

A study of death education for nursing students: scoping review

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Author contributions

Zhu JJ was responsible for conceptualising, writing and revising the content, ensuring its originality and clarity. Meanwhile; Cui XS was responsible for revisions and overall control, guaranteeing the quality and consistency of the work.

Competing interests

The authors declare no conflicts of interest.

Acknowledgments

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Peer review information

Nursing Communications thanks Shikha Gupta, Maha Mohammad Subih and other reviewers for their contribution to the peer review of this paper.

Citation

Zhu JJ, Cui XS. A study of death education for nursing students: scoping review. *Nurs Commun.* 2024;8:e2024019. doi: 10.53388/IN2024019.

Executive editor: Xiu-Jin Wei.

Received: 05 June 2024; Accepted: 12 September 2024;

Available online: 14 September 2024.

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Abstract

This study aimed to research existing death education literature, explore its necessity, forms, and impacts, and provide references for regions lacking it, by conducting a scoping review of 18 documents from 10 databases, finding high demand among nursing students and positive effects of various teaching strategies, concluding that death education is necessary and future research should focus on enhancing evaluation timeliness and standardizing criteria to develop a complete system.

Keywords: death education; nursing students; attitudes to death; coping skills; teaching formats; scoping review

Background

Philosophically, Heidegger perceives death as being born towards death, which is a part of life and merely represents the end in the temporal sense [1]. From a biological perspective, it is defined as the loss of whole-brain function, which is irreversible, that implies the complete end of life and dissipation in the form of existence [2, 3]. Death is a topic that both Western and Chinese cultures tend to avoid, as it is regarded as ominous and can occur at any given time through various ways or means [4, 5].

Death education has been defined as a strategy or approach for enhancing the quality of nursing care by teaching students about life and death, obtaining coping skills to deal with death, and ameliorating negative emotions and attitudes toward death, thereby establishing a correct perception of death [6, 7]. Compared with other professions, nursing students have to come into contact with a large number of death cases during their regular lectures, clinical practice, and later work, under the influence of the corresponding cultural practices, facing the persistent blow of death will cause tremendous pressure and pain for nursing staff, at this time, the lack of death education or inappropriate educational methods will directly affect the overall state of caregivers and the quality of care [8–10]. Caregivers report that due to a lack of good coping skills, they often feel helpless, confused, guilty, or even apathetic when faced with a patient's death, especially when healthcare workers experience or face a patient's death for the first time. The negative emotions and attitudes resulting from mishandling the situation will persist throughout their careers [11, 12]. Studies have shown that training nurses in courses related to death education contributes to their work quality and improvement [13]. As reserves for formal nursing staff, death education for nursing students needs to start during their student years by integrating death education into the nursing curriculum as a way to develop positive death awareness and competence [14].

Although death education enjoys a long history of development in Western societies and is relatively mature, death education systems are still lacking in some other countries or regions [15, 16]. Scholars from different countries are continuously exploring and practicing the forms of death education in an effort to achieve more favorable teaching and learning outcomes. This systematic scoping review presents an overview of specific aspects of death education to provide deeper insights into its development.

Methods

Design

The article employs the methodology of Arksey and O'Malley for scoping reviews. As per the article statement of, given the broadness of our research questions, scoping reviews are more suitable for the exploration of the questions [17, 18]. The methodology of the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews Checklists utilized for reporting to guarantee the logic and rigor of the full text [19].

Research questions

The three main questions examined in this scoping review are an analysis of the need for death education; an exploration of the forms of death education delivery, including teaching methods and strategies; and an analysis of the effectiveness of death education delivery, including roles and impacts.

Development of inclusion criteria

Inclusion criteria: (1) The article places no restrictions on the type and language of the research literature. (2) The research objects within the article include students specializing in nursing (including intern nursing students and on-campus nursing students). (3) The research topic is death education. Exclusion criteria: (1) the research object does not include nursing students, (2) The literature that is repeatedly

published or has the same data from the same source. (3) The literature that is of the conference type, abstract type, and the literature that cannot be obtained in full text. (4) The literature that has an excessive number of the same research topic.

Formulation of the search strategy

The search was not restricted by the year and language of the articles, and it was conducted until July 2023. A search was carried out in ten Chinese and English databases through the combination of subject words and free words. Among them, there were six English databases: Web of Science, PubMed, Embase, CINAHL Plus, Scopus, and Cochrane Library, and four Chinese databases: Zhiwang, Wanfang, VIP, and Sinomed. For the specific search strategy, please refer to Appendix 1.2.5 Literature screening and data extraction.

After the retrieval of literature, the EndNote 20 software was employed to screen the literature, which was independently conducted by two researchers in accordance with the NERC criteria. In the event of disagreement, the opinion of the third researcher was consulted. The literature screening was divided into two steps: initial screening and re-screening. During the initial screening, the literature was filtered based on the title and abstract. The filtered literature was downloaded and read in full text and then re-screened to determine the final inclusion of the literature.

