

**Death and Dying and End-of-Life Education: Literature Review**

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Death and dying are significant concerns brought to many healthcare professionals. Many nurses are on the front line of healthcare and experience the death of their patients daily. Some nurses can easily cope with the loss of their patients, while some are still grieving. Experiencing the death of a patient can cause emotional and psychological stress amongst the nursing staff. As nursing students, it is essential to understand the concept of death and dying. New graduate nurses often experience emotional exhaustion in the workplace, and the topic of death and dying can create an emotional shock. Dealing with and experiencing death can bring about many emotions and thoughts that affect a student's attitudes and behaviors. Knowing nursing students may or may not be involved in end-of-life care during nursing education, it is essential to understand how individuals perceive death and dying. Nursing students in the upcoming generations need the knowledge and self-awareness to cope with loss and prevent it from being a barrier in their work environment. The purpose is to assess individuals' perceptions of patient death and educate individuals on how to facilitate care and provide comfort to dying patients (Petrongolo & Toothaker, 2021). Nurses often feel they rely heavily on personal knowledge instead of being provided structured education. Knowing nursing students' perceptions and level of knowledge helps nurse educators know what areas to focus on when caring for a dying patient. Overall, providing the proper education to students helps strengthen one's ability to provide quality end-of-life care. The articles also examine the increasing need of patients wanted end-of-life care. Thus, healthcare professionals should get proper education concerning end-of-life care through proper training and education.

### **Nursing Student's Perceptions of Death and Dying: A Descriptive Quantitative Study**

The 2021 article *Nursing Students Perceptions of Death and Dying* by Mary Petrongolo and Rebecca Toothaker discusses nursing education about death and dying. The article focuses on determining how nursing students perceive death and dying. The research aims to gather data on the behaviors and attitudes of sophomore, junior, and senior nursing students. The students' emotions and personal background can impact how students respond to end-of-life situations. As new nursing graduates, end-of-life care can lead to anxiety and grief (Petrongolo & Toothaker, 2021). Focusing on proper education and sufficient clinical experience helps nursing students develop situational and emotional awareness. The experience prepares individuals to provide care to dying patients without being negatively impacted by it (Petrongolo & Toothaker, 2021). Overall, the purpose of the study is to consider the student's perceptions and build a curriculum so individuals can adequately manage the care of dying patients.

### **Key Points**

A descriptive quantitative study explored the perceptions of sophomore, junior, and senior nursing students regarding death and dying. The single-site study assessed nursing students' perceptions of death. The research obtained a sample of individuals through convenience sampling nursing students enrolled in the undergraduate nursing program. Before conducting the study, the Institutional Review Board Committee approved the study. Researchers provided participants with an informed consent letter, which ensured the voluntary nature of the participation. A survey was then given to the participants to complete. The survey included demographic questions like gender, age, and educational level. The Death Attitude Profile- The revised survey measured personal views of death and dying. The DAP-R was a valid and reliable tool with an alpha coefficient of 0.97. The Frommelt Attitudes Toward Care of the Dying survey was used to assess if the students with the most experience were comfortable

providing end-of-life care (Petrongolo & Toothaker, 2021). The DAP-R questionnaire contained 32 statements ranked on a 7-point Likert scale.

On the other hand, the FATCOD questionnaire gathered data on a 5-point Likert scale (Petrongolo & Toothaker, 2021). 102 students participated in the study, and all the participants were 18. 39 participants were seniors, 29 were junior, and 34 were junior. The DAP-R questionnaire showed a positive relationship between time on clinical experience and positive student attitudes toward death and dying (Petrongolo & Toothaker, 2021). Moreover, the junior students had the highest average on the FATCOD questionnaire. The participants felt they were more comfortable providing end-of-life care. The senior students felt they could take full responsibility for patients at the end of life. Data in the study is significant because of the attribution to the perception of death and dying amongst nursing students and not by chance. All the tests were two-tailed, with a p-value of less than 0.5, which was considered statistically significant (Petrongolo & Toothaker, 2021). The study concludes that clinical experience and academic level are positive indicators that help enhance attitude towards patients' death.

