Talking About End-of-Life (EOL) Preferences in Marriage: Applying the Theory of Motivated Information Management

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Couple Discusses EOL

https://www.youtube.com/watch?v=RKGDzCRZuwM

ReCap TMIM

It is an **EXAMINATION**

Of what **MOTIVATES PEOPLE**

To **MANAGE** their **UNCERTAINTY**

FYI TMIM is commonly applied to

- **HEALTH STUDIES**
- **SEEKING HEALTH RELATED INFORMATION**

TMIM

-Provided guideline to examine information-seeking behaviors

-Particularly in conversations that involved:

Sensitive or Difficult information Regarding End of Life (EOL) Care

80%

Of patients prefer to die at home

However, most older adults die in the hospital

$50 billion

Was spent on medical interventions during the last 2 months

20-30% of these expenses had NO meaningful impact.

TMIM Application

Helped this group to

Understand

How marital partners

SEEK or AVOID

EOL Conversations

1. Interpretation phase
2. Evaluation phase
3. Decision phase

This Study used the TMIM

3 Phase process

-Sample group was 170 married participants

-Ave. Age was 56.5 yrs old

-Primarily White but Asian, African American, Hispanic and Native Americans also included

-28 item online survey was completed

-Participants were allowed to enter into a drawing for a $30 Gift Card

MODE OF TMIM PREDICTORS USED

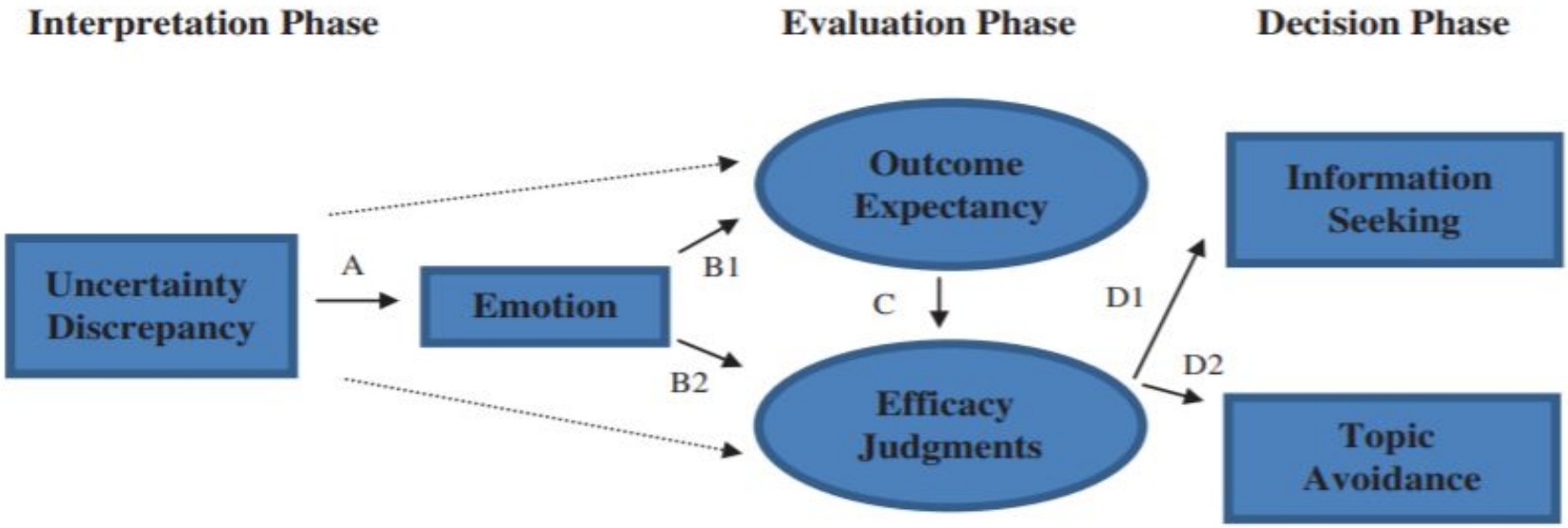

FIGURE 1 Model of TMIM predictors.

