

## Elderly Caregivers in the Context of the Films Amour and The Leisure Seeker: A Content Analysis\*

**Amour ve The Leisure Seeker Filmleri Bağlamında Yaşlı Bakıcılar: Bir İçerik Analizi**

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### ABSTRACT

This study aims to provide an in-depth examination of elderly caregiving processes by analyzing two films that explore the experiences of aging individuals with progressive chronic illnesses and their elderly spouse caregivers. Amour (2012) and The Leisure Seeker (2016) offer rich narratives that illuminate the physical, emotional, and ethical challenges encountered in caregiving, end-of-life decision-making, and issues related to quality of life and the relief of suffering. Using a qualitative research design and content analysis, the study evaluates themes related to caregiving burden, caregiver burnout, and compassion-based end-of-life decisions. Findings indicate that elderly spousal caregivers experience substantial physical strain, emotional exhaustion, and insufficient social support, particularly in the absence of strong support systems. Ethical dilemmas such as respecting patient autonomy, ensuring quality of life, managing suffering, and making ethically sensitive end-of-life decisions are central to both narratives. The films reveal the profound emotional conflicts caregivers face as they balance love, responsibility, and their own limitations. The study concludes that strengthening social support systems, enhancing home-care services, and integrating palliative care practices and caregiver support programs may significantly reduce caregiver burden and improve the quality of life of both caregivers and elderly individuals at the end of life.

**Keywords:** Aged, Terminal care, Palliative care, Terminally ill, Caregivers, Spouses

### ÖZ

Bu çalışma, yaşlı nüfusun artışıyla birlikte giderek önem kazanan yaşlı bakım süreçlerini, iki film üzerinden derinlemesine incelemeyi amaçlamaktadır. Amour (2012) ve The Leisure Seeker (2016) filmleri, yaşlı bireylerin progresif kronik hastalıklarla mücadelesi ile yaşlı eşlerin bakım verici rollerini üstlenirken yaşadıkları fiziksel, psikolojik ve etik zorlukları ortaya koymaktadır. Nitel araştırma desenine dayalı içerik analizi yöntemi kullanılan çalışmada, her iki filmdeki bakım süreçleri; bakım yükü, tükenmişlik ve yaşam sonu tercihlerine ilişkin temalar üzerinden değerlendirilmiştir. Bulgular, yaşlı eş bakım vericilerin sosyal destek yetersizliği, fiziksel güçlükler, duygusal yıpranma ve bakım yükü nedeniyle ciddi düzeyde tükenmişlik yaşadıklarını göstermektedir. Ayrıca, bakım sürecinde hastanın otonomisine saygı, yaşam kalitesi, acının giderilmesi ve “merhamet temelli yaşam sonu kararları” gibi etik ikilemler dikkat çekmektedir. Her iki filmde de yaşlı bakım vericilerin, sevgi, bağlılık ve sorumluluk duygusu ile hareket ederken derin bir duygusal çatışma yaşadığı görülmektedir. Çalışma, yaşlı bakım vericilere yönelik güçlü destek sistemleri, evde bakım hizmetleri ve palyatif bakım uygulamalarının iyileştirilmesinin, bakım yükünü önemli ölçüde azaltabileceğini hem bakım vericilerin hem de yaşam sonundaki yaşlı bireylerin yaşam kalitesini artırabileceğini ortaya koymaktadır.

**Anahtar Kelimeler:** Yaşlı, Terminal bakım, Palyatif bakım, Terminal hasta, Bakım verenler, Eşler

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## Introduction

The aging population represents one of the most significant demographic transformations affecting contemporary societies. Increasing life expectancy, combined with declining fertility rates, has led to a rapid growth in the proportion of older adults worldwide.<sup>1-4</sup> This demographic shift has not only increased the prevalence of chronic and degenerative diseases but has also expanded the need for long-term care, particularly in the home environment. As a result, a growing number of elderly individuals assume caregiving roles for their spouses, giving rise to the phenomenon of “elderly caregivers caring for elderly individuals,” which has become an important global health and social issue.<sup>5</sup>

Caregiving in old age is associated with complex physical, emotional, social, and ethical challenges. Elderly caregivers often experience significant physical strain, emotional exhaustion, social isolation, and limited access to support systems.<sup>6</sup> In addition, the caregiving process becomes even more complicated in the context of progressive and terminal illnesses such as stroke, dementia, and cancer, where issues related to dependency, quality of life, and end-of-life decision-making come to the forefront. In such cases, caregivers are not only responsible for meeting the daily care needs of patients but also for navigating ethically sensitive decisions concerning autonomy, dignity, and the relief of suffering.

