



## Review

## End of life care education, past and present: A review of the literature

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## SUMMARY

**Background:** Research on end of life care education suggests that undergraduate nursing students are largely unprepared to provide end of life care to dying patients and their families. Although there have been attempts to address the issue of lack of preparedness, little is known on how to improve this.

**Literature Review Aims:** To examine how end of life care education has been delivered to undergraduate nursing students and to critically discuss the research on modes of delivery and teaching strategies.

**Review Methods:** An extensive literature search on end of life care education in the undergraduate nursing curriculum was conducted in CINAHL, Mosby's Index, Cochrane Database, Scopus, Eric via Proquest, and Medline. 18 research papers published between 1984 and 2012 that met the selection criteria are included in the review.

**Findings:** Findings of these 18 articles are reported under two main themes: Modes of End of Life Education Delivery and End of Life Care Education Initiatives.

**Conclusion:** This review highlights issues with end of life care education and suggests that end of life care simulation is an innovative strategy that may help to prepare undergraduate nursing students to provide quality end of life care.

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## Introduction

Research suggests that nursing students have anxieties about and difficulty dealing with death and dying (Mallory, 2003). Students are not ready to cope with issues related to death and dying, feel unprepared to care for these patients (Johnson et al., 2009) and view caring for dying people and their families as one of the most distressing and potentially unpleasant tasks that a nurse can do (Allchin, 2006). Caring for dying patients also ranks highly on nurses' experience of stress (Gibbons et al., 2010) and is reported as the second most common source of nursing stress for Australian nurses (Johnson et al., 2009). These findings indicate that undergraduate nursing programs are not adequately preparing nursing students to care for people at the end of life (Mallory, 2003; Allchin, 2006; Johnson et al., 2009; Gillan et al., 2012). This lack of education is reflected in the level and quality of end of life care provided to patients (Mallory, 2003).

## Background

Evidence suggests that end of life care education is an important factor in preparing nursing students for end of life care, and that this may be the most significant factor affecting nursing students' attitudes toward care of the dying (Frommelt, 1991). It is recommended that student's undergraduate training should include a significant amount of both didactic and clinical end of life content (Barrere et al., 2008; Mallory, 2003).

Despite of an increasing amount of death education in undergraduate nursing programs seen today (Barrere et al., 2008), there are many issues identified in the literature with end of life care education resulting in nursing students reporting feelings of lack of preparedness (Mallory, 2003; Dickinson et al., 2008; Johnson et al., 2009; Ramjan et al., 2010).

Research has revealed that there is little content on end of life care in undergraduate nursing textbooks. For example, Ferrell et al. (1999a); Ferrell et al. (1999b), Ferrell et al. (2000a); and Ferrell et al. (2000b) conducted an analysis of 50 nursing textbooks. These studies revealed minimal content on issues related to end of life care with only 2% of texts addressing an end of life topic (Ferrell et al., 2000a).

Furthermore, another major issue identified in the literature is lack of content on end of life care in the undergraduate nursing curricula. Education of death and dying continues to have a minimal

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and inconsistent presence in most undergraduate nursing curricula and training is neither adequate nor appropriate (Mooney, 2005; Barrere et al., 2008; Johnson et al., 2009). Despite attempts to adequately prepare students for end of life care many nursing programs do not have a dedicated or elective course on palliative or end of life care (Hurtig and Stewin, 1990; Barrere et al., 2008), instead integrating content throughout other courses in nursing (Hurtig and Stewin, 1990). In the United States of America, only 3% of 311 nursing programs surveyed had dedicated courses on end of life content in their curricula (Wells et al., 2003) and an average of less than 14 h was spent on end of life issues (Dickinson et al., 2008). In the United Kingdom a mean of between 7.8 and 12.2 h was spent on teaching about death and dying (Lloyd-Williams and Field, 2002). In Australia, of the 26 undergraduate nursing programs surveyed, only 8% (n = 2) allocated > 20 h, while 48% (n = 12) allocated 5–10 h of content on death and dying (Johnson et al., 2009). The authors recommended that urgent attention be given to embedding theoretical content in sufficient depth combined with teaching strategies to promote critical reflection in end of life care.

The literature highlights that not only is the amount of time dedicated to the content an important factor but also that the modes of delivery and teaching strategies used are also of importance.

## Aims

The aims of the literature review were to 1) examine how end of life care education has been delivered to undergraduate nursing students over the last 30 years, and 2) critically discuss the research on modes of delivery and teaching strategies used in end of life care education in undergraduate nursing education.

