Health care workers deal with death and with dying patients because death is a part of life. By understanding the process of death and by thinking about the needs of dying patients, the health care worker will be able to provide the special care needed by these individuals.

STUDENT: *Go to the workbook and complete the assignment sheet for 7:2, Death and Dying.*

7:3 INFORMATION Human Needs

Needs are frequently defined as "a lack of something that is required or desired." From the moment of birth to the moment of death, every human being has needs. Needs motivate the individual to behave or act so that these needs will be met, if at all possible.

Certain needs have priority over other needs. For example, at times a need for food may take priority over a need for social approval, or the approval of others. If individuals have been without food for a period of time, they will direct most of their actions toward obtaining food. Even though they want social approval and the respect of others, they may steal for food, knowing that stealing may cause a loss of social approval or respect.

MASLOW'S HIERARCHY OF NEEDS

Abraham Maslow, a noted psychologist, developed a hierarchy of needs (see figure 7-14).
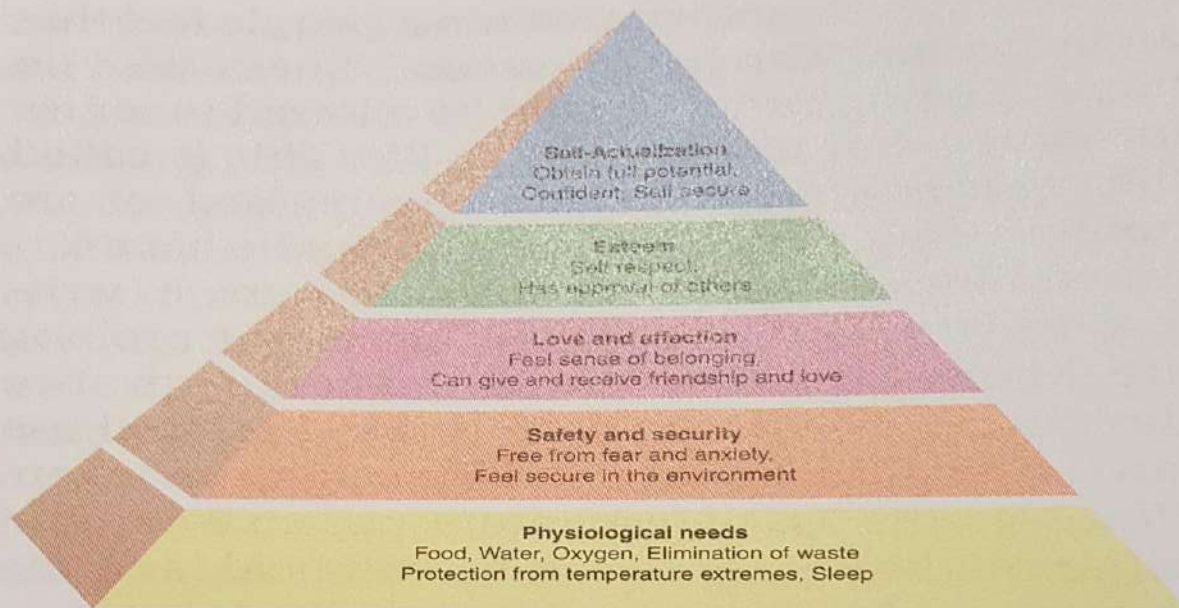
FIGURE 7-14 Maslow's Hierarchy of Needs: the lower needs should be met before the individual can try to meet higher needs.

According to Maslow, the lower needs should be met before an individual can strive to meet higher needs. Only when satisfaction has been obtained at one level is an individual motivated toward meeting needs at a higher level. The levels of needs include physiological needs, safety, affection, esteem, and self-actualization.