In recent years, there has been increasing recognition of the importance of understanding caregiving experiences not only through clinical and quantitative approaches but also through narrative and qualitative perspectives. Visual narratives, such as films, provide a unique opportunity to explore caregiving experiences in depth by portraying emotional, relational, and ethical dimensions that are often difficult to capture through traditional research methods. Films can function as reflective tools, offering insights into caregiving burden, burnout, moral dilemmas, and end-of-life decisions, while also contributing to education and awareness in healthcare contexts.

Within this framework, the films *Amour* (2012) and *The Leisure Seeker* (2016) present powerful representations of elderly individuals coping with progressive chronic illnesses and the caregiving roles undertaken by their elderly spouses. These films highlight the interplay between love, responsibility, autonomy, and ethical dilemmas in end-of-life care, providing a rich context for analyzing caregiving processes from a geriatric and ethical perspective.

The aim of this study is to analyze the caregiving experiences of elderly spouses caring for terminally ill partners through a qualitative content analysis of the films *Amour* (2012) and *The Leisure Seeker* (2016), with a particular focus on caregiving burden, caregiver burnout, and ethical issues related to end-of-life decisions.

## Methods

In this study, the content analysis method based on a qualitative research design was employed. The purpose of this type of analysis is to bring together similar data within the framework of specific concepts and themes and interpret them. Observation, interviews, documents, and audiovisual materials are used as data collection tools.<sup>7</sup> Visual materials, such as films, videos, and photographs that provide information about the phenomena, events, or situations under investigation, can be utilized in document analysis.<sup>8</sup> Methods like video or film analysis, commonly used in qualitative research, help collect more comprehensive data on the subject being studied,<sup>8</sup> thereby enabling the acquisition of realistic and descriptive data. In this study, data were obtained by analyzing the films *Amour* (2012) by Haneke and *The Leisure Seeker* (2016) by Virzi using the content analysis method, with the films selected through purposive sampling. In the descriptive analysis method, themes are first identified, and the collected data are classified, summarized, and interpreted according to these themes.

The method consists of four stages:

1. Creating a framework for descriptive analysis,
2. Processing the data according to the thematic framework,
3. Identifying findings, and
4. Interpreting the findings.

For these reasons, it can be stated that the descriptive analysis method is an appropriate approach for film analysis within a theoretical or conceptual framework.

Before initiating the research, relevant literature was reviewed, and information was gathered by studying published articles, theses, and books on the subject. For the first stage of data collection, researchers individually watched the films. During this initial viewing, scenes related to the challenges faced by elderly caregivers of elderly patients were noted and designated as the thematic framework. In the second stage, the films were watched collectively by all researchers, and the content noted by each researcher was associated with the identified key scenes. During the film analysis, dialogues in the relevant scenes were meticulously transcribed without omission and categorized by linking them to the topics addressed in the literature. Subsequently, the thematic framework was finalized. In the third stage, the scenes related to the subject were organized, defined, and supported by existing research in the literature. In the final stage of the analysis, the findings were interpreted.<sup>9</sup> This study does not involve human participants and, therefore, does not require ethical committee approval.