This paper presents the findings of the first of a two part series exploring end of life care education in undergraduate nursing programs. Past and present methods of providing end of life care education in the undergraduate nursing curriculum will be discussed providing a uniquely Australian, as well as an international perspective. Part two will introduce the emergence of end of life care simulation and provide an extensive review of current evidence on end of life care simulation.

## Review Methods

A search of published literature between 1984 and 2012 on end of life care education was conducted on Cumulated Index to Nursing Allied Health Literature (CINAHL), Mosby's Index, Cochrane Database, Scopus, Eric via Proquest, and Medline. The search terms used are cited in Table 1.

The preliminary literature search located 205 articles. These articles were reviewed for content specifically related to the inclusion criteria of: 'end of life care education'; and 'undergraduate nursing students'. A total of 61 articles met the inclusion criteria. A further 2 articles were identified from reference lists of the identified papers (n = 63).

Due to the high numbers of identified literature on this topic, the following criteria were used to cull high quality research studies: research that 1) specifically assesses modes of delivery and learning strategies on end of life education for undergraduate nursing students; 2) have a clear research question or research aim; and 4) have an identifiable study design. 18 research studies are included in the review. Table 2 provides a decision flow diagram.

Research papers were analysed using thematic analysis by the primary author. Two key themes were identified; Modes of end of life education delivery, including the subthemes of active and experiential learning; and education initiatives. Identified themes and subthemes were confirmed by the other authors of the review. This process of peer review ensured rigour and trustworthiness of thematic analysis.

## Findings and Discussion

### Modes of End of Life Education Delivery

End of life education in undergraduate nursing curricula has traditionally been delivered via theoretical methods in the form of classroom lectures (Hurtig and Stewin, 1990) and small group discussion (Johansson and Lally, 1991; Jo et al., 2009) and these continue to be the primary modes of teaching. However, traditional lectures and other didactic modes of delivery do not provide the opportunity for students to examine their personal reactions to their own experiences and to dying patients (Mok et al., 2002). More promising are the various modes of end of life care education that have recently emerged to promote active and experiential learning. These include hospice visits (Kwekkeboom et al., 2005, 2006), intensive death and dying education programs, and the use of audio-visual aids (Catty and Tamlyn, 1984; Hurtig and Stewin, 1990; Johansson and Lally, 1991; Jo et al., 2009; Dobbins, 2011). Table 3 depicts a summary of research studies on modes of delivery.

*Active learning* is a process that involves strategies or instructional methods that require active student engagement that promotes a greater depth of learning (Sand-Jecklin, 2007). The strategies and instructional methods used to promote students' engagement in thinking about their roles in end of life care include 1) listening to audio recordings (Johansson and Lally, 1991); 2) viewing selected films on death and dying (Catty and Tamlyn, 1984; Johansson and Lally, 1991; Dobbins, 2011); 3) use of art (Jo et al., 2009); and 4) discussions, quizzes and tasks (Lockhard, 1989; Jo et al., 2009). While it is acknowledged that these quantitative studies using experimental or quasi-experimental study designs made an innovative attempt at promoting active learning there are a number of issues identified in designing and implementing teaching strategies and methods.

Firstly, the instructional method should be purposefully selected and readily available. In the use of film, Dobbins (2011) recommends that film clips should be chosen to evoke desired emotions such as empathy and compassion. Secondly, the instructional method is most effective if accompanied by supplementary strategies such as group discussion and reflection. For example, Dobbins (2011) found the use of film to be more effective when followed by reflective learning activities. Thirdly, it is not only the quality of teaching method implemented but also other variable factors, such as the level of the student (junior level or senior level) to be considered for the teaching strategy to be effective. The death education program implemented by Johansson and Lally (1991), using audio and video clips was effective in decreasing the death anxiety of some senior students but increased the death anxiety of some of the junior students. Finally, Jo et al. (2009) incorporated multiple active learning strategies delivered over a 16 week death education program. They found that end of life care education positively affected students' care performance.

**Table 1**  
Search terms used in initial search strategy.

Search Terms:	"AND"	Search Term limiters
Undergraduate Students/Nursing Students/Bachelor Nursing Baccalaureate Nursing Students	Nursing Degree Degree Students/ Degree	End of life care/Palliative care/ Terminal care/Hospice care// Bereavement/ /death/death and stress/Death education/curricula/ curriculum/undergraduate nursing programs
		-not end of life care -not undergraduate nursing students -not education -conference abstracts -letters -editorials Limiters: 144
Total results	61	

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