

Abstract

Purpose: Advance care planning (ACP) allows individuals to indicate medical treatment preferences prior to loss of decisional capacity from serious or terminal illness. Although not usually framed as such, advance care planning is an important issue for baby boom age women born between 1946 and 1964. They grew up during the women's rights movement and generally value autonomy. Lifestyle choices and changing family structures predispose this group now entering their senior years, to be without surrogate decision makers if decisional capacity was lost. Without advance care plans, medical treatment decisions may result in loss of autonomy and unwanted or futile medical care. The purpose of this study was to better understand the factors affecting ACP in baby boom age women in Western North Carolina. **Design:** This descriptive, correlational study used a 30-item survey developed to assess factors affecting advance care planning in this population. Participants were recruited in a local women's magazine with a large readership of baby boom age women. **Measures:** Advance care planning knowledge level and implementation rate were assessed. Correlations between these variables and health status, health care career, non-paid care giving and helping others with advance care planning were determined. *The Transtheoretical Model (TTM)* of health behavior change was used as a framework to look at advance care planning as a process with various stages. Level of intention for participation in ACP was compared with *TTM* stages. **Results:** The sample (N=116) included a majority of participants in the 51-55 year old age range, Caucasian, Christian, and married with household incomes of \$60,000 or greater. Knowledge level was high with 71% indicating they knew about ACP laws and generally understood them. Implementation rate at 32% was higher than the national average of 15-25%. Health status was not significantly associated with knowledge level and implementation rate. Health care career also had no significant association

with these variables. Non-paid care giving and helping others with ACP were both significantly associated. Level of intention among those who had *not* implemented ACP documents was strong with 97% intending to do so. Level of intention varied and approximated the *TTM* stages.

Conclusions: This study indicates advance care planning is an important issue for baby boom age women. Knowledge level and implementation rate were higher than expected. Sample demographics were consistent with the literature that white, educated, higher income individuals are more likely to participate in ACP. *The Transtheoretical Model* could serve as a framework for ACP education.