







Communicating difficult news in primary health care: Nursing students' perceptions

Comunicação de notícias difíceis na atenção básica à saúde: percepção dos estudantes de enfermagem

Comunicación de noticias difíciles en la atención de salud básica: percepción de estudiantes de enfermería

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ABSTRACT

Objective: to learn Nursing students' perceptions as regards communicating difficult news in Primary Health Care, as experienced during the training period. **Method:** in this qualitative, descriptive study, the participants were 12 Nursing students from a public university in southern Brazil. Data were collected in June 2019, using the focus group technique, and submitted to discursive textual analysis. **Results:** two categories emerged: "students' perception of difficult news in Primary Health Care" and "Nursing training to communicate difficult news". **Conclusion:** the students were found to suffer from weaknesses in communicating difficult news in Primary Health Care during the training period. Training institutions have a long way to go to fill this gap by adopting strategies to strengthen the process of communicating difficult news in both theory and practice.

Descriptors: Nursing; Primary Health Care; Health Communication; Students.

RESUMO

Objetivo: conhecer a percepção dos estudantes de enfermagem acerca da comunicação de notícias difíceis na Atenção Básica à Saúde mediante suas vivências no período de formação. **Método:** estudo descritivo com abordagem qualitativa no qual participaram 12 estudantes de enfermagem de uma universidade pública do sul do Brasil. Os dados foram coletados em junho de 2019, a partir da técnica de grupo focal e submetidos à análise textual discursiva. **Resultados:** emergiram duas categorias: "percepção dos estudantes acerca das notícias difíceis na Atenção Básica à Saúde" e "formação em enfermagem para comunicação de notícias difíceis". **Conclusão:** percebe-se que os estudantes possuem fragilidades em comunicar notícias difíceis na atenção básica à saúde durante o período de formação. Para que seja possível preencher essa lacuna, as instituições formadoras têm um grande caminho a percorrer, adotando estratégias para o fortalecimento do processo de comunicação de notícias difíceis tanto na teoria quanto na prática.

Descritores: Enfermagem; Atenção Primária à Saúde; Comunicação em Saúde; Estudantes.

RESUMEN

Objetivo: conocer la percepción de los estudiantes de enfermería sobre la comunicación de noticias difíciles en la Atención Primaria de Salud a través de sus experiencias durante el período de formación. **Método:** estudio descriptivo con enfoque cualitativo en el que participaron 12 estudiantes de enfermería de una universidad pública del sur de Brasil. Los datos fueron recolectados en junio de 2019, con base en la técnica del grupo focal y sometidos al Análisis Textual Discursivo. **Resultados:** surgieron dos categorías: "percepción de los estudiantes sobre las noticias difíciles en Atención Primaria de Salud" y "capacitación en enfermería para comunicar noticias difíciles". **Conclusión:** se observa que los estudiantes tienen debilidades para comunicar noticias difíciles en la atención primaria de salud durante el período de formación. Para poder llenar este vacío, las instituciones a cargo de la capacitación tienen un largo camino por recorrer, adoptando estrategias para fortalecer el proceso de comunicación de noticias difíciles, tanto en la teoría como en la práctica.

Descriptores: Enfermería; Atención Primaria de Salud; Comunicación en Salud; Estudiantes.

INTRODUCTION

Health care communication in Primary Care is an indispensable and essential resource in human relations, whether with the team or with users and family members since, in addition to being essential for effective and quality care, it is closely linked to the humanization process^{1,2}.

In Primary Health Care, it is noticed that situations requiring communication of hard news to the users are verified; however, they are often not recognized as part of a process of communicating bad news. These are directly related to the procedures performed by the Nursing team, such as in the performance of rapid tests (HIV, Syphilis, and Hepatitis); in pregnancy diagnosis; in Nursing consultations (cytopathology collection); or in the monitoring of chronically-ill patients, which turns them into a potential problem both for those who convey the message and for those who receive it.

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Hard news is characterized as drastically and negatively changing the patient's view of the present/future. They are generally related to situations that pose a threat to life or to personal or family and social well-being, in addition to the physical and psychosocial consequences that they can cause to people³. Being involved in the process of communicating hard news is a complex task that requires knowledge and skill, as well-executed communication may bring benefits to the users, helping them to bear the consequences of the news, just as ineffective communication can have drastic and long-lasting effects⁴; therefore, it is important that communication of hard news be improved by the professionals conveying the information and understood by the individual who is to receive the news, in a way that makes them clearly understand the severity.

Given the above, the objective of the study was to know the perception of Nursing students about the communication of hard news in Primary Health Care through their experiences in the training period. The research problem was configured as the lack of knowledge about the perception of Nursing students in their academic experiences and mandatory internships, on how to deal with the communication of hard news in Primary Health Care.

