THE MORE I SEE THE DEATH,
THE MORE I LEARN ABOUT
LIFE: A PERSPECTIVE

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Dealing with patients’ death is a personal yet a challenging experience for nurses. In a setting like intensive care unit (ICU), the death might be a part of nurses’ daily basis where nurses witness many deaths of the patients. Witnessing repetitive death of the patients result to nurses’ physical and psychological distress including sleep disturbance, intention to leave the unit they work, feeling guilty and regret (Anderson, Kent, & Owens, 2015).

Literatures showed that nurses tend to experience the grief in dealing with subsequent death of the patients (Adwan, 2014; Betriana & Kongsuwan, 2018; Shimoinaba, O’connor, Lee, & Kissane, 2014). Some nurses admitted that they respond to patients’ death by verbalizing terrible feeling (Shimoinaba et al., 2014), guilty (Anderson et al., 2015), and thought about patients’ death (Wilson, 2014). However, these grief reactions are often hidden and not well acknowledged. Nurses may feel the grief, but they hide their feeling inside as they perceive that patient’s death is the normal event in their routine and they are supposed to act professionally (Funk, Waskiewich, & Stajduhar, 2014). These reactions related to professional stigma which occurs among nurses.

Professional stigma is a condition where nurses are able to accept the grief of patients and their families, but they cannot accept their own and their colleagues’ grief (Wisekal, 2015). This condition cause nurses to experience disenfranchised grief without their knowledge. Disenfranchised grief is defined as the condition of grief which is not acknowledged publicly, the mourners do not realize that they feel the grief until people around them recognize their change behavior as the result of their grief reaction (Doka, 1987). Some nurses reacted to patients’ death by hiding their feeling and grief inside and acted as nothing happens until their family recognize their changed behavior as their reaction of patients’ death. The grief that nurses feel may relate to their empathy for patients and families. Empathy is the

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capability of nurses to feel and understand others’ feeling. Nurses may feel the grief because they feel the loss and understand the loss felt by bereaved families (Carper, 1978). However, it is also important to maintain professional nursing image in that situation. As a professional care provider, nurses should understand their own feeling, how to deal with their feeling, and what they are supposed to do in that situation. Nurses may feel the grief inside and have different reactions when their patients die but in the same time they should provide psychological and spiritual support for patients’ families. Being able to provide support for families in that situation is possible to do when nurses can recognize and effectively cope with their own grief.

Dealing with patients’ death does not always lead to negative consequences. Despite of various reactions concerning patients’ death, some others found meaning in dealing with the death of the patients. Previous study exploring the lived experience of grief among Muslim nurses in Indonesia revealed that nurses found the meaning of life and death through their grief experience (Betriana & Kongsuwan, 2018). In their study, under the thematic category of lived time ‘anticipating the future of own death’, the nurse participants admitted that their awareness of being good in life increased. Experiencing patients’ death becomes a moment to appreciate the life and prepare themselves for their future death and life after. Similarly, another study investigating front line end-of-life care among resident care aides found that the participants created meaning about life and death after dealing with patients’ death. In their study, the participants understand that death is a normal part of life that should be accepted and prepared (Funk et al., 2014).

Being a nurse and dealing with many deaths are not supposed to make nurses lower their empathy. Conversely, nurses experience the grief and more empathy. Nurses’ grief becomes a phenomenon effecting nurses across cultures, beliefs, and nations. Despite of the possible negative consequences caused by their grief, they found and created the meaning within their grief experience. They become understand the sense of life and death. The more they see the death, the more they learn about life.

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