Physiological Needs

Physiological needs are often called "physi-
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Physiological Needs

Physiological needs are often called "physical," "biological," or "basic" needs. These needs are required by every human being to sustain life. They include food, water, oxygen, elimination of waste materials, sleep, and protection from extreme temperatures. These needs must be met in order for life to continue. If any of these needs goes unmet, death will occur. Even among these needs, a priority exists. For example, because lack of oxygen will cause death in a matter of minutes, the need for oxygen has priority over the need for food. A patient with severe lung disease who is gasping for every breath will not be concerned with food intake. This individual's main concern will be to obtain enough oxygen to live through the next minute.

Other physiological needs include sensory and motor needs. If these needs are unmet, individuals may not die, but their body functions will be affected. Sensory needs include hearing, seeing, feeling, smelling, tasting, and mental stimulation. When these needs are met, they allow the individual to respond to the environment. If these needs are not met, the person may lose

contact with the environment or with reality. An example is motor needs, which include the ability to move and respond to the individual's environment. If muscles are not stimulated, they will atrophy (waste away), and function will be lost.

Many of the physiological needs are automatically controlled by the body. The process of breathing is usually not part of the conscious thought process of the individual until something occurs to interfere with breathing. Another example is the functioning of the urinary bladder. The bladder fills automatically, and the individual only becomes aware of the bladder when it is full. If the individual does not respond and go to the restroom to empty the bladder, eventually control will be lost, and the bladder will empty itself.

Health care workers must be aware of how an illness interferes with meeting physiological needs. A patient scheduled for surgery or laboratory tests may not be allowed to eat or drink prior to the procedure. Anxiety about an illness may interfere with a patient's sleep or elimination patterns. Medications may affect a patient's appetite. Elderly individuals are even more likely to have difficulty meeting physiological needs. A loss of vision or hearing due to aging may make it difficult for an elderly person to communicate with others. A decreased sense of smell and taste can affect appetite. Deterioration of muscles and joints can lead to poor coordination and difficulty in walking. Any of these factors can cause a change in a person's behavior. If health care workers are aware that physiological needs are not being met, they can provide understanding and support to the patient and make every effort to help the patient satisfy the needs.

Safety

Safety becomes important when physiological needs have been met. Safety needs include the need to be free from anxiety and fear and the need to feel secure in the environment. The need for order and routine is another example of an individual's effort to remain safe and secure. Individuals often prefer the familiar over the unknown. New environments, a change in routine, marital problems, job loss, injury, disease, and other similar events can threaten an individual's safety.

Illness is a major threat to an individual's security and well being. Health care workers are familiar with laboratory tests, surgeries, medications,

and therapeutic treatments. Patients are usually frightened when they are exposed to them and their sense of security is threatened. If health care workers explain the reason for the tests or treatments and the expected outcomes to the patient, this can frequently alleviate the patient's anxieties. Patients admitted to a health care facility or long-term care facility must adapt to a strange and new environment. They frequently experience anxiety or depression. Patients may also experience depression over the loss of health or loss of a body function. Health care workers must be aware of the threats to safety and security that patients are experiencing, and make every effort to explain procedures, provide support and understanding, and help patients adapt to the situation.

Love and Affection

The need for love and **affection,** a warm and tender feeling for another person, occupies the third level of Maslow's Hierarchy of Needs. When an individual feels safe and secure, and after all physiological needs have been met, the individual next strives for social acceptance, friendship, and to be loved. The need to belong, to relate to others, and to win approval of others motivates an individual's actions at this point. The individual may now attend a social function that was avoided when safety was more of a priority. Individuals who feel safe and secure are more willing to accept and adapt to change and more willing to face unknown situations. The need for love and affection is satisfied when friends are made, social contacts are established, acceptance by others is received, and the individual is able to both give and receive affection and love (see figure 7-15).

Maslow states that sexuality is both a part of the need for love and affection as well as a physiological need. **Sexuality** in this context is defined by people's feelings concerning their masculine/feminine natures, their abilities to give and receive love and affection, and, finally, their roles in reproduction of the species. It is important to note that in all three of these areas, sexuality involves a person's feelings and attitudes, not just the person's sexual relationships.

