

The use of drawing to enable nursing students to reflect on death and dying

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ABSTRACT

Introduction. Nursing students often find themselves anxious and ill-prepared to deal with death and bereavement situations. Traditional methodologies, such as lectures, prove to be insufficient to provide students with subject matter expertise and effective coping strategies.

Objectives. To foster students' awareness of emotions related to death and bereavement, to develop skills in accompanying people and carers in these difficult situations and to promote the sharing of experiences as a tool for personal and professional growth.

Methods and tools. The workshop involved 135 first-year nursing students from a university in north-eastern Italy. The four-hour activity was designed for groups of 25 participants led by an academic tutor assisted by experienced clinical nurses. Through non-verbal techniques such as drawing and guided visualisation to encourage the exploration of beliefs and emotions related to bereavement and death, self-awareness and shared experiences were stimulated.

Results. The students graphically represented feelings of fear, sadness, loneliness and acceptance. The presence of experienced nurses enriched the experience, promoting discussion as well as personal and professional growth. The experience created a safe learning environment, stimulating sharing and mutual support. Participants expressed satisfaction with the approach used and suggested further similar activities for the future.

Discussion. This experience demonstrated the importance of addressing the topic of bereavement and death in nursing education. The use of drawing and other non-traditional techniques facilitated the expression of emotions and promoted greater awareness and understanding by students. It is important to integrate these educational practices into academic programmes to improve students' preparedness and resilience in dealing with end-of-life situations.

Keywords: Nursing students - drawing - reflection - death - dying

RIASSUNTO

Introduzione. Gli studenti di infermieristica spesso si trovano ansiosi e poco preparati per affrontare situazioni di morte e di lutto. Metodologie tradizionali, come le lezioni frontali, si rivelano insufficienti per fornire agli studenti competenze sull'argomento e strategie di coping efficaci.

Obiettivi. Favorire la consapevolezza degli studenti riguardo alle emozioni relative alla morte e al lutto, sviluppare competenze nell'accompagnamento delle persone e dei *caregiver* in queste situazioni difficili e promuovere la condivisione delle esperienze come strumento di crescita personale e professionale.

Metodi e strumenti. Il workshop ha coinvolto 135 studenti del primo anno di Infermieristica di una Università del Nord-Est Italia. L'attività, della durata di quattro ore, è stata progettata per gruppi di 25 partecipanti guidati da un tutor didattico affiancato da infermieri esperti di clinica. Attraverso tecniche non verbali come il disegno e la visualizzazione guidata per favorire l'esplorazione delle convinzioni e delle emozioni legate al lutto e alla morte, è stata stimolata l'autoconsapevolezza e la condivisione di esperienze.

Risultati. Gli studenti hanno rappresentato graficamente sentimenti di paura, tristezza, solitudine e accettazione. La presenza di infermieri esperti ha arricchito l'esperienza, promuovendo il confronto e la crescita personale e professionale. L'esperienza ha creato un ambiente di apprendimento sicuro, stimolando la condivisione e il sostegno reciproco.

I partecipanti hanno espresso soddisfazione per l'approccio utilizzato e hanno suggerito ulteriori attività simili per il futuro.

Discussione. Questa esperienza ha dimostrato l'importanza di affrontare il tema del lutto e della morte nella formazione infermieristica. L'uso del disegno e di altre tecniche non tradizionali ha facilitato l'espressione delle emozioni e ha promosso una maggiore consapevolezza e comprensione da parte degli studenti. È importante integrare queste pratiche educative nei programmi accademici per migliorare la preparazione e la resilienza degli studenti nell'affrontare situazioni di fine vita.