Data extraction and summarization

Data were extracted and documented graphically, and the extracted contents comprised the author, year, country, study design, study topic, and effect/results. The content extraction items were independently extracted using an Excel sheet to ensure accuracy after the decision was reached by two researchers through mutual consent. The extracted data were analyzed using tables for descriptive statistics and further thematic analysis regarding the need for death education, the form it is conducted in, and the role/results.

Results

A total of 760 articles were retrieved from 10 databases, and 3 articles were obtained through other sources, totaling 763 articles. Using the EndNote 20 literature management software, a total of 288 duplicate articles were screened out and manually removed. Referring to the inclusion and exclusion criteria, 399 irrelevant articles were excluded after reading the titles and abstracts of the remaining articles. After full-text reading of 76 articles, 18 studies were ultimately included.

Basic characteristics of the included literature

A total of 18 papers were included in this study [15, 20–36]. Of which, 10 were published in English, 7 papers written in Chinese, 1 paper in Korean [15, 20–36]. In terms of research design, 5 cross-sectional studies, all of which investigated and analyzed the need for death education, and three of five briefly analyzed the influencing factors of demandability [22, 30, 31, 34, 35]; 4 articles with controlled pre-posttest designs, and 3 articles with uncontrolled pre-posttest designs, all of which explored the effectiveness and the role of different death education approaches in nursing students, and clarified the duration of the role of this education approach for nursing students [15, 20, 21, 28, 29, 32, 36]; 4 literature utilized qualitative research, and 2 were mixed research studies that used a diversity of methodologies to explore the applicability and effectiveness of innovative death teaching strategies [23–27, 33].

Analysis of the demand for death education

To comprehend the demand situation of death education among nursing students, five literatures employed the cross-sectional survey method in quantitative research for questionnaire surveys and analyses. The results all demonstrated that the demand for death education among nursing students (including intern nursing students) was at a relatively high level, nursing students generally believed that schools should offer death education courses and that training related knowledge would greatly benefit their future work [22, 30, 31, 34],

[35]. Among them, nursing students' demand for hospice care, death preparation, and near-death care content is relatively high [30, 35].

The need for death education is affected by multiple factors, such as gender and attitude toward death, with female students scoring higher on the need for death education [22]. Another study showed that bereavement and death education experiences were positively correlated with the level of need [30]; meanwhile, researchers found that the level of need for death education was higher in families with extroverted personalities, only children, and those with a good family background [34].

Analysis of the forms of conducting death education

Different teaching methods and strategies are constantly being tried and challenged by scholars in different countries to achieve better teaching results. Students gave positive feedback on the innovative teaching mode of paired classroom teaching combined with after-school practical learning, where lectures and discussions are spaced out in time, believing that it can fully exert the autonomy of nursing students [29]. It also establishes a brand-new nursing perspective through sharing experiences, creating situations, and thematic discussions, allowing nursing students to be the protagonists of death and its process [24, 26, 28]. By using the Death Café and the interactive Death Anxiety Relief Workshop as a basis, it facilitates nursing students to open up discussions about death-sensitive topics by creating three death-related problem situations to visualize nursing students' imaginings of death and its processes [24, 26, 28]. Moreover, scholars utilize the arts to focus on nursing students' understanding and expression of their feelings about the topic of death, including the use of paintings, music, drama, and other media to assist students in understanding and expressing their feelings about the topic of death [15, 23, 25]. This encompasses the use of painting, music, theater, and photography. As well as a visual way of experiencing death, the casket lying experience, which improves students' negative emotions related to death by exposing them directly to death shocks [20]. These teaching methods enable students to have a better learning experience about death, and research has shown that experiential activities have better pedagogical outcomes than the knowledge teaching category [20].

Analysis of the effectiveness of death education

Attitude domain. Regarding the role and impact of death education on nursing students, several studies demonstrated its positive effect on the attitudes of nursing students toward death and their death-related awareness [15, 20, 21, 23, 25, 27–29, 33]. For instance, the strategy of gradual exposure to death enables students to gradually mitigate negative emotions such as the fear of death, death anxiety, and death avoidance during the activity [20]. It also guides nursing students to continuously enhance their ability to perceive and feel about death in death situations, thereby strengthening caregiving awareness and death consciousness [23]. Furthermore, the experiential-based death program, which starts with sharing ideas and ends with the announcement of a pre-drafted will for an emotional experience after the casket experience, is an educational process that can help nursing students realize the meaning of life and thereby establish correct values regarding life and death [36].

