

Death-dying interface and training for nursing care*Interfaz muerte-morir y formación para el cuidado de enfermería*

Interface morte-morrer e a formação para a assistência em enfermagem

Abstract

The aim was to know the ways of approaching death and dying in the teaching-learning process of the undergraduate Nursing course at a Federal University in the South of Brazil. Descriptive-exploratory qualitative research, carried out between 2018 and 2019 through self-administered semi-structured interviews with 133 undergraduates and coordinators of the phases of the nursing course at a University of Florianópolis, Santa Catarina, Brazil. It also collects from documental sources, the Political-Pedagogical Project, the menus and teaching plans of the compulsory and optional subjects of the curriculum. Data analysis followed Bardin's Content Analysis and discussion based on vulnerability concepts. From the content analysis carried out, the theme makes up 7 of the 44 curricular subjects offered. The interviews show the ways of approaching the theme and the vulnerabilities in the training of nurses. Methodologies centered on seminars, video classes, conversation circles, expository-dialogued classes and lectures. Two categories emerged from the analysis: Documentary curricular identity of death and dying; Death and dying: effectiveness and vulnerability in nursing education. The research evidences the fragility in the ways and forms of approaching the theme and the dichotomy between the undergraduate students' and the professors' view, creating vulnerabilities to the practice and professional nursing care.

Descriptors: Nursing; Academic Education; Death and Dying, Vulnerability.

Resumen

El objetivo fue conocer las formas de abordar la muerte y el morir en el proceso de enseñanza-aprendizaje del curso de graduación en Enfermería de una Universidad Federal del Sur de Brasil. Investigación cualitativa descriptiva-exploratoria, realizada entre 2018 y 2019 a través de entrevistas semiestructuradas autoadministradas con 133 estudiantes de grado y coordinadores de las fases del curso de enfermería en una Universidad de Florianópolis, Santa Catarina, Brasil. También recoge de fuentes documentales, el Proyecto Político-Pedagógico, los menús y planes docentes de las asignaturas obligatorias y optativas del plan de estudios. El análisis de datos siguió el análisis de contenido de Bardin y la discusión basada en conceptos de vulnerabilidad. Del análisis de contenido realizado, la temática conforma 7 de las 44 materias curriculares ofertadas. Las entrevistas muestran las formas de abordar el tema y las vulnerabilidades en la formación de enfermeros. Metodologías centradas en seminarios, videoclases, ruedas de conversación, clases expositivas-dialogadas y conferencias. Del análisis surgieron dos categorías: Identidad curricular documental de la muerte y el morir; Muerte y morir: efectividad y vulnerabilidad en la educación de enfermería. La investigación evidencia la fragilidad en los modos y formas de abordar el tema y la dicotomía entre la mirada de los estudiantes de graduación y de los profesores, creando vulnerabilidades para la práctica y el cuidado profesional de enfermería.

Descriptorios: Enfermería; Formación académica; Muerte y Morir, Vulnerabilidad.

Resumo

Objetivou-se conhecer os modos de abordagem da morte e do morrer no processo ensino aprendizagem do curso de graduação em Enfermagem de uma Universidade Federal do Sul do Brasil. Pesquisa qualitativa descritivo-exploratória, realizada entre 2018 e 2019 por meio de entrevistas semiestructuradas autoaplicáveis com 133 graduandos e coordenadores das fases do curso de enfermagem de uma Universidade de Florianópolis, Santa Catarina, Brasil. E coleta também em fontes documentais, Projeto Político-Pedagógico, as ementas e planos de ensino das disciplinas obrigatórias e optativas do currículo. A análise dos dados seguiu a Análise de Conteúdo de Bardin e discussão a partir de conceitos de vulnerabilidade. Da análise de conteúdo realizada, a temática compõe 7 das 44 disciplinas curriculares oferecidas. As entrevistas evidenciam os modos de abordagem do tema e, as vulnerabilidades na formação da Enfermeira. Metodologias centradas em seminário, videoaula, roda de conversa, aula expositiva-dialogada e palestra. Emergindo duas categorias da análise: Identidade curricular documental da morte e do morrer; Morte e morrer: efetividade e vulnerabilidade na formação em enfermagem. A pesquisa evidencia a fragilidade nos modos e formas de abordagem do tema e dicotomia entre a visão dos graduandos e dos professores, criando vulnerabilidades à prática e ao cuidado profissional de enfermagem.

Descriptorios: Enfermagem; Formação Acadêmica; Morte e Morrer, Vulnerabilidade.

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Introduction

Nursing, by having care as its object of epistemological study, works directly with people's quality of life. Among the professions in the health area, it is the one with training to accompany the individual through all stages of life. Going through the social determinants of health and the conditions of birth, growth, life, work, aging and death, healthy and unhealthy moments are present.