### **Haneke's *Amour* (2012)**

Haneke's *Amour* tells the story of Georges and Anne, a couple in their eighties. They live in a well-furnished, highly organized, high-ceilinged, and somewhat traditional Paris apartment filled with books, paintings, and a piano. Georges is a musicologist, and Anne is a piano teacher.<sup>10</sup> At the beginning of the film, they are seen among the audience at a piano recital by one of Anne's former students. Even in the opening moments, their deep love for each other is evident in their behavior. One morning, Anne suffers an ischemic stroke due to carotid stenosis, and after surgery proves ineffective, she returns home with the right side of her body paralyzed. During this process, her greatest support comes from Georges. Anne insists she does not want to go to the hospital and wishes to stay at home no matter what. Georges promises never to take her to a care facility and assumes the responsibility of caregiving. However, after a second stroke, Anne's condition deteriorates further, and she is unable to communicate except through inconsistent sounds, including groans indicating her pain. As Anne's condition worsens, caregiving becomes increasingly difficult for Georges (to the point where the actor reportedly broke his hand during filming).<sup>10</sup> Georges tries to support Anne in daily activities such as lifting her from the toilet, washing her, placing her in a wheelchair, and feeding her with a spoon. Throughout the film, we witness how Georges' deep love for his wife serves as a source of motivation during this challenging caregiving process. However, Georges is forced to confront his own physical and emotional limits. As the film progresses, the exhaustion Georges experiences due to aging and the demands of caregiving becomes apparent. For instance, in one scene, Anne refuses to drink water, signaling her determination to end her life. When Georges insists, she sprays a small amount of water at his face from between her lips, prompting Georges to slap her in anger. He immediately regrets this and apologizes sincerely. As the financial and emotional burdens of caregiving are compounded by feelings of helplessness, Georges begins to question the meaning of life, survival, and death. Ultimately, he decides to end both his wife's and his own suffering. The film addresses ethical issues within the framework of caregiving challenges,

the struggles and exhaustion of aging, anticipated death, the meaning of life, quality of life, and the relief of pain and suffering.

### **Virzi's *The Leisure Seeker* (2016)**

The film tells the story of an elderly couple, John, who has Alzheimer's disease, and his wife Ella, who has cancer. Both are aware that they are nearing the end of their lives and decide to take their fate into their own hands by revisiting a journey they once took in their RV. As John's forgetfulness and other symptoms of his illness deepen day by day, Ella shoulders the responsibility of caregiving while grappling with the weight of discovering her own cancer has progressed. During the journey, Ella reflects on her caregiving experiences, the potential need for her own care, and what might happen to John after her death. These uncertainties lead her to make a decision: rather than waiting for death to arrive, Ella chooses the time, place, and manner of their deaths herself. This film explores caregiving from a different perspective, focusing on the physical and emotional dimensions of aging. Similar to *Amour*, it raises ethical questions about life, death, quality of life, and end-of-life decisions.

### **Findings**

In these two films, three main themes have been identified: the caregiving burden on elderly family caregivers (spouses), caregiver burnout, and compassionate euthanasia.

#### **Theme 1– Elderly Caregivers and the Burden of Caregiving:**

In both films, the elderly spouses requiring care suffer from illnesses commonly associated with significant caregiving needs. The increasing number of elderly individuals living with chronic illnesses, linked to extended life expectancy, underscores the growing importance of caregiving in modern societies.<sup>11</sup> Family caregivers are tasked with providing care that involves a wide range of physically, socially, emotionally, and financially demanding responsibilities over months or even years.<sup>12</sup> With rising life expectancy, the care of elderly individuals increasingly burdens their spouses and, in some cases, their children, who themselves are often elderly. Recent studies indicate that approximately 30% of caregivers in developed countries are aged 65 or older.<sup>13</sup> According to a report by the American Association of Retired Persons (AARP) and the National Alliance for Caregiving (NAC) (2020) this has become a public health issue that significantly impacts individuals' quality of life.<sup>14</sup> The likelihood of elderly individuals becoming caregivers is shown to increase in proportion to the age of the sick elderly person they live with.<sup>15</sup> Research in recent years reveals that over three-quarters of elderly spouses in need of care are cared for by their partners.<sup>16</sup> With the rising elderly population and changing family structures, it is increasingly common for elderly individuals to take on caregiving responsibilities for another family member.<sup>17</sup> The literature indicates that family caregivers often feel an obligation to support their loved ones, which is linked to physical and emotional burdens, such as guilt.<sup>18</sup> It is emphasized that the fact that an elderly caregiver is also an elderly individual should always be taken into account, and their physical, psychological, and social needs—often accompanied by vulnerability—must not be overlooked.<sup>19</sup> Studies suggest that as caregivers age, they find it increasingly difficult to balance caregiving duties with family and work responsibilities. Additionally, the belief that caregiving adversely affects their own health tends to grow.<sup>20</sup>