Based on the scientific production, this research was justified by the following points: the relevance of the academic discussion about how to face the situation of communicating hard news to the users in Primary Health Care; the scarcity of scientific production on the subject matter⁴; and the need to produce knowledge that contributes to the daily practice of future professionals, as the theme is not present in most curricula of undergraduate health courses.

METHOD

This is a descriptive study with a qualitative approach. The study participants were 12 undergraduate Nursing students attending from the seventh to the tenth semester in a Federal University of southern Brazil. The choice of the participants was justified due to the fact that they are attending the practical activities in the Primary Care network. For selection of the participants, snowball non-probability sampling⁵ was used, where the first selected participant, previously chosen by the researcher, indicated the next and so on consecutively, until reaching a total of 12 students. The first participant was chosen because he was recognized as a student who had previously expressed the importance of the theme, in addition to having recognized his limitations during the practical activities during the undergraduate course.

The inclusion criteria were as follows: being a student regularly enrolled in the undergraduate Nursing course, study locus; attending practical academic subjects in the primary network; agreeing to participate in the focus group after the researcher had explained how the meetings would take place; and having already had experience in communicating hard news in Primary Care. The exclusion criteria were the following: students who were not attending the semesters indicated and who reported not having experienced situations of communicating hard news during the practical activities in primary health care.

The research was initiated after being approved by the local Ethics Committee under opinion No. 118/2019. All the precepts in relation to ethics in research with human beings were respected. Anonymity was guaranteed by coding the participants with the letter "E" followed by an Arabic number, in ascending order, corresponding to the order of the participants' speeches during the focus group, "E1, E2..." until reaching the total number of participants.

Data collection took place in June 2019, through the Focus Group (FG) technique, which promotes broad and horizontal problematization of the theme⁶. Three meetings were held, all of which were attended by the 12 students. Each meeting lasted a maximum of one hour and a half and was coordinated by the moderator and monitored by an observer.

The moderator encouraged answers with open and closed questions until the theme was fully covered, and the observer took notes about which participant was speaking, noticing emotions, frustrations, and weaknesses. The meeting was recorded in an electronic audio device for possible transcription of the speeches, with the consent of all the study participants. The meetings had intervals of one week.

In the first meeting, the moderator and observer introduced themselves briefly, remembering and explaining how the meetings would be developed and the objectives of the focus group. Thereafter, an expository introduction of the topic was conducted and, afterwards, the video entitled "*Empathy – Cleveland Clinic*" was presented to observe the participants' understanding, knowledge and attitudes in relation to the topic.

Immediately after that, they were handed in blank sheets of paper with the "Hard News" expression, in which the participants reported all their feeling in relation to the theme and to the video. Finally, the students were asked to verbalize these feelings to help the interaction, thus encouraging dialog and discussion among the group, generating saturation of the subject matter by addressing each of the words and feelings described by the participants. Saturation was reached when the study participants became repetitive.

The second meeting started with the presentation of the videos entitled “50/50: Diagnosis” and “Communicating hard news”, which showed situations of communicating hard news, in order to foster discussions based on what was seen and to propose that the participants think and reflect about the professional's posture and the main challenges facing the nurse's participation in the communication of hard news in Primary Health Care. Afterwards, the theme addressed was discussed until saturation of the speeches.

In the third and last meeting, a synthesis of the second meeting was presented, in order to recall the discussions raised. In this way, the objective proposed was for the group to discuss and present different and diverse ways of how to communicate hard news to the users and how to make them understand what was being said. Thus, to develop and aim at new strategies that facilitate and make this communication effective since the academic training period, to address the theme in the professional practice. Consequently, the meeting went on until data saturation was reached according to the first two meetings.

After the end of the last meeting, the participants concluded with a feedback session about the meetings where they showed that the theme is extremely important since, in the undergraduate course, they do not have academic disciplines that are able to deal with the communication of hard news.

The FG content was transcribed and submitted to Textual Discourse Analysis, which is based on four elements, namely: unitization, categorization, capturing the emerging new, and self-organized process. The first element was the deconstruction of the texts, aiming to evaluate the materials in their details, in order to elaborate a more complete meaning and to perceive different meanings of the text itself. The second element, categorization, was responsible for uniting the parts that were initially constructed and lead to the grouping of elements with similar meanings. In addition to that, it sought to assign a name and define the categories obtained⁷.

The third element, capturing of the emerging new, sought to describe and interpret the common meanings of what was produced throughout the research and made it understandable to the readers. From these three elements mentioned, it was possible to reach the fourth and last element, which is called self-organized process, as this was able to create and recreate a new understanding of the research after the disarray that was made throughout the process⁷.