### **Assumptions**

The author assumes that an increase in education on death and dying and a higher level of education can help create a positive outlook on death and dying. Education and end-of-life simulations can allow the student to obtain more practice in their clinical setting. Such education helps to break the fear of dying patients and improves one's attitudes and beliefs to better care for patients (Petrongolo & Toothaker, 2021). The author states that small group discussion and group reflection are educational tactics that can benefit students. Participating in group sessions can help increase the spiritual well-being of students. Moreover, providing stimulations in clinical settings prepares students for future encounters with patients who need end-of-life care

(Petrongolo & Toothaker, 2021). Overall, such educational tactics will cause significant improvements in patient care because students will increase their knowledge and skills in end-of-life care.

### **Deficit/Conclusion**

In conclusion, nursing students can change their perceptions of death in several ways. Individuals receiving more individualized education on specific topics can significantly enhance their skills. The emotional aspect of death and dying changes as individuals become more open to accepting new ideas and approaches to providing care. Nursing students gain valuable experience through experiences like simulations, clinical rotations, and group discussions. According to the FAT COD and DAP-R questionnaires, individuals felt more comfortable treating end-of-life patients through increased education and higher education (Petrongolo & Toothaker, 2021). The author recommends that specific education be provided in nursing practice to provide quality patient care. It is essential to encourage future students to participate in necessary education to have a positive working environment. If nursing fails to accept the specific line of reasoning, the conclusion would be that students would not be able to adapt the necessary knowledge and skills. Nursing students cannot cope with the stressors related to death and dying. Also, individuals will become emotionally drained from the excessive number of dying patients. Thus, proper education is needed to prevent problems in the workplace. The author's line of reasoning is valid because increased education can allow nursing students to feel more prepared when providing care.

## **Preference for Initiation of End-of-Life Care Discussion in Indonesia: A Quantitative Study**

The 2022 article *Preference for Initiation of End-of-Life Care Discussion in Indonesia* by Venita Eng, Victoria Hewitt, and Aria Kekalih focuses on the idea of end-of-life discussion. End-of-life discussion is a complicated topic for many healthcare professionals, including nursing students. As a patient's health deteriorates, it is difficult to make decisions about end-of-life care (Eng et al., 2022). Healthcare professionals must discuss end-of-life care at the early stages. There are several barriers to discussing end-of-life care with dying patients. For instance, healthcare professionals are provided with insufficient resources to initiate discussion. Educators must focus on providing healthcare professionals with tools to help them provide end-of-life education. A study was conducted in Indonesia to determine how many individuals would like a healthcare professional to discuss end-of-life care (Eng et al., 2022). Due to the increasing number of individuals wanting a well-structured end-of-life discussion, the upcoming generation should receive proper education on how to do so. The article discusses that healthcare professionals should discuss end-of-life care with their patients, respect autonomy, and provide appropriate patient services.

### **Key Points**

The descriptive quantitative study assessed the number of individuals wanting end-of-life care in Indonesia. A questionnaire was distributed to the general population using a consecutive sampling method through Jackpot's online survey platform. Moreover, Jackpot is an Indonesian open survey platform that has 611,000 respondents. The participants in the study were over the age of 21 (Eng et al., 2022). In order to mitigate falsely skewed results and good age distribution, the sampling criterion ensured that 20-30% of the respondents were above 40. The same questionnaire was given to healthcare professionals using the snowball sampling method.

Furthermore, 380 participants responded to the questionnaire, and results from 368 individuals were analyzed (Eng et al., 2022). Overall, the average age of the respondents was 32 years old. 80% of respondents stated they would like a healthcare professional to discuss end-of-life care. 94% of the participants wanted to get informed that they were in the terminal phase of their illness. The data in the study is significant because of the attribution of patients wanting end-of-life discussion, and not by chance. All the tests were two-tailed, with a p-value of less than 0.001, which was considered statistically significant. Furthermore, the American Nursing Association stresses that nurses need high levels of education due to the high demand for patients wanting end-of-life information (Eng et al., 2022).