In *Amour*, Georges, and in *The Leisure Seeker*, Ella, are the closest witnesses to their spouses' illnesses and their primary caregivers. Georges assumes caregiving responsibilities following his wife's stroke, and as her chronic condition progressively worsens, the film vividly portrays the increasing physical strain and emotional pressure he experiences. The lack of professional support and family assistance exacerbates the burden he feels. As an elderly caregiver, Georges struggles with physical challenges, a lack of social support, and growing social isolation, leading to burnout. Similarly, in *The Leisure Seeker*, Ella is aware that her own illness is

worsening. Her husband, John, faces progressive physical and mental limitations due to advancing Alzheimer's disease, and Ella serves as his caregiver. Her own deteriorating health complicates her ability to care for her husband. The caregiving responsibilities she shoulders—helping with daily activities, coordinating and attending hospital appointments, managing and providing medical care at home—combined with the worsening of her husband's condition, lead to burnout for Ella, as is common among caregivers for patients with such illnesses.<sup>21,22</sup>

It has been reported that a significant majority of patients who have experienced a stroke and individuals diagnosed with Alzheimer's disease frequently require caregiving from a family member, often their spouse.<sup>23,24,25,26</sup> While caregiving in such cases may be associated with positive outcomes, such as an increased sense of personal strength and a closer spousal relationship, it can also lead to negative physical and psychological consequences.<sup>27,28</sup> Physical challenges frequently reported include sleep disturbances, weight loss, and fatigue.<sup>21,29</sup> The psychological impact of caregiving can be profound and is often linked to poorer physical well-being, particularly for caregivers who are themselves elderly.<sup>22</sup>

### **Theme 2- Caregiver Burnout:**

Caregivers of elderly individuals address their physical, psychological, and social needs. In this process, those who provide direct care to the elderly often experience challenges such as caregiving burden, stress, and anxiety.<sup>30</sup> Studies have shown that as the caregiving burden increases, caregivers are more likely to experience depression, deterioration in physical, psychological, and emotional health, as well as anxiety, depressive disorders, stress, and behavioral disturbances.<sup>31</sup> Their perceived health and quality of life also tend to decline.<sup>32,33</sup> The increased caregiving burden of family members providing care to elderly individuals can lead to physical, psychological, emotional, social, and financial problems.<sup>34</sup> The burnout experienced by caregivers due to caregiving responsibilities exacerbates anxiety. This increase in anxiety often brings up past disappointments and conflicts for the caregiver. These emotional, social, physical, and economic difficulties significantly influence levels of anxiety.<sup>35</sup> Factors such as the high emotional burden between the elderly individual and the caregiver, the caregiver's own health problems, limited social activities, and insufficient social support contribute to increased anxiety in caregivers.<sup>36</sup> A study highlighted that caregiving negatively affects caregivers' physical health and emotional well-being, causing stress and anxiety.<sup>37</sup> The literature indicates that as caregivers age, their caregiving burden increases. While the daily care needs of the elderly patient grow, caregivers themselves often require assistance to meet these needs.<sup>38,39</sup> Another study found that a significant proportion of caregivers reported feeling that they lacked the skills or knowledge needed to meet the care and support demands of a person nearing the end of their life.<sup>40</sup> Sherwood et al. (2005) found that spouse caregivers reported significantly higher burden ( $t = -9.25$ ) than non-spousal caregivers, but lower depressive symptom scores ( $t = -2.32$ ) than non-spousal caregivers.<sup>41</sup> In the study conducted by Hirano et al. (2011), it was determined that spouse caregivers experienced more care burden compared to non-spousal caregivers (daughter, son, son's wife).<sup>42</sup> A study conducted by Chung and colleagues (2009) found that spousal caregivers experience higher levels of anxiety and depression compared to non-spousal caregivers.<sup>43</sup> To minimize the caregiving burden, stress, and anxiety levels experienced by caregivers, establishing adequate support systems is recommended.<sup>44</sup> Such support plays a crucial role in preventing burnout. When the caregiver is the spouse of the elderly individual, the caregiving burden is expected to be even higher. Therefore, support systems that promote and enable aging in place, such as home care services, assistance from neighbors, children, or other family members, as well as professional support, can help alleviate the caregiving burden. These supports can reduce burnout, provide renewal, and enhance the caregiver's tolerance, especially through short breaks. Moreover, alongside providing support for the care of the elderly patient, it is equally important to address the physical, social, psychological, and financial needs

of the elderly caregiver. It should not be overlooked that reducing the caregiving burden and addressing the challenges faced by caregivers positively impacts the quality of care provided to the patient.<sup>20</sup>