Parole chiave: Studenti di Infermieristica - disegno - riflessione - morte - lutto

Take Home message

- Nursing students often feel anxious and unprepared to deal with death and bereavement.
 - The use of non-traditional techniques, such as drawing and guided visualisation, promote awareness, facilitate sharing and stimulate reflective learning.
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- Integrating innovative practices into academic nursing curricula can help to train more knowledgeable and competent nurses in end-of-life situations.
 - Gli studenti di Infermieristica spesso si sentono ansiosi ed impreparati ad affrontare la morte ed il lutto.
 - L'uso di tecniche non tradizionali, come il disegno e la visualizzazione guidata, promuovono la consapevolezza, facilitano la condivisione e stimolano l'apprendimento riflessivo.
 - Integrare pratiche innovative nei programmi accademici di infermieristica può contribuire a formare infermieri più consapevoli e competenti nelle situazioni di fine vita.
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INTRODUCTION

Nursing students should be encouraged to explore their fears and expectations of caring for a patient at the end of life (Poultney et al., 2014), becoming aware of their own feelings and responses in the face of death so that they can convey care, acceptance and respect (Matzo et al., 2003). Students perceive that caring for dying people and their caregivers can be distressing and stressful and they often feel uncomfortable (Ek et al., 2014; Poultney et al., 2014). In particular, it can be difficult for future nurses to cope with patient distress, communicate with caregivers when death is approaching, as well as perform corpse hygiene (Strang et al., 2014; Edo-Gual et al., 2014). Without preparation, nursing trainees may implement coping strategies to protect themselves emotionally, minimising contact with patients and family members and focusing, for example, only on the physical needs of those they care for (Mallory, 2003; Matzo et al., 2003; Mutto et al., 2010). Lack of preparation about bereavement and death can have a negative impact on the quality of care and the attitude of nurses throughout their professional career (Szczipakowska et al., 2021). Specific university training on the topic is needed (Hench et al., 2017; Szczipakowska et al., 2021) that promotes competence and self-confidence, reduces anxiety, and prevents emotional exhaustion by providing effective coping strategies (Edo-Gual et al., 2014; Matzo et al., 2003; Peters et al., 2013). Wong et al. (2009) suggest that facing the reality of death can act as a stimulus for personal growth, as it allows the person to accept difficult experiences and suffering by giving them meaning, recognising the importance of the

present moment, of being able to let go and accept that some things are beyond our control (Mount et al., 2007).

The frontal lecture is the most widely used methodology for dealing with issues of grief and loss, but on its own it is ineffective in identifying perceptions, fears and problems related to these topics (Matzo et al., 2003). To overcome this limitation, numerous alternative educational experiences have been presented in the literature such as simulation and interprofessional education (Carmack et al., 2018), clinical case studies (Matzo et al., 2003), storytelling (Lillyman et al., 2011; Read and Spall, 2015), reflective journaling (Kennison, 2006), the use of artwork, poems, pictures (Matzo et al., 2003; Stacy et al., 2008), small group post-clinical debriefing and informal support (Poultney et al., 2014).

People often have habitual ways of talking about their problems, experiences, and themselves. Nonverbal communication can help break through these established patterns, encouraging more spontaneity. Furthermore, some distinctions that are communicated nonverbally have never been put into words or are no longer easily expressed through language but can still be observed in nonverbal behaviour (Walker, 2015). Incorporating drawing with adults fosters greater engagement and self-reflection (Cornelius, 2000). Nonverbal expression can reveal topics, emotions, and personal strengths or vulnerabilities that verbal communication might not immediately address (Walker, 2015)

In order to foster an active learning environment that ensures psychological safety and stimulates student participation, Poultney et al. (2014) propose a set of rules that need to be shared with the classroom prior to activities; these include maintaining confidentiality, respecting the opinions of others, and leaving the session if deemed appropriate.

DESCRIPTION OF THE PROJECT

Based on the above theoretical premises, the purpose of the meeting is to allow a free expression of the students' experiences on the topic by stimulating a process of reflection and learning. The learning objectives that guided the construction of this experience, were specifically:

- acquire personal awareness of one's own emotions and thoughts regarding bereavement and death;
- describe the ways of accompanying the dying person and his/her caregivers;
- understand the importance of sharing one's experiences as a tool for personal/professional growth.