### **Assumptions**

The author assumes that nursing educators need to provide the necessary tools to healthcare professionals for end-of-life discussions as individuals start demanding more information regarding their care. The American Nursing Association describes how nurses worldwide do not get enough education on end-of-life care (Eng et al., 2022). It is becoming difficult to meet patients' demands due to healthcare professionals' lack of knowledge and training. Receiving proper education early on can make nursing students more confident and skilled regarding end-of-life care. Patients at the end of life are a huge priority, and healthcare professionals must provide thorough and accurate patient information. The author also implies that educators should be aware of the growing demands of patients and should implement ways to retain information regarding end-of-life care as soon as possible. Nursing students have limited opportunities to experience end-of-life care, so it is essential to use tools like patient simulations to guide learning (Eng et al., 2022).

## **Conclusion/Deficit**

In conclusion, the author's line of reasoning should get accepted due to the growing demands for end-of-life education. Students find themselves being confident when they have continuous education. Simulations and interaction with patients in clinical settings help to strengthen knowledge (Eng et al., 2022). Students should also be encouraged to work with healthcare professionals. Shadowing professionals help students gain insight on how to provide specific care. For instance, when healthcare professionals educate their patients on end-life-care, students can observe and make notes. Making notes helps students refer to them in the future when it comes time to provide education. End-of-life discussion takes much practice; thus, educators must provide education early. If nursing fails to accept the line of reasoning, patients will not acquire the necessary knowledge. Demands for the need for end-of-life discussion will continue to increase. Furthermore, students will not get the necessary education to provide quality patient care (Eng et al., 2022).

### **The Effectiveness of End-of-Life Care Simulation in Undergraduate Nursing Education: A Randomized Controlled Trial**

The 2019 article *The Effectiveness of End-of-Life Care Simulation in Undergraduate Nursing Education* by Tomoko Tamaki and Anri Inumaru emphasizes how nursing students have limited opportunities to experience end-life care, so proper education is needed. Simulations are an essential focus when it comes to learning about end-of-life care (Tamaki et al., 2019). The study aims to assess the effectiveness of end-of-life care simulations in improving knowledge, skills, and performance amongst nursing students. Nurses spend more time with patients at the

end of life than other health professionals. Thus, end-of-life care is an important concept that needs to get taught in nursing school.

Moreover, end-of-life care is complex and requires proper management. Simulation-based healthcare and nursing education are not as prevalent in Japan; thus, the quantitative study was performed in a Japanese university nursing school to assess the effectiveness of simulations. According to the article, previous studies have shown that simulations help nursing students learn practical communication skills and health assessments, which are essential components of end-of-life care (Tamaki et al., 2019).

### **Key Points**

The randomized control trial evaluated the effectiveness of simulations on end-of-life care. In the study, students interested in participating received a simulation or a control group using the block method of randomization. The control group followed the standard nursing curriculum that got provided to them. The simulation group completed the entire end-of-life care simulation. The eligible students for the study were undergraduate students who had achieved all adult nursing lectures, agreed to participate and signed a consent form (Tamaki et al., 2019). The hypothesis was that students who participated in the simulation would have increased knowledge, performance, and self-confidence compared to the control group. The study focused on a patient with rectal cancer. The participants got trained at least 3 times to increase competency. In the first session, the researcher explained the patient's history in the simulation. In the second and third sessions, the students were allowed to ask questions and correct their performance (Tamaki et al., 2019). After the study, researchers provided participants with a knowledge questionnaire it consisted of 10 multiple choice questions that ranged from 0 to 10

points. Both groups got asked to complete the Objective Structured Clinical Evaluation to evaluate skill performance. The study's data is significant because the improved knowledge and skills are caused by simulations, not by chance. All the tests were two-tailed, with a p-value of less than 0.05, which was considered statistically significant. Furthermore, 20 individuals in the simulation group and 18 in the control group completed the study. The results show that end-of-life care simulations increase students' knowledge, performance, and self-confidence (Tamaki et al., 2019).