In the films *The Leisure Seeker* and *Amour*, the insufficiency of support systems stands out, particularly the tendency of protagonists to avoid involving their children in caregiving. In *Amour*, this is poignantly illustrated in one of the final scenes when the couple's only child, Eva, visits her mother, Anne. Unprepared for her visit, Georges locks Anne's bedroom door. Eva insists on seeing her mother, to which Georges responds: *"She's turning more and more into a helpless child. It's sad and humiliating for her and for me. And she doesn't want to be seen like this. In fact, she didn't even want you to come last time."* Georges refuses to seek any help from Eva, justifying it by not wanting to burden her.<sup>45</sup> However, in the absence of a robust support system, family members often struggle to cope with challenging situations. A striking example of this is Georges' moment of frustration when, overwhelmed by the difficulty of feeding his wife, he slaps her in anger—an unintended action born of exhaustion. As an elderly individual, Georges' inability to meet all the needs of a bedridden patient is entirely understandable. Yet, his profound fatigue, both physical and emotional, led to this regrettable behavior. This scene reflects not only the physical hardships of caregiving but also Anne's refusal to drink water and her expressed desire to die, which adds an emotional weight to Georges' role. His burnout becomes a behavioral manifestation of this cumulative strain. Despite his deep sense of responsibility toward Anne, Georges carries the caregiving burden alone, a task that grows increasingly unsustainable over time. Anne exercises her right to refuse to return to the hospital, placing the responsibility solely on Georges. However, due to his advancing age, managing this process alone becomes impossible. In *The Leisure Seeker*, Ella's exhaustion stems not only from her husband's increasing dependence on her care but also from her own terminal cancer diagnosis and the looming reality of her own pain-filled decline. Her burnout is compounded by concerns over who will continue her husband's care and the anticipation of his inevitable passing. These burdens amplify her emotional and physical exhaustion, highlighting the complexity of caregiving in the face of personal and relational challenges.

### Theme 3- Pain Relief and Compassionate End-of-Life Decisions:

Decisions concerning the end of life are unequivocally among the most significant decisions a person must make. These decisions are often fraught with emotion, influenced by promises made, or shaped by personal wishes, carrying a high degree of risk and responsibility.<sup>46</sup> End-of-life decisions are not limited to the patient alone but are considered a comprehensive process that also affects the caregiver. In many cases, caregivers play an active and influential role in this decision-making journey, balancing their emotional burden with the needs and wishes of the patient. This complexity underscores the profound ethical, emotional, and practical challenges involved in making end-of-life decisions, highlighting the intertwined experiences of both the patient and the caregiver. In this context, the two films discussed in the article portray Anne and John, elderly characters receiving care from their spouses, who explicitly express their desire not to spend their final days in a clinic or care home. They communicate this wish clearly to their caregivers, emphasizing their preference for autonomy and dignity at the end of their lives (**Table 1 and Table 2**).

**Table 1.** Quotes from the Film *Amour*

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Georges:	"The promises we made to each other are above everything. I will not abandon you, no matter what."
Anne:	"I don't want to live anymore, Georges. Living like this is worse than death."
Georges:	"I must allow you the right to say you don't want to live like this, but I cannot let you go."
Georges:	"Seeing you like this... watching you drift further away every day... it's unbearable pain."
Anne:	"I'm no longer the person I used to be. I'm dragging you down with me, but there's nothing I can do."
Georges:	"Sometimes I'm exhausted to the point of breaking. But leaving you is harder than exhaustion."
Anne:	"You're trying to carry me like this, but I know you're getting tired too."