METHODS AND TOOL

Organisational aspects

The workshop lasted for four hours; the students (135 First-year nursing students of a University in North-eastern Italy) were divided into groups of 25 participants led by at least one experienced academic tutor and some clinical nurses for support and supervision. A room was chosen with tables and chairs along the walls and chairs arranged in a circle in the centre.

Articulation of experience

In order to create an atmosphere favourable to the exchange of opinions and safe from a psychological point of view, the presenter clarified the objectives of the meeting to the participants and draws up a 'classroom pact' containing rules of participation such as respect for the opinion of others, self-respect, freedom of expression, listening and confidentiality. After recalling that, the following exercise was proposed to bring the students closer to their feeling, moving them away from the logical-rational plane for a moment. The presenter asked the participants to rest their backs on the chair, feet well on the floor, hands in the middle of the chest and close their eyes. With relaxing music in the background, three cycles of deep breathing were proposed, at the end of which the following question was asked: "What moves inside you when you hear the word death? What feelings and emotions do you feel come to the surface? Which colour would you choose to represent them?". Participants were given time to get in touch with their feelings. The exercise ended with three more cycles of deep breathing and slowly opening the eyes again. Next, the following suggestion was proposed by the presenter: "Who would like to share with others the colour they have visualised and/or what they have felt? Try not to judge yourself on what you feel: only by welcoming the slightly uncomfortable, sometimes vulnerable parts will we be able to do the same with others". Starting from the sharing of the students' emotions, the diversity and subjectivity of feeling were emphasised, and how this can change with time and experiences.

From this exploration of their inner experiences, students were made aware that dying people and their caregivers can also manifest different kinds of emotions. Students were asked:

1 - "What reactions and emotions did you observe in the traineeship of the dying person?"

2 - "What reactions and emotions have you observed in the traineeship in the family members and caregivers at the end of life?"

In the first step, students' experiences were collected and summarised in a table. Taking their experiences as a starting point, the most functional behaviours to assist people in different situations were reconstructed: "e.g. What to do when faced with a patient in the denial phase? How to behave when faced with a family member crying?"

Handing out blank sheets of paper and providing coloured markers, the students were then asked to: "Try to be in touch with what you feel inside as we talk about death and bereavement and try to represent what you feel on a piece of paper by means of a picture or symbol. To do this exercise you can stand anywhere you like in this room".

After drawing, participants were asked to talk about their representations, encouraging a free exchange of ideas. Sharing this kind of experience with others was considered very helpful. From this reflection, students were asked to recount what strategies they have implemented or have seen implemented by professionals when faced with bereavement events. The aim of this exercise was to collect and fix on the blackboard which strategies can promote the mental and psychological well-being of students and nurses during their own journey.

At the end of the meeting the key concepts of the workshop were briefly recalled, actively involving the participants who were asked to report the most significant learnings from the proposed activity. At the end of the summary, participants were able to express their impressions/suggestions regarding the experience they have just had.

RESULTS AND DISCUSSION

After giving the participants time to create their own drawing, they were asked to show their creation to the others, and to provide, if they felt like it, a brief explanation of what they had produced. The vast majority of students shared their thoughts with others. The meeting was also open to expert nurses working in different clinical contexts, who willingly accepted to carry out this activity themselves and to express their vision. The presence of expert nurses was an added value, as confirmed by the anonymous comment reported by some students at the bottom of the satisfaction questionnaire: "The involvement of an expert nurse who shared her experiences and fears offered us a different point of view and a great point of reflection on certain topics"/I found valuable to see that even the tutors, who have much more experience than us, were moved listening to our stories".

Each group showed its own peculiarities, but generally it was possible to observe a climate of great respect for altruistic experiences, empathy, support, active listening, and sometimes a certain "emotional contagion".