### **Assumptions**

Regarding the study, the researcher assumes that end-of-life care simulations can help to increase students' knowledge and skills. Learning from simulations allows students to be confident and prepared when it comes time to educate patients on end-of-life care. Nursing students are not able to experience end-of-life care through clinical practice, so simulations do the job of providing an alternative way to acquire competency. Students who do simulations report significantly higher knowledge scores than those who do not (Tamaki et al., 2019). Students who also participate in simulations have higher scores for clinical judgment, skill performance, and communication skills. In the study, individuals report higher scores regarding confidence, knowledge, and skills. An improvement in psychological care skills caused by simulations leads to an increase in confidence. Considering how students do not get enough clinical experience, simulations help to create an almost realistic experience for students. The end-of-life care simulation is a great way to increase patient care quality and knowledge regarding end-of-life care (Tamaki et al., 2019).

### **Conclusion/Deficit**

The author's line of reasoning is valid and can be readily accepted, considering how individuals can enhance their skills and knowledge through simulations. Students do not feel as confident when they do not get enough education on end-of-life care. Simulations promote critical thinking, provides immediate supervision, and helps student gain knowledge and experience. Simulations also help students reflect on their performance and make any corrections if needed. Simulations are the main form of education effective when providing end-of-life discussions to patients (Tamaki et al., 2019). Every nursing student should participate in simulations. Individuals felt comfortable when communicating with patients after participating in simulations. Throughout the years, there has been an increase in individuals who want education on end-of-life care. Thus, nurse educators need to work together to improve simulations to help improve patient care and strengthen students' knowledge. If nursing fails to accept the line of reasoning, the quality of patient care will decrease. Also, nurses will not be able to gain the necessary knowledge and skills to educate patients on end-of-life care (Tamaki et al., 2019).

### **Conclusion**

Death and dying is an important topic that many healthcare professionals experience pretty frequently. The topic of death and dying in the healthcare field can cause emotional and physical stress in some (Petrongolo & Toothaker, 2021). Throughout the years, studies have shown that individuals perceive death as a big concern to many. They are providing proper education about death and dying to staff and nursing students. The articles focus on the increased demands of patients wanting end-of-life discussion. Nursing students get minimal clinical experience; thus, nurse educators must build a curriculum to increase a student's knowledge and skills. Some useful education tools are nurse shadowing, simulations, group discussion, and

interacting with patients in a clinical setting (Petrongolo & Toothaker, 2021). Being provided education on death and dying can help students break their fear, increase knowledge and skills, and build confidence (Tamaki et al., 2019). Overall, nursing educators should be aware that it is essential to educate students early on to increase competency in the future.

Moreover, good education results in positive patient outcomes. Patients have many questions about end-of-life care, but healthcare professionals can help clear up any confusions they have with their care. End-of-life education helps nurses build competency toward patients, which can help increase patient satisfaction. Patients will be aware of what to expect when it comes time for end-of-life and has an idea of what actions to take to be comfortable towards the last stage in life. Receiving proper education on end-of-life care can benefit nursing practice. Nurses can make fewer errors reducing the chances of providing false information. Considering how simulations can help increase knowledge and skills, nurses can also increase the quality of care for patients by providing accurate information (Tamaki et al., 2019). When nurses increase their confidence, they can communicate efficiently and deal with conflict better. Nurse education is directly related to quality improvement and can significantly improve performance in the workplace. Knowledge of end-of-life care can allow other healthcare professionals to learn new information. When there is an increase in the number of individuals communicating and working together, it helps to create a structured working environment and increase patient satisfaction. Educating students on end-of-life care early on can allow hospitals to be more prepared when it is time to provide patient education. The healthcare system can see significant improvements through end-of-life education mainly because of the growing demands of individuals wanting end-of-life education (Eng et al., 2022). The healthcare system will be more prepared and knowledgeable when providing end-of-life care. Having high-quality conversations with patients

can help patients maintain autonomy and dignity. Along with that, there will be an increase in quality of life, and hospitals will see an increase in patients making better-informed end-of-life decisions.

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