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**Table 2.** Quotes from the Film Skeer

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Ella: "Taking care of you every day can sometimes feel so hard, John. But leaving you would be even harder than doing this."
John: "You don't have to do this, Ella. You need to take care of yourself too."
Ella: "I know. But I will never stop taking care of you."
John: "Thinking about how it will all end is frightening."
Ella: "Maybe the end is just a new beginning. We are choosing our own ending, and that's what makes us strong."
Ella: "I've always promised you that I'd be by your side no matter what. This journey is not just a goodbye for you; it's a farewell for me too."
John: "As long as you're by my side, everything feels a little less scary."

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The dialogues in these films illustrate the desire of patients, who are aware of their final moments, to spend this time with their loved ones (**Table 1 and Table 2**). Respecting the patient's preferences in this matter and involving them in decision-making is not only a moral obligation but also a critical component of providing high-quality care.<sup>47</sup> Research exploring the perspectives of family members on caregiving indicates that they find providing care at home to be deeply meaningful. Family members often view it as a unique opportunity to express love and accompany their loved ones through their final journey.<sup>48,49</sup>

Georges, his efforts to honor a promise he made to Anne, struggles with overwhelming exhaustion and difficulty coping at home. Despite recommendations to place Anne in a care facility, he is determined to fulfill his promise never to do so. In the film, the portrayal of professional caregivers is chilling—depicted as infantilizing, degrading, cruel, and even abusive. In such circumstances, the involvement of family members, home care support, adequate caregiving assistance, and opportunities for short breaks can significantly ease the burden. Adequate social support can help mitigate stress during challenging situations by influencing the appraisal of stress and potentially alleviating the negative emotions associated with chronic illness.<sup>51</sup> Additionally, the provision of palliative care and caregiver support programs can help fulfill what may be considered a living wish of the elderly individual: the desire to "die at home." The preferences of individuals with chronic and progressive illnesses regarding where they wish to spend their final days and ultimately pass away can vary. These differences are influenced by factors such as the availability of resources, sociodemographic characteristics, and the individual's experiences with illness and caregiving.<sup>47,51</sup>

Recognizing and addressing these complexities is essential to provide care that aligns with the dignity and wishes of patients while supporting their caregivers effectively. In both films, end-of-life preferences and the challenges that arise during the caregiving process reveal a delicate balance between individuals' pursuit of autonomy and the emotional burdens carried by caregivers. At this stage, the emotional weight shared between the caregiver and the patient is fundamentally rooted in the concepts of compassion and empathy.<sup>52</sup> This dynamic often leads caregivers, witnessing the struggles, suffering, and inevitable death of their loved one, to contemplate the idea of ending the pain endured by the person they care for. This act, referred to as "**compassion-based end-of-life decision**" particularly in the context of unbearable pain brought on by aging and terminal illness, gives rise to significant ethical and philosophical debates.<sup>53</sup> While there are differing perspectives on this issue in the literature, a common thread among them is the effort to understand the individual's suffering, alleviate that pain, and preserve human dignity. These efforts often form the moral foundation for actions taken in such circumstances.<sup>54,55</sup>

These narratives highlight the complexity of caregiving at the end of life, emphasizing the moral, emotional, and philosophical challenges faced by caregivers as they strive to balance compassion with ethical considerations. These ethical approaches are explicitly explored in both films. In *Amour*, Georges witnesses his wife Anne's constant suffering and declining quality of life. Bound by his promise to never leave her (**Table 3**) and driven by profound love and compassion, he chooses to end her pain through an act of **compassion-based end-of-life decision**. Unable to bear the burden of this act, he also plans his own death. Similarly, in *The Leisure Seeker*, Ella observes the diminishing quality of life and suffering of her husband, who has

Alzheimer's disease, and makes a radical decision. Acting on behalf of her husband, who is no longer capable of making decisions, and herself, Ella bases her actions on the belief that she is choosing "what is best" for him. Her decision is rooted in protecting him and approaching him with compassion. While *Amour* includes the presence of a living wish—Anne's explicit desire to avoid hospitalization and to continue her care at home—the two films both portray significant end-of-life decisions. Anne's refusal to return to the hospital and her wish to be cared for at home parallel the decision in *The Leisure Seeker* where both John and Ella reject the idea of living in a care facility. These decisions underscore the central theme of autonomy and dignity in end-of-life care. Both films provoke thought about the moral and emotional complexities of caregiving, highlighting the profound impact of these choices on the caregiver and the patient. They reflect on the weight of love, promises, and the responsibility of honoring one's wishes in the most vulnerable moments of life.

