Learning to Die in Place: Pathways for End-of-Life Care in Rural Nova Scotia

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In North America, despite extensive literature on palliative care, there remains a significant gap in examining dying in place practices and caregiver supports through an educational lens. This gap is particularly pronounced in rural settings, where individuals at end-of-life often prefer to die at home but are hindered by systemic inequities and inadequate support. With less than one in three Canadians accessing palliative care at home, and even fewer in rural areas, there is a pressing need to explore how home care teams can better support dying individuals and their families through targeted educational interventions.

This research investigates how educational interventions, paired with ongoing care from an interprofessional home care team, can support end-of-life care in rural Nova Scotia. Grounded in feminist theory and analyzing the neoliberal impacts on health care; the study seeks to address current gaps in rural palliative care, particularly questioning the practice of dying in place and the supporting roles of caregivers. The research will be directed by the following questions: At end of life, how are clients and their caregivers supported via learning with an interprofessional home care team to enable dying in place? What educational interventions by rural home care teams can enable dying in place? What can an interprofessional home care team learn from individuals at end-of-life and their caregivers?

The research will utilize a mixed-methods methodology, combining qualitative ethnographic interviews with caregivers and home care team members, participant observation of care practices, and a survey to identify educational and service gaps. This approach will allow for a comprehensive understanding of the practical and emotional challenges faced by caregivers and the dying, set against the backdrop of a strained healthcare system, whose resources have historically been focused on acute care versus home and community care and the social determinants of health.

By focusing on the educational components of home care, this study aims to provide evidence-based recommendations that can be integrated into home care practices and inform policy development. The findings are expected to advocate for upstream solutions that better support clients and their caregivers through enhanced educational resources, keep individuals at home during their final days, and contribute to compassionate end-of-life care practices in rural communities.