Despite being considered a taboo for many years, the theme is increasingly emerging as a necessity in the midst of the ascendancy of chronic diseases today. Numerous studies demonstrate the fragility of nurses' preparation to deal with terminality situations. Such fragility that culminates in psychic suffering to these¹.

This fragile aspect has its roots directly in academic training. The education of nurses to deal with death situations generates teams with equal preparation. This is justified by the name of Magali Boemer, the main representative of nursing in research on the subject. Since their article in 1992, Boemer et al.² portray this fragility in student education, referring to the concern of professionals in preparing the Nursing team to experience death situations.

Academic training is dynamic and follows the flow of social transformations. The chronic health condition and the disease process with an outcome by death are material of necessary study, to subjectively and objectively equip health professionals for assistance. In this sense, both the society that is cared for and the health professionals involved show a certain vulnerability. This is because vulnerability presents a conceptual approximation of ethical, political and technical congruence interspersed with risks and the human being's ability to cope. There are groups in society with a greater degree of vulnerability than others, also affected by their perception of the health-disease, disease-death process³.

In order to work on the theme of macro scope, understanding the impacts of training on the professional life of nurses, firstly, it is necessary to understand the context of training of these professionals. The academy is a rich field for the development of critical and scientific thinking, it is in this environment where the first contacts with the terminally ill take place in a care perspective. This is where the emotional and scientific strengthening of the future nurse takes place.

Thus, discussing academic training and, in the midst of it, analyzing education for death and dying in the health-disease itinerary, makes it possible to list resources for the confrontation of the professional nurse, from the perspective of vulnerability, for the individual and collective strengthening of understanding of the death-dying process. Health recognizes macro-social situations and considers individual situations in dealing with vulnerabilizing situations³.

Based on the above, it is necessary to know the context from which nursing education starts. What led to the guiding research question: how is the interface of the process of death and dying in academic training in the Graduation Course of the Federal University of Santa

Methodology

Qualitative research, in the descriptive exploratory modality, based on the national guidelines for nursing education, in Resolution No. 41/2018 which provides for the organization of palliative care in the Unified Health System and the concept of vulnerability observed in public health policies while factors that weaken people in the exercise of citizenship³.

The study subjects were academics from the disciplines arranged in the phases of the Nursing Course at UFSC and professors who coordinate the respective phases. The choice of participation was made randomly and according to the participants' acceptance. The right to secrecy and anonymity was guaranteed in compliance with Resolution No. 466/2012 of the National Health Council. In view of this, the participants were identified through the abbreviations: DOC- Professor Coordinator; DI- Student. Followed by numerical characterization, which indicates the number of participants and the reading order of the self-administered interview instruments (eg DOC1, DOC2, DI1, DI2). The project approved under Opinion no. 2,471,767/2018 of the Research Ethics Committee of the Federal University of Santa Catarina. The study was carried out in 7 phases of the 10 existing in the Undergraduate Nursing Course at a Federal University in the Southern Region of Brazil.

The research took place in the 1st, 2nd, 4th, 5th, 6th, 7th and 9th phases at times and times authorized by the teachers and coordinators of the phases. In the 3rd, 8th and 10th there were no possibilities to carry out data collection with the students, due to the incompatibility of schedules and the distribution of academics in theoretical-practical activities.

Data collection took place in two ways concurrently, through documentary sources and interviews with students and professors coordinating the phases, from May to June 2018, with an average duration of 40 minutes per phase. Documentary sources were the curriculum of the Undergraduate Course in Nursing, the Political-Pedagogical Project and the teaching plans of compulsory and optional subjects to identify teaching strategies and content distribution with a focus on the theme of death and dying. These documents followed the analysis respecting the research in documentary sources of direct origin (direct relationship with the information to be analyzed), quality (source credibility) and intentionality (ideological position)⁴.

This was followed by the documentary search for the statements: palliative care, palliation, terminality, end of life and ethics. Organized and distributed in an excel table to compose the information Discipline, Presentation of the theme in the menu and/or programmatic content, workload of the discipline and order of phases. After approval by the Research Ethics Committee, in February 2018, the modality of collecting information through a semi-structured self-



Bellaguarda MLR, Teixeira GC, Knihs NS, Canever BP, Caravaca-Morera JA results, which is the interpretation of information. In this way, the analysis was based on the thematic presence of words related to the frequency of their appearance. Documentary sources were identified and listed in a table that contains the name of the discipline, presentation of the theme in the menu and/or syllabus and workload of the same for further analysis.

administered instrument to students and professors of the Nursing Course in the disciplines identified with contents and teaching approaches about death and dying. Subsequently, the information was organized in an excel spreadsheet, coded, categorized and analyzed.

Content analysis in semantic approximations was the analytical method of choice, with the organization of information in three phases: the first, called pre-analysis, carried out the reading of the materials and elaboration of the first understanding about these contents for the choice of the document that was analyzed⁵. Following the rules of: completeness (all information regarding the object of study was considered), representativeness (quantity and quality of data sampling), homogeneity (single focus of study) and relevance (refers to the objective of the analysis). Subsequently, in the content coding phase, the information already analyzed was coded and separated into categories and subcategories. The third comprised the Treatment of

Results

From the documentary research, using the descriptors death and dying, palliative care, palliation, terminality, end of life and ethics, it is evident that among the 44 analyzed disciplines, 7 presented the theme in their syllabus (Figure 1). As for the distribution of these, 1 is mandatory for the 1st phase and 2 are mandatory for the 4th phase, 2 are mandatory for the 5th phase, 1 is mandatory for the 6th phase and 1 is a general option for the course. The most prevalent terms were “death” and “palliative care”.

Figure 1. Disciplines and thematic approach to death and dying. Florianópolis, SC, Brazil, 2019. (n=44)

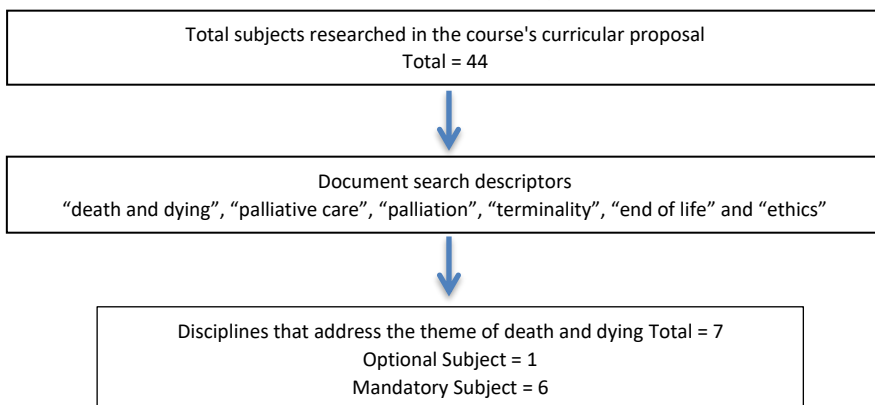


Chart 1. Content Analysis Grid. Florianópolis, SC, Brazil, 2019. (n=44)

Analysis grid	
Registration units	
Teachers	Students
Importance of approaching the theme	Weakness in working through confrontations
	Weakness in approaching the subject
Existence dynamic strategies	Need for more classes and different methodologies
	More time for the development of the theme
Category 1	Category 2
Documentary curricular identity of death and dying	Death and dying: effectiveness and weaknesses in nursing education

Within the limits and possibilities in which this study was applied, 202 students regularly enrolled in the axis

disciplines of the phases, 133 effectively participated in the study, comprising 19 academics from the 2nd phase, 22 from



Bellaguarda MLR, Teixeira GC, Knihs NS, Canever BP, Caravaca-Morera JA emotions, since the presence of this professional in health care is effective and continuous. There is an empathic relationship⁷. In view of that, ethics and bioethics bring references of behaviors and with regard to dilemmas: euthanasia, dysthanasia, orthothanasia and misthanasia, as a general discussion and world trends.

Regarding the practical curricular experience, nursing students face daily care and, in this context, with death and dying abruptly. This is because, they are faced with the experience of a patient dying under their care, dialoguing with the family, developing activities among the multidisciplinary team without, in this context, having been sensitized to this care. What results in a professional practice of nurses, fragile people in the process of death and dying. Weaknesses of sensitive approaches and techniques based on the principles of palliative care. There is tenacity in the discussion and teaching of the theme death and dying, with a view to exercising citizenship. Human dignity is necessary to be maintained, strengthening the principles of social justice. This is because death-dying is understood as the final phase of human existence, but firstly, understood as a process and as such, it shelters life⁸.

The pedagogical project and the distribution of subjects, the list of contents and themes and the strategies and educational references listed guarantee identity to the formation⁹. This brings to light the professional identity that is established between what is documented in specific curricular guidelines of the course and the professionalization of graduated nurses. In this reality, with a focus on care for life, on the death and dying process.

The School under discussion is developed on the theoretical-methodological framework defined by the National Curriculum Guidelines¹⁰, through competences - knowledge, skill and attitude in line with the reality and regional and national health condition. However, professional training aimed at the end of human existence is developed as a competence of technical skills, continuity of practical care. The curriculum presented does not bring a documentary identity referring to the specificity of the death-dying process and care. Research carried out based on a project approved under Opinion No. 2,471,767/2018 of the Research Ethics Committee of the Federal University of Santa Catarina, following Resolution No. 466/12 of the National Health Council.

Death and dying: effectiveness and weaknesses in nursing education

There is a dichotomy between the approach to the subject and how professors perceive the teaching of death and dying in academic training in the phases and disciplines under their responsibilities. The sporadic presentations of the content are understood as given and in which there is student learning. It is a paradox, because professors are also characterized as professionals who have difficulties in approaching issues involving death and dying. And they demonstrate a fragile understanding of this process in questioning students, family and community about palliative care. In this way, they show that, in order to effectively discuss and strengthen the professional future for care at

the 4th phase, 24 from the 5th phase, 25 from the 6th phase, 22 from the 7th stage and 21 from the 9th stage. And, of the 10 coordinators of core disciplines, 7 participated effectively. The responses obtained were organized into analysis grids and the main terms were highlighted, namely: Importance of the topic; Weakness in approaching the subject; need for more classes and different methodologies a longer time for the development of the theme (Chart 1). From the data analysis, the following categories emerged: Documentary curricular identity of death and dying; Death and dying: effectiveness and weaknesses in nursing education.

Discussion

Documentary curricular identity of death and dying

This category emerges from the documental analysis of this study, considering the findings in the teaching plans and menus of the axis disciplines and, organization of the Course contained in the pedagogical project. The documents that make up the organization of nursing courses make up the curricular organization for the development of the body of knowledge that, in accordance with national educational curricular planning and guidelines, underpin the training and profession of nurses⁶.

Moreover, this is a process that happens collectively, where the group evaluates what has been accomplished and brings out propositions for changes. In addition, in this perspective, the strengthening of social justice within public health policies is linked to professional training. Specifically in Nursing, which assists patients and families in primary, secondary and tertiary health care. Moreover, they provide comprehensive care and educational guidance with a focus on improving the life and well-being of the assisted community.

The curriculum of the Nursing Course researched has as its curricular axis the promotion of health in the process of human living - diversity and complementarity of health work scenarios. This axis runs through all the disciplines that involve the Course. They encompass fundamentals of nursing care, clinical and surgical health conditions, urgency and emergency, nursing and health management. In the compulsory and non-compulsory elective subjects, the approach to society and culture is the keynote, respecting the scenarios, the process of human living, vulnerabilities, gender, body and sexuality issues. Death-dying and palliative care are approaches to life experience in nursing care that present weaknesses in the nurse's educational context.

It is observed, in the researched curriculum, an incipient presentation of the theme, since the search terms were not presented in all the disciplines that touch the process of human living. Considering the reduced number of disciplines that present this theme, as well as the axes of clinical, critical and surgical education.

The theme of finitude, in the scope of nursing, is part of theoretical and practical education. The ways of introducing the content and strategies of care and reception to people, families and community to the death is contemplated in a subtle way. The professional nurse establishes bonds and there is a sharing of feelings and



this stage of life, they need more than sporadic conversations or even escape from interaction with the theme. It is a matter of understanding one's own limits in terms of finitude.

The dichotomy effectiveness and perception of death and dying in teaching appears in the indication and specialty to be taught. In the management disciplines, the professors' perception appears to be different from the teaching of nursing and health, when they consider that in management there are no possibilities to discuss the issues of death and dying and palliative care. It is observed, a distancing of Management content from the procedural condition of human finitude. Care management permeates management with an administrative character, as if professionals and patients who experience the process of death and dying were not in the universe of organization, supervision, assistance, economics and the ethics of direct care. Care management is essential, as it concerns communication regarding difficult news, multi-professional integration and care protocols, the legal and legal effects of the process of death and dying, the institution that reflects the physical, material and human structure for the care¹¹. These distances from the area of knowledge in the assistance to the process of death and dying make the attention provided by the nurse and health professional to the patient and family vulnerable to death.

It appears that in the nurse's educational trajectory in view of the effectiveness and perception of the subjects of this study, that only the insertion of a specific discipline on the subject is not enough to train students for this reality of care. It is necessary that the approach of death and palliative therapy intermediate the pedagogical axes of the Undergraduate Course. Now, it is common to be discussed as a topic of ethics and bioethics, and these are scientific topics that necessarily permeate all the contents of training.

There is a dichotomy between effectiveness and how they perceive nursing education with regard to death and dying, from the student and teacher perspectives. This, therefore, