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What Do Nurses Want to Learn From Death Education? A Survey of Their Needs

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lthough death is an inevitable shared experience, people often fail to recognize the proper grief, bereavement, and mourning practices prescribed within a cultural context (Bonura, Fender, Roesler, & Pacquiao, 2001; Hattori, McCubbin, & Ishida, 2006). As the healthcare providers who spend the most time with patients at the end of life (EOL), nurses find caring for dying patients to be emotionally painful, distressing, and sometimes threatening because the illness is incurable and death is imminent. Many nurses and nursing students have reported difficulty managing death (Schlairet, 2009; Van Rooyen, Laing, & Kotzé, 2005; White, Coyne, & Patel, 2001). Nurses are inadequately prepared to care for patients at the EOL; many reasons contribute to this failure, including deficits in the professional and continuing education of healthcare providers. Nurses lack formal education during their undergraduate curriculum and sufficient on-the-job training regarding death and EOL care (Brazil & Vohra, 2005; Robinson, 2004).

In Chinese culture, death is a taboo topic and families are expected to decide whether the diagnosis should be disclosed to patients. Open discussion of terminal illness and impending death with patients present is not promoted (Chan, Lam, Chun, Dai, & Leung, 1998). Avoiding the discussion of death with patients in Chinese culture further increases nurses' anxiety. However, death education in the curriculum of medical students in mainland China has been limited (Zhang, 2007). Among RNs in mainland China, continuing education and other forms of training regarding death and EOL also are insufficient.

The current study used a self-report questionnaire to examine the needs of death education content of RNs in Shanghai, China. The aim of evaluating those needs was to improve the development of death education and training for nurses in China.

Purpose/Objectives: To identify what nurses want to know most about death education and to obtain baseline data to improve nurses' training and education.

Design: A cross-sectional survey.

Setting: Seven hospitals in Shanghai, China.

Sample: 617 RNs.

Methods: A cross-sectional survey using a self-report questionnaire was administered to a purposive sample of RNs. The data were analyzed with SAS® statistical software, version 9.1.3.

Main Research Variables: Nurses' content needs in death education and the characteristics associated with those needs.

Findings: Eight dimensions of needs were extracted by factor analysis from the results. The dimension of managing issues associated with death and dying had the highest score ($\overline{X} = 4.13$), whereas issues associated with funeral planning had the lowest score ($\overline{X} = 3.51$). The multiple linear regression analysis showed that three factors may have influenced the nurses' needs in death education: educational background, previous training about death education, and hospital size.

Conclusions: Nurses had high levels of need in the content of death education, particularly regarding knowledge and skills in coping with death and dying patients (e.g., caring for patients and their families physically and psychologically).

Implications for Nursing: Educators and administrators should strive to provide high-quality training for nurses and consider the roles of culture, religion, and sociodemographic characteristics when designing death education programs.

Background

The perception of death and dying differs between individuals, varying with sociocultural background, time and place of death, individual values, philosophy, and behaviors toward life (Cicirelli, 1999; Depaola, Griffin, Young, & Neimeyer, 2003; Yeun, 2005). In the 19th and 20th centuries, people's interest in their lives increased