



# Undergraduate Nursing Student’s Experience Engaging in End-of-Life Conversations

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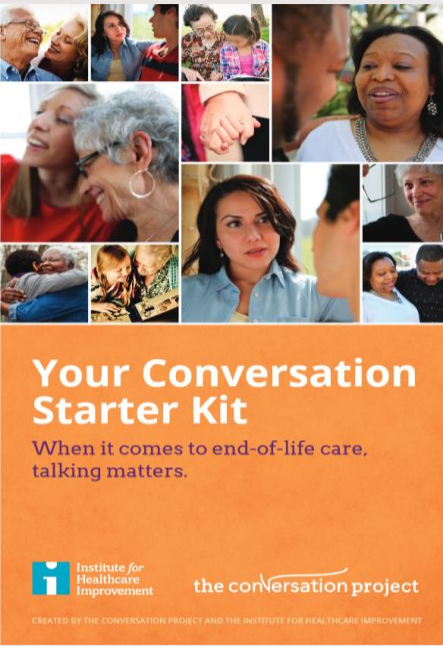
### Background

- Nurses do not feel competent discussing advanced directives and do not perceive them to be important.
- An undergraduate curriculum survey in North Carolina indicated a lack of end-of-life (EOL) care content and 86.7% of programs included no advanced care planning.
- The attitudes of students 18-22 years of age were significantly impacted by targeted EOL education.
- Having students complete their own advanced directives increased confidence and competence in recommending advanced directives.

### Research Design/Methods

Descriptive Phenomenological Qualitative Study  
Nursing Student Assignment- “Chronic Care” course  
Students:

- Received lecture on EOL care & advanced care planning;
- Reviewed the Institute for Healthcare Improvement’s (IHI) video on the “Conversation Project” and downloaded the conversation toolkit;
- Engaged a person of their choice in a conversation using the “toolkit” as a guide;
- Completed a 600-800 word reflection paper related to their experience.
- Giorgi’s (2009) modified five-step method based on Husserl’s philosophy was used to identify themes within the data.



### Participants

55 Students	
35 European American (EA)	6 Asian
3 African Americans (AA)	8 Hispanic
3 Afro-Caribbean (AC)	



### Results

#### THEMES

##### What Matters Most

*Most people don’t want to talk about their death, but it is vital to know what each person values most ..... #7 EA*

*Having this conversation made me become more aware of how unique each person is and how everyone will have different end of life wishes. #32 Hispanic*

##### The “Conversation Starter Kit” Supported The Nursing Student

*The “Conversation Starter Kit “ made everything much easier to talk about. I feel for most people the hardest part is knowing what to ask.....it takes away the stress of asking an awkward or dumb question... #42 EA*

##### Being True To Self And Importance Of Quality Over Quantity

*Even in class being told that some people choose quality over quantity it’s different to hear someone actually choose it. #12 AA*

*I thought about how my mother’s end of life decisions would be respected and how knowing her wishes would inevitably reduce stress on family members. #25 AC*

##### Personal And Professional Growth Through Experiential Learning

*My perception of end of life changed significantly... more comfortable... doesn’t have to be dismal and gloomy ... this is a lesson that I will take with me when I am a practicing nurse... #43 Asian*

##### Preparing For Professional Readiness

*I wanted to pretend in a way she was a patient. I would like to treat every patient with compassion as if they were my own mother, but also with the comportment of a professional. #27 EA*

### Cultural Insight

- *Some people aren't as afraid of death because of their religion, and others are afraid of death because of it. #26 AA*
- *I found that his culture fostered a more independent role in end of life care whereas my culture reflects a collective role involving my family. We realized that these differences could result in different wishes.... #23 Asian*
- *...some trouble with our cultural background because we are both Brazilian and we discussed how our Brazilian culture and the American culture can sometimes lead us to have different wishes. #32 Hispanic*
- *It is a “taboo” subject, much like sex is. #14 Hispanic*



### Implications

#### Education

- Experiential learning is transformative, can enhance professional competence, and support greater engagement of nurses in EOL conversations.

#### Research

- Studies on this topic are limited. Future studies are critical in identifying barriers to educating competent nurses to address EOL conversations.

#### Practice

- Nurses educate and advocate for persons and families regarding advanced directives. Engaging nursing students in EOL discussions and advanced care planning may enhance professional growth and competence.

### Conclusion

- EOL conversations and advanced care planning are important processes that support personhood and may diminish the need for unwanted costly care.
- Nurses are often in a position to educate and advocate for persons and their families regarding advanced directives and play an integral role in EOL decision making.