**Table 3.** Quotes from *Amour* Reflecting Anne's Insistence on Her Preferences

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Anne: "There's no point in continuing to live. That's the reality. I know it's only going to get worse. Why should I make both of us—make you and me—go through this?"

Georges: "You're not making me go through anything."

Anne: "I don't want to go on. You're making such sweet efforts to make everything easier for me. But I don't want to go on. For my own sake, not for yours."

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Decisions regarding the medical care of aging individuals are often defined through documents such as advance directives or living wills. These documents may request the cessation or withdrawal of life-sustaining treatments in cases where recovery is deemed impossible, and death is expected.<sup>56</sup> However, a "living will" may not always be feasible or applicable in practice.<sup>57</sup> It is argued that appropriate medical care decisions for elderly individuals should not rely solely on patient autonomy or physician recommendations but must also take the patient's quality of life into account. Furthermore, it is crucial to ensure that such decisions are made when individuals are competent to do so and are free from emotional, social, or economic pressures that might compromise the ethical validity of their choice. Ensuring that no factors overshadow the ethical integrity of the decision is paramount.

The act of **compassion-based end-of-life decision**, regardless of the presence of a patient's explicit living wish, is a matter that must be addressed through its legal, ethical, and emotional dimensions. Films like *Amour* and *The Leisure Seeker* can be regarded as valuable tools for exploring these debates cinematically. While some perspectives view **compassion-based end-of-life decision** as not merely an act of ending suffering but also as one rooted in respect for human dignity, the situation becomes more complex when the individual is unable to articulate consent or when it is unclear whether the act aligns with their true wishes. Beyond the legal implications of such an act, these scenarios raise intricate ethical questions. The ethical debate often centers on differing interpretations: whether the act reflects a romantic decision based on love and devotion, or whether it is the result of despair, caregiver burnout, and severe psychological breakdown. These divergent views highlight the complexity of the issue and underscore the importance of maintaining this debate as a focal point in ethical discourse.

## Conclusion

Research aimed at understanding family members' perspectives on caregiving has shown that they often find providing care at home to be meaningful. They view it as a unique opportunity to express love and accompany their loved ones through their final journey.<sup>48,49</sup> However, when robust support systems are lacking, family members may struggle to cope with the challenges of caregiving. Support from family, home care services, appropriate caregiver assistance, and opportunities for short breaks can significantly ease the burden and help families manage better. Additionally, the provision of palliative care and caregiver support programs can facilitate the fulfillment of what might be considered a living wish of the elderly individual—such as the

desire to "die at home." The location where individuals with chronic and progressive illnesses spend their final days and ultimately pass away varies and depends on several factors, including resource availability, sociodemographic factors, and personal experiences with illness and caregiving.<sup>47,51</sup> The films selected for this article offer perspectives that may vary significantly among viewers, especially those who are not healthcare professionals. Elderly spouses in caregiving roles are portrayed as the "heroes of cautionary tales" about how to care for a loved one under any circumstance. However, they may also be perceived as "cruel" due to their actions and decisions.<sup>58</sup>

That said, these films, with their themes of aging, death, caregiver burden, anticipated death, dignified dying, and living wishes, can serve as educational tools, particularly for healthcare professionals. In fields where using feature films as extended case studies is common, such narratives may act as facilitators for students to discuss healthcare professionals' roles, the challenges of end-of-life care, and caregiving processes. However, further research is needed to substantiate the effectiveness of such educational approaches.

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### Ethical Approval

As this study is based on a content analysis of publicly available films and does not involve human participants, Ethical Committee Approval is not required.

### Author Contributions

Zeynep Acar: Idea/concept, design, supervision, data collection, analyses and interpretation, literature review, writing-review, critical review.

Yasemin Gün Koşar: Design, data collection, analyses and interpretation, literature review, writing-review, critical review.

Müesser Özcan: Design, supervision, analyses and interpretation, literature review, writing-review, critical review.

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