Coping skill areas. Some studies have shown that trained nursing students have made substantial improvements in death coping skills [25–27, 32]. Two studies used the Death Coping Competency Scale to assess them, which contained items such as near-death handling and funeral handling, visually reflecting the gains and growth of nursing students in the course of education [27, 32]. In one qualitative study, students were guided by the instructor to actively think about and explore the created death situations and gained some death processing skills in deeper communication and exploration [26]. Another found that the art gallery approach to education allowed students to slow down, focus on the experience, and increase self-examination by seeing more details, which enhanced the critical thinking skills of nursing students [25].

Discussion

Feasibility analysis of the death education program

Firstly, from the perspective of the demand for death education, both on-campus nursing students and intern nursing students show a relatively high degree of demand for it. Academic level is a positive evaluation index for attitudes towards end-of-life care, the knowledge reserve related to death of nursing students is particularly crucial for the issue of end-of-life care, which attracts global attention, it will directly influence the quality of care provided by nursing students to terminally ill patients and the corresponding care attitudes in their future work [37, 38]. However, researchers have discovered that even nurses with clinical work experience are not always well-prepared when dealing with terminally ill patients and still need professional training to enhance their preparedness [39]. Notably, in undergraduate nursing courses, there is a lack of knowledge related to end-of-life care [40]. On the other hand, as nursing workers who frequently encounter death, they are highly prone to negative emotions such as fear and anxiety when confronted with a large number of death cases. Studies have indicated that this negative attitude is correlated with both physical health and mental health [41–43]. Simultaneously, it also has a considerable impact on the quality of care. In view of this, from the perspectives of clinical care quality and the physical and mental health of nursing students, knowledge related to death is urgently in need of popularization.

Secondly, the death education system originated early and has a long history in countries such as the United States [44]. Although the emphasis on death education in Western societies has declined in recent years, its diverse teaching models still provide references for countries or regions where death education in the nursing profession lags behind [6]. Scholars believe that the experiential teaching model has a better teaching effect on students compared to the traditional knowledge-based teaching model [20]. This might be because facing pain is a better way of learning [45]. Death, as a sensitive topic that has always been avoided in both Eastern and Western cultures, traditional knowledge lectures make it difficult for students to have a deeper understanding. The skills and routine care operations in textbook content make students numb. In contrast, adopting artistic methods such as pictures, audio-visual materials, seminars, situation creation, and on-site experiences enables students to directly confront the impact of death. Through these artistic creations, we can obtain as many experiences and understandings of the feeling of death as possible, thereby enhancing death awareness and care awareness with better perception ability [45]. Some other forms of death education can also be borrowed by us. For instance, projects like "Before I Die" are being implemented more and more widely. By organizing the collected wishes and analyzing the general attitude towards death as an entry point for death education [46], hospice volunteer service experiences have been proven to have a certain impact on attitudes towards death and the sense of meaning of life. It will increase the awareness of the meaning of life but hold a more negative attitude towards death [47]. It is worth noting that there should not be a separation between art and reality. The artistic expression form of death education should ultimately serve clinical care in reality [45].

Finally, regarding the impacts and functions of death education, the research data of various scholars all indicate that this education program has improved the emotional and skill domains of nursing students to varying degrees. According to the Terror Management Theory, emotions such as resistance and denial resulting from facing death stem from our unfamiliarity and lack of cognition of death [48]. More data suggest that death education has a significant improvement effect in the emotional domain. And studies have shown that death perception can ultimately influence death coping ability through death attitude as an intermediate variable, which also implies that various indicators in the emotional domain will have a certain boosting effect on the skill domain [49]. Death-related skills and emotions have a direct and significant impact on the quality of care, and the popularization of death education will ultimately achieve its adhered concepts and purposes [50].

Critical analysis

Although no restrictions were imposed on the publication year and language of the articles in the search strategy in the hope of retrieving more literature, the data of the five articles finally included in the analysis for the summary of demand all came from the Chinese population, this makes it difficult to conduct a comprehensive and overall assessment of the demand for death education worldwide, and this article's exploration of the influencing factors related to death education in various dimensions is not comprehensive and in-depth enough and still needs to be further strengthened. Additionally, in terms of educational methods and strategies, scholars from various countries have carried out multiple explorations and practices. However, there is a lack of authoritative judgment on the effectiveness of these teaching methods. In the assessment of the effects, most studies by researchers were conducted using scales, making the quality bias difficult to control and the authenticity of the results hard to guarantee. Moreover, only one study clearly stated that the effect of the experiment on nursing students lasted for 6 to 11 weeks. As a result, we are unable to determine whether these intervention measures have an immediate or long-term impact.

Conclusion

In conclusion, a scoping review of 18 papers demonstrated that death education is highly demanded, that it exerts a positive impact on nursing students in both the affective and coping skill domains, and that multiple forms of experiential-based teaching and learning strategies are enlightening and referential. Additionally, in accordance with the National League for nursing's nursing education development plan, a unified evaluation standard could be formulated for the effectiveness of various teaching forms and strategy reforms in future studies to further heighten the rigor of the study and assist in establishing a comprehensive death education system.

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