

Journal Watch

Impact of death and dying on the personal lives and practices of palliative and hospice care professionals

Shane Sinclair

CMAJ 2010, early release, published at www.cmaj.ca on Dec 6, 2010

Prepared by: Cheryl Nekolaichuk, PhD, R. Psych.

Reviewed: Tertiary Palliative Care Unit 43, Grey Nuns Community Hospital
January 11, 2011

Abstract

Working within the landscape of death and dying, professionals in palliative and hospice care provide insight into the nature of mortality that may be of benefit to individuals facing the end of life. Much less is known about how these professionals incorporate these experiences into their personal lives and clinical practices.

Methods: This ethnographic inquiry used semi-structured interviews and participant observation to elicit an in-depth understanding of the impact of death and dying on the personal lives of national key leaders ($n = 6$) and frontline clinicians ($n = 24$) involved in end-of-life care in Canada. Analysis of findings occurred in the field through constant comparative method and member checking, with more formal levels of analysis occurring after the data-collection phase.

Results: Eleven specific themes, organized under three overarching categories (past, present and future), were discovered. Early life experiences with death were a common and prominent feature, serving as a major motivator in participants' career path of end-of-life care. Clinical exposure to death and dying taught participants to live in the present, cultivate a spiritual life, reflect on their own mortality and reflect deeply on the continuity of life.

Interpretation: Participants reported that their work provided a unique opportunity for them to discover meaning in life through the lessons of their patients, and an opportunity to incorporate these teachings in their own lives. Although Western society has been described as a "deathdenying" culture, the participants felt that their frequent exposure to death and dying was largely positive, fostering meaning in the present and curiosity about the continuity of life.

Strengths

- Detailed description of data collection methods
- Increased trustworthiness through member checks, auditor's examination of field notes, two coders (author + author's supervisor) for initial analysis;
- Themes well supported by participant quotes

Weaknesses

- Auditor was author's supervisor (an independent auditor would have strengthened the design)
- Use of a convenience sample for frontline staff from a single hospice setting – participants may have had an expressed interest in the topic, no specific examples of "negative cases"
- Other approaches for increasing trustworthiness – comparison of written transcripts with audio recordings, use of independent coders throughout data analysis process, review of findings by other health care providers in palliative care who were not part of the study

Relevance to Palliative Care

There is limited research focusing on the impact of death and dying on health care providers in palliative care. The findings from this study provide a meaningful and hopeful framework for other colleagues working in the field, as well as those who are new to the field of palliative care.