By analysing the drawings made by the students, and their explanations to their peers, it was possible to collect different meanings concerning the experience of mourning and death. Most of the participants elicited emotions and feelings of unease, grief and uncertainty. Primarily, there emerged representations of death as an event that generated fear, terror, anguish, anxiety and disquiet (conveyed through images such as chasms, thunderstorms, cages, black holes) but also grief and sadness (represented by tears, broken hearts, wounds), restlessness, loneliness. Many students used images and words that evoked the "emptiness" (through drawings of empty rooms or beds, holes in the heart and also by leaving the paper blank) and "chaos" (e.g. a tangle) generated by a loss; they also named other negative aspects such as a sense of powerlessness, uncertainty, injustice, remorse and regret. This kind of representation was contrasted with drawings that depict mourning events as something natural, the end of an inevitable and expected journey/passage (many students used flowers or drew lines/roads and doors to express this concept). Although in the minority, some participants depict death as an event that aroused in them serenity/feelings of lightness (represented by a water kite in flight, stars, sea), freedom/liberation/end of suffering (expressed through butterfly, birds, balloons), acceptance. Two other recurring themes appeared to be the dimension of time and memories. Different meanings and personal stories also emerged from the stories and drawings. A student spoke about her experience of difficulty in dealing with this event, and how she managed to process the pain and confusion associated with it only with the help from a professional, sending a strong and clear message to their classmates: "Do like me, find the strength to ask for help... no matter how difficult it is, there is always a way out". Other expressed metaphors, ideas or maxims that really struck those present (e.g. "One day we will all meet" - "Love cannot be a prisoner of death" - "Dying we return to being part of the noise of the Universe").

In only one case "indifference" was mentioned, and two cases were reported in which the students were unable to perform the task and tore up the paper they had been given. Finally, in three cases, some concepts were expressed that recall childhood stories: angels and stars were used to talk about deceased people, recalling how this type of images/constructs were still current and of psychological comfort/support.

At the end of the experience, an anonymous satisfaction questionnaire was administered to which 59 students out of 125 responded. Ninety percent (59% "very" and 31% "fairly") of the respondents believed that the use of drawing was favourable to the comparison and exchange of experiences and 88% considered it favourable to the involvement of participants (61% "very" and 27% "fairly"): "I believe that drawing and choosing an image were useful because they allowed us to expose ourselves more easily".

To the question: "What aspects of this meeting were most useful or valuable to you?" students answered that they appreciated the involvement and the opportunity to listen, discuss and share different thoughts and experiences. This sharing, which some students defined as "transparent" and "honest", allowed some to "feel that I am not the only one with doubts and insecurities", that "we are all in the same boat" and that "we will improve together along this journey" or to: "understand that we are all human, despite the experience, despite the passage of time" but at the same time also "to understand, listening to the experiences of others, that all people experience bereavement differently".

Some participants highlighted the climate of psychological safety that we tried to maintain: "I felt support", "I appreciated being able to feel safe and open up/Opening up about a difficult topic to deal with", "I liked the fact that there is no 'right' or 'wrong', and that the meetings focus on comparisons between experiences".

Some students underlined other practical implications such as: "the workshop helped me to relate to death in a different way", "to understand how to approach family members", "it allowed me to stop to reflect and look inside myself" or explicitly cited drawing, initial breathing and visualisation exercises, and role playing as significant for this experience and learning.

To the final question: "How would you improve this activity?" some participants finally responded: "I would like to do it before the internship", "I would like to have more meetings like this", "I would add more group games".

CONCLUSION

The project demonstrated the importance of addressing the issue of bereavement and death in the education of nursing students, highlighting how the use of unconventional techniques, such as drawing and guided visualisation, can facilitate the expression and processing of emotions. The experience enabled the students to develop a greater awareness of themselves and their emotional reactions, fostering empathy and

understanding towards patients and their families. The active participation of the students and the involvement of experienced nurses created a collaborative and safe learning environment that stimulated dialogue and mutual support. The results obtained suggest the need to integrate these educational practices into academic curricula to improve students' preparedness in dealing with death and bereavement. Continuing with meetings of this kind could help to train more competent and sensitive nurses capable of providing high quality care even in the most difficult times.

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