RESULTS

In relation to the characteristics of the 12 participants from the undergraduate Nursing course, one was male and eleven were female. Of these, six students attended the seventh semester, two were in the eighth semester, one in the ninth and three in the tenth semester. Regarding age, a simple arithmetical mean of 25 years old was obtained. Most of the students were single and had no children.

The results of this study were organized by means of two categories, namely: students' perception of hard news in Primary Health Care; and Nursing training for the communication of hard news.

Students' perception about hard news in Primary Health Care

It was possible to observe that Nursing students recognize a remarkable difference in the content of communicating hard news when compared to primary care network and hospital settings, reporting the most recurrent news in the Primary Care setting. When asked to reflect on the term “hard news”, the Nursing students reported that the term reminds them of more severe cases, possibly involving the possibility of death associated more with the hospital environment than with the primary care network.

[...] In the hospital, news seems to be heavier. I believe that it depends on the pathologies, because in the primary network we work with different pathologies. (E6)

[...] In Primary Care we're not going to see as many deaths as in the hospital environment, perhaps for us it's more tiring to deal emotionally with the news we must give to the patients due to the issue of bonding and knowing the history of that person, that family, and that ends with the psychological. (E2)

In Primary Health Care, the hard news that arise is related to the procedures performed by Nursing, such as rapid tests and Nursing consultations.

Now in the first internship in the primary network I had the opportunity to communicate hard news, such as HIV, syphilis, and pregnancy. And hard news, like HPV NIC II, III is also difficult to give, because the pap smear is done and the results are given by the nurses. (E5)

The biggest difficulty was dealing with the patient's psychological side when she was told that she was pregnant, such crying and despair was not expected. (E1)

The students have the perception that the news communicated by the physicians to the users is only conveyed, that is, they do not offer care continuity with explanations, leaving this attribution to the nurses. With this, they visualize that the person who provides support to the user after hard news is the nurse.

[...] They present the news and leave, and the ones who end up having to embrace the cause is the Nursing team. How many times, in a single appointment the patients leave the office without having understood a single word of what the doctor said? And who are they going to ask? The nurse. (E6)

[...] So, the Nursing team are the ones who have to deal with the aftermath of the bad news, because when the patients need information, when there is any problem with the exam, they'll always come to us [...]. (E1)

In the students' view, some health care professionals are faced with the act of postponing communications to the user and family member, trying to avoid such a situation. In Primary Health Care this can happen due to the bond and trust that is established with the user/family, so the professionals can be apprehensive of destructuring this relationship with hard news.

[...] It's so difficult for future nurses to communicate hard news, because it's not in our code of ethics, theoretically it's not our obligation. (E4)

For example, I work in the unit and I have several friends there, and it seems that the closer you get with the person, the more difficult it is to communicate hard news, perhaps a multiprofessional team would be necessary to give support. (E6)

Nursing training for the communication of hard news

This category lists the aspects indicated by the students in relation to how the theme of communicating hard news is explored during undergraduation, which points to important weaknesses, such as: lack of approach in undergraduate training; deficient workload, and lack of curriculum structure in the communication process. According to the Nursing students' point of view, the lack of approach during undergraduate training was highlighted as a negative factor, since it may occur because the activities developed by the Nursing course have a greater emphasis on the hospital environment, which ends up weakening the students' performance in the context of Primary Health Care.

[...] I was noticing several situations along undergraduate training that I ended up providing or participating in hard news without realizing it, without having time to have a reaction, because it is really something that is not addressed during undergraduate training. (E7)

Undergraduate training is hospital-based; it doesn't prepare the students for the primary care network. The undergraduate course trains you for the hospital environment [...]. (E8)

I've never been in such a situation in the primary care network, I believe greater structure is needed than if it was in the hospital environment. (E3)

Weaknesses were also evidenced regarding the deficient hour load and lack of curriculum structure, as the students believe that the time proposed for the performance of mandatory practical activities in Primary Health Care is much less than that spent on hospital practical activities, making it difficult to experience the recurrent situations in Primary Health Care.

We only enter a health unit in the seventh semester. I think that is the greatest failure. It's hard to learn how to give hard news if the student is not living it or has never experienced it. (E11)

From the beginning of the undergraduate course we face all sorts of problems, the lack of curriculum structure is the main one in relation to this subject matter. (E1)

The hour load in the primary care network is much reduced, this issue needs to be reviewed by the course coordination and direction, to better consolidate our training. (E4)

DISCUSSION

It was possible to perceive that the Nursing students associate hard news to more severe cases, involving the possibility of death more associated to the hospital environment than to the primary network. Such a finding corroborates with the studies^{8,9} conducted with health professionals in a neonatal and pediatric intensive care unit which found that the main meaning associated with the concept of "bad health news" is death.