It is equally important to note that a person's sexuality extends throughout the life cycle. At conception, a person's sexual organs are determined. Following birth, a person is given a name, at least com...

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FIGURE 7-15 Individuals of all ages need love and affection. *(Courtesy of Sandy Clark)*

Studies have shown that children receive treatment according to gender from early childhood and frequently are rewarded for behavior that is deemed "gender appropriate." With the onset of puberty, adolescents become more aware of their emerging sexuality and of the standards that society places on them. During both childhood and adolescence, much of what is learned about sexuality comes from observing adult role models. As the adolescent grows into young adulthood, society encourages a reexamination of sexuality and the role it plays in helping to fulfill the need for love and affection. In adulthood, sexuality develops new meanings according to the roles that the adult takes on. Sexuality needs do not cease in late adulthood. Long-term care facilities are recognizing this fact by allowing married couples to each share a room, instead of separating people according to sex. Even after the death of a spouse, an individual may develop new relationships. Determining what role sexuality will play in a person's life is a dynamic process that allows people to meet their need for love and affection throughout their life.

Sexuality, in addition to being related to the satisfaction of needs, is also directly related to an individual's moral values. Issues such as the appropriateness of sex before marriage, the use of birth control, how to deal with pregnancy, and how to deal with sexually transmitted diseases all require individuals to evaluate their moral beliefs.

These beliefs then serve as guidelines to help people reach decisions on their behaviors.

Some individuals use sexual relationships as substitutes for love and affection. Individuals who seek to meet their needs only in this fashion cannot successfully complete Maslow's third level.

Esteem

Maslow's fourth level includes the need for esteem. Esteem includes feeling important and worthwhile. When others show respect, approval, and appreciation, an individual begins to feel esteem and gains self-respect. The self-concept, or beliefs, values, and feelings people have about themselves, becomes positive. Individuals will engage in activities that bring achievement, success, and recognition in an effort to maintain their need for esteem. Failure in an activity can cause a loss of confidence and lack of esteem. When esteem needs are met, individuals gain confidence in themselves and begin to direct their actions toward becoming what they want to be.

Illness can have a major effect on esteem. When self-reliant individuals, competent at making decisions, find themselves in a health care facility dependent on others for basic care such as bathing, eating, and elimination, they can experience a severe loss of esteem. They may also worry about a lack of income, possible job loss, the well being of their family, and/or the possibility of permanent disability or death. Patients may become angry and frustrated or quiet and withdrawn. Health care workers must recognize this loss of esteem and make every attempt to listen to the patient, encourage as much independence as possible, provide supportive care, and allow the person to express anger or fear.

Self-Actualization

Self-actualization, frequently called *self-realization,* is the final need in Maslow's hierarchy. All other needs must be met, at least in part, before self-actualization can occur. Self-actualization means that people have obtained their full potentials, or that they are what they want to be. People at this level are confident and willing to express their beliefs and stick to them. They feel so strongly about themselves that they are willing to reach out to others to provide assistance and support.

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When needs are felt, individuals are **motivated** (stimulated) to act. If the action is successful and the need is met, **satisfaction,** or a feeling of pleasure or fulfillment, occurs. If the need is not met, **tension,** or frustration, an uncomfortable inner sensation or feeling, occurs. Several needs can be felt at the same time, so individuals must decide which needs are stronger. For example, if individuals need both food and sleep, they must decide which need is most important, because an individual cannot eat and sleep at the same time.

Individuals feel needs at different levels of intensity. The more intense a need, the greater the desire to meet or reduce the need. Also, when an individual first experiences a need, the individual may deal with it by trying different actions in a trial-and-error manner, a type of behavior frequently seen in very young children. As they grow older, children learn more effective means of meeting the need, and are able to satisfy the need easily.

METHODS OF SATISFYING HUMAN NEEDS

Needs can be satisfied by direct or indirect meth-
ods. Direct   need