TABLE 1
TMIM Measures

Name	α	M	SD	*Items*	*Scale*
Issue importance (Fowler & Afifi, 2011)	n/a	6.45	0.89	1. It is important that I know my spouse's preferences for end of life care.	7-point Likert: 1 = *strongly disagree*, 7 = *strongly agree*
Uncertainty discrepancy (Fowler & Afifi, 2011)	n/a	0.81	1.28	1. How certain are you about your spouse's preferences for their care at the end of life? 2. How certain do you want to be about your spouse's preferences for their care at the EOL?*	7-point Likert: 1 = *completely uncertain*, 7 = *completely certain*
Anxiety (Afifi & Afifi, 2009)	.90	3.07	1.54	1. When you compare how much you want to know and how much you actually know about your spouse's end-of-life preferences, how anxious does it make you? 2. How anxious does it make you to think about how much/how little you know about your spouse's end-of-life preferences? 3. The size of the similarity/difference between how much I know and how much I'd like to know about my spouse's end-of-life preferences is	(1, 2) 7-point Likert: 1 = *not at all anxious*, 7 = *extremely anxious*; (3) 1 = *not at all anxiety producing*, 7 = *extremely anxiety producing*
Outcome expectancy (Afifi & Afifi, 2009)	.95	5.49	1.42	1. Talking to my spouse directly about his/her end-of-life preferences would produce: 2. Asking my spouse about his/her end-of-life preferences would produce: 3. Approaching my spouse to ask about his/her end-of-life preferences would produce:	7-point scale (−3 to +3): −3 = *a lot more negatives than positives*, 0 = *about as many negatives as positives*, +3 = *a lot more positives than negatives*
Communication efficacy (Afifi & Afifi, 2009)	.96	6.00	1.20	1. I am able to ask my spouse what s/he thinks about end-of-life preferences. 2. I could approach my spouse to ask about his/her beliefs about end-of-life preferences. 3. I am able to approach my spouse to talk about end-of-life preferences.	7-point Likert: 1 = *strongly disagree*, 7 = *strongly agree*
Target efficacy (Afifi & Afifi, 2009)	.94	6.06	1.12	1. My spouse would be completely honest about this issue. 2. My spouse would give me truthful information about this issue. 3. My spouse would be completely forthcoming about this issue. 4. If approached, my spouse would be upfront about this issue.	7-point Likert: 1 = *strongly disagree*, 7 = *strongly agree*
Coping efficacy (Afifi & Afifi, 2009)	.78	5.81	1.02	1. I feel confident that I could cope with whatever I discover about my spouse's end-of-life preferences. 2. I couldn't deal with what I might find out about my spouse's end-of-life preferences. (R) 3. I can handle whatever I would find out about my spouse's end-of-life preferences. 4. I would not be able to deal with what I might find related to spouse's end-of-life preferences. (R)	7-point Likert: 1 = *strongly disagree*, 7 = *strongly agree*
Information seeking (Fowler & Afifi, 2011)	.90	4.49	1.63	1. After taking this survey, how much information do you plan to seek from your spouse about his/her end-of-life preferences? 2. How many questions do you plan to ask your spouse regarding his/her preferences for care at the end of life?	7-point Likert: 1 = *none*, 7 = *a lot*

*The difference between the two items was computed to create a composite uncertainty discrepancy score.

Questions utilized
A 7 pt Likert Scale

Measures

This study examined factors that influence the decision to either seek or avoid information about spouses' EOL preferences

- End of Life Prefernce
- Topic Avoidance
- Communicative responsiveness
- Empathy
- Marital Quality
- Marital Satisfaction

Results

- 91.2% of this sample reported EOL preference was an important issue to discuss
- 62.6% reported discussing 3 or more topics with their spouse

A Second Scale was used to measure Communication, Target & Coping

TMIM was useful in predicting spouses' intentions to manage information about their spouses' EOL preferences.