Starting from the assumption that it is the physicians' duty to reveal hard news, it is emphasized that nurses play an important role in providing news to users and family members, in such a way that communication skills are necessary knowledge to be acquired in the training of these professionals^{10,11}. Nurses are essential in the process of communicating hard news, as they help the user understand and bear the information they received¹². In addition to that, they have the responsibility to follow-up and support the user after the communication of hard news, which can be justified by being the professionals who are in daily and direct contact with users and family members, because they are those who provide and plan care¹⁰.

According to the students' perception, some health professionals are faced with the act of postponing communications to the user and family member, trying to avoid such a situation. In the context of Primary Health Care, this situation can be even more sensitive, since there is a relationship based on the bond that can be broken when faced with hard news¹³. Bonding is an indispensable element for the consolidation of relations in Primary Health Care; it is considered a therapeutic resource and a primordial tool for the functioning of Primary Health Care, since it mediates communication between professionals and users, materializing the establishment of a solid relation between them^{12,14}.

Based on the aforementioned, the acrostic *NURSE* can be mentioned; this mnemonic helps professionals to recognize different patients' emotions for better care, such as: recognizing emotional situations through verbal and non-verbal signals emitted by the patient, trying to understand, being empathic in front of the situations in which the patients find themselves, respecting and not judging the emotional manifestations, instigating and supporting patients to talk and leaving them at ease to express themselves in the way they feel appropriate at the moment they experience difficult situations¹⁵.

Another important point about the topic concerns the Spikes protocol, worldwide known and recommended to be used by the professionals for the instrument to help deal with the emotional content and communication of bad news. The Spikes protocol is comprised of six steps to give hard news to the user, namely: planning the interview carefully, assessing their understanding and comprehension, obtaining and respecting the patient's acceptance or not of the invitation to discuss the situation, providing knowledge and information to the patient making sure that they understand the course of the conversation, paying attention to the emotions conveyed and addressing them with empathy and, finally, devising strategies for dealing with the communication of bad news^{15,16,17}.

Thus, the lack of approach in undergraduate training was perceived by the students as a limiting factor in communicating hard news. A study⁸ that researched training focused on the practice of communicating hard news verified that there are gaps in undergraduate studies and that these range from total lack of academic preparation to address the situation to poorly established initial training in the course flow, which does not qualify the future professional to communicate hard news with quality for themselves and users^{18,19}.

It is pondered that, in Brazil, there is a possible weakness in the training of health professionals regarding the issues of death and dying. To solve it, it is necessary that the theme be incorporated in teaching institutions, as well as in continuing education programs to adequately instruct the professionals as for the situations concerning death and hard news². Incorporating the theme in undergraduate curricula can positively influence the attitude of future professionals, enhancing communication skills and reducing harmful factors¹¹.

This incorporation can be implemented through the inclusion of mandatory academic subjects, which contemplate the communication of hard news, in the curricula of undergraduate Nursing courses, as well as increasing the hour load of practical activities in Primary Health Care, exercising initiative about communication between professional and patient, aiming to enable the students to experience the most recurrent situations in this health care level.

In this sense, it is imperative to open new spaces and implement educational strategies for future Nursing professionals to reflect on this complex issue, because the current scenario on the process of communicating hard news reveals a long way to go for educational institutions to ensure the recognition and relevance of the topic¹¹. The students identified weaknesses in the deficient hour load and lack of curriculum structure in relation to the activities developed in Primary Health Care, which ends up causing a deficit in academic training. They also do not always feel prepared to face this type of situation, which further highlights the need to improve the process of communicating bad news²⁰.

Study limitations

The study had the limitations of a specific population, and it is suggested that further studies be carried out to deepen the knowledge about the communication of hard news in the Primary Health Care setting, as well as the exploration and implementation of new strategies for the development of the theme during the training period, with a focus on Primary Health Care.

CONCLUSION

In view of the findings of this study, it is inferred that, even though communication is considered an indispensable tool for human relationships and is part of the daily practice of nurses in Primary Health Care, it is still poorly visualized regarding communication of hard news. For the students, the training institutions need to advance in the matter of

communicating hard news in Primary Health Care, which is evidenced when they report that the term “hard news” reminds them of more severe cases, possibly involving the possibility of death associated more with the hospital environment than with the primary care network, which can be explained by training focused on the hospital environment.

In addition to that, they understand that they postpone communication with the users, mainly because of lack of preparation. Lack of preparation is closely related to the lack of approach in the undergraduate course, which hinders recognition and performance by the professionals, thus presenting weaknesses in the undergraduate Nursing course curriculum and in their professional development.

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