Addressing the Great Taboo
(Conversations about death and dying)
St. Andrew’s Hospice & NHS Lanarkshire Palliative Care MCN
George Beuken & Helen Alexander

Background
Living and Dying Well (2008) noted that there was cultural resistance to the reality of death and dying as inevitable and integral parts of life and reluctance to discuss these. Part of Lanarkshire’s response has been to develop a new programme to encourage greater openness about our own mortality and the effect that poor communication can have on care planning and quality of life.

Method
A short session was designed to address the taboo of talking about death, dying and bereavement. Although it had not been tried before and there were concerns that some participants may be distressed by the content, the observation results show that this was not a big problem. Participant responses during the session showed that the audience knew quite a lot about the topic. This is helpful for the programme as it means the session was designed as a structured conversation to encourage people to discuss the subject more openly, some mentioned that they planned some actions as a result of attending e.g. making a will or discussing their own funeral wishes with their family. Some degree of discomfort was expected, however, the session appeared to have been very positively received by most participants. Feedback from the end of the session showed that most people found the session very interesting, although others have mixed reactions, saying it was also challenging. There was a small level of not unexpected upset, and a strong desire to learn more.

Results
Following a successful pilot with 36 participants in a Care Home and 21 in a Community Hospital, NHS Lanarkshire funded roll-out of the programme to as many of its staff as were able to attend. The programme is designed as a small, short session about death, dying and bereavement that can be delivered to a variety of staff groups, that it did not create any great level of distress, and that there was a lot of interest in further training. The programme continues to be available to any interested groups in Lanarkshire.

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Conclusion
Overall the evaluation has shown that this structured conversation session has been successful in engaging with participants across care and student staff groups, that it did not create any great level of distress, and that there was a lot of interest in further training. The programme continues to be available to any interested groups in Lanarkshire.

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