IAW TMIM: Uncertainty discrepancy, Importance of issue, plus anxiety all predict the outcome expectancy

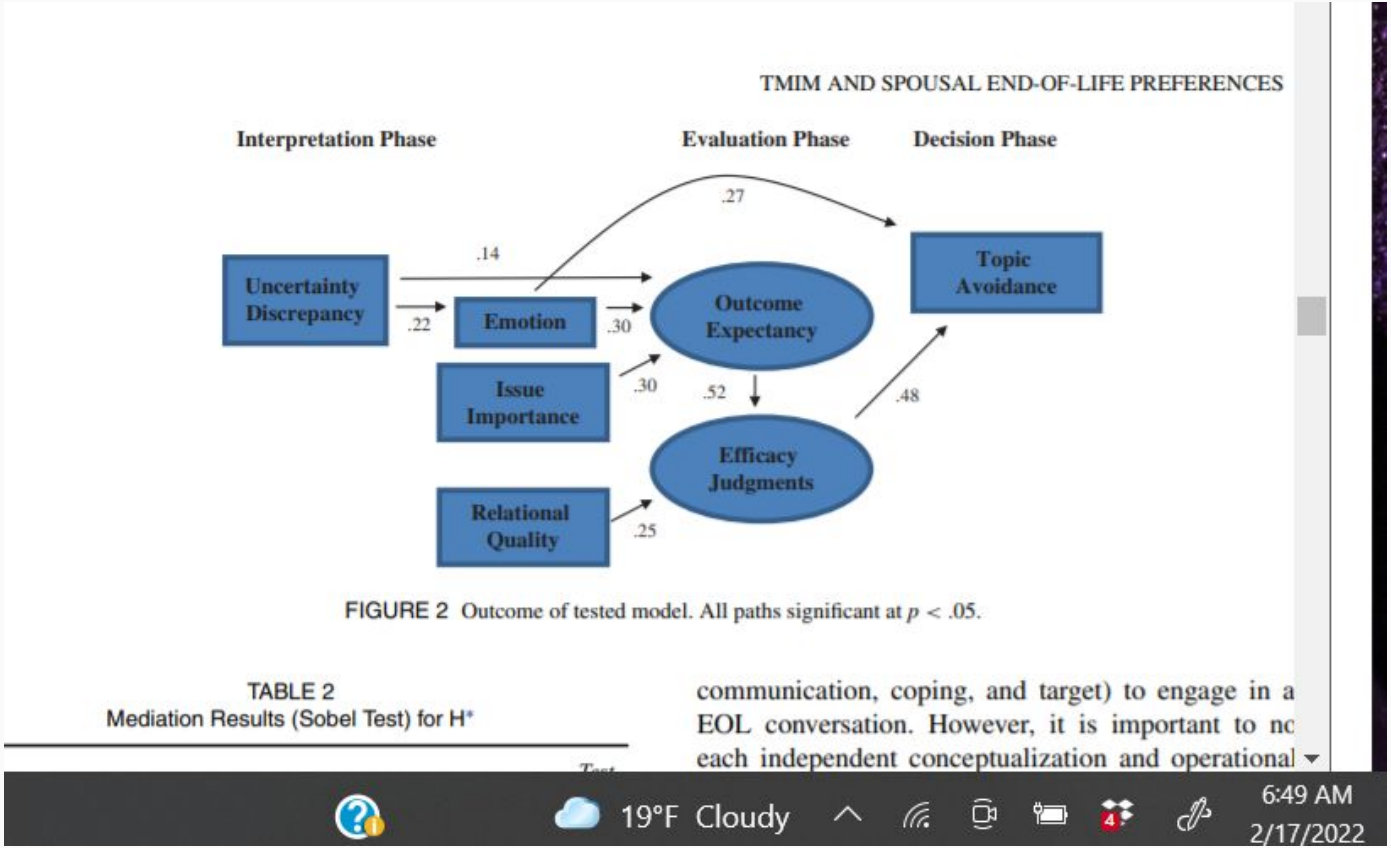

FIGURE 2 Outcome of tested model. All paths significant at $p < .05$.

TABLE 2
Mediation Results (Sobel Test) for H*

communication, coping, and target) to engage in a EOL conversation. However, it is important to nc each independent conceptualization and operational

Ultimately effective communication about EOL Care is needed to ensure individuals received:

1. The Care Desired
2. The Preferred Setting

End of Life Care Preference

Theory of Motivated Information Management

End of Life Care

Thank
You

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