness practice was also shown to benefit one's perception of oneself and well-being⁽¹⁸⁾ which might contribute to meaning of life in transcendence found in this study.

Love and attachment is a second most referred to as meaning of life. It gave comfort and energy to go through life. Positive relationships with other human beings also brought happiness which create meaning. People who has insecure attachment found it harder to build a relationship with external world which negatively affect their meaning of life and well-being.⁽¹⁹⁾ This study suggested that meaning of one's life depends on the relation with external world, especially with other human beings which might explain the meaning build from love and attachment in this study. Meaning of life was also arisen from ability to excel one's responsibilities in an individual level and to give back to society. The theme Duty and Contribution to the world was mentioned as meaning of life by most subjects. Noteworthy, subjects acknowledged duty both as own job and contribution to the world. This sense of responsibility was in concordance with a study of meaning of life in Chinese elderly with chronic illness.⁽²⁰⁾ In the study, sense of responsibility both responsible for me and responsible for others and society was reported as one meaning of life. Ability to perform duty and contribute to the world gave a sense of power and responsibility as one able to maintain both self and social self.

Another aspect of meaning of life is the Appreciation of beauty and joy in life. Subjects reflected that the appreciation of both to normality of oneself and outside world was their meaning of life. The appreciation of inner-self such as breathing

and normal physiological function was distinct in this group of subjects as other study identified external finding of beauty as part of meaning of life.⁽²¹⁾ The last theme of meaning of life in palliative care professionals is purpose in life. Each subjects expressed different purposes of their life. The recognition of purposes as meaning of life was in agreement with other studies.^(22, 23)

The main factor contributing to meaning of life in palliative care staffs was the nature of palliative care work which allows subjects to closely and regularly experience dying process and death. All subjects classified patients into two groups; the acceptance and the denial of death. The first group was referred to in a positive sense such as peaceful and calm while the latter was in a negative sense such as struggle and suffering. Similar findings that subjects who see death as a passage tend to have lower levels of distress, anxiety, and depression was reported.⁽²⁴⁾ All subjects in the present study expressed the same point of view about life, uncertainty. Thus, being aware of fragility of life resulted in the appreciation of life in the present moment and most importantly, the practice and will to transcend. Transcendence was viewed as path to beautiful and peaceful death. Some subject cited life as a preparation for final examination (death). One must practice mentally to pass the test at the end of life; "I want to continue practicing in order to prepare for death. It is a preparation for the final exam". Meaning of life also impacted participants' way of life as it was reported to involve in self-regulatory process on stress buffering, adaptive coping, and health behaviors.⁽²⁵⁾

Conclusion

The working as palliative care staffs greatly influenced the perception towards life as an uncertain issue and thus steered the meaning of life towards transcendence. The meaning of life created drive and will to live each day at its best. This findings could be applied in palliative care practice to understand the meaning of life in patients which will promote a personalized mental care and therefore better mental health of both patients and their families. In addition, the meaning of life identified in this study could be employed to raise a sense of well-being among healthcare professionals, in the society and to those suffered from existential crisis. Our study not only confirmed the great impact of meaning of life on one's life but also identified the 5 essences of human life which can serves as a basis for further study in the field.

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Conflict of interest

All authors declare that they have no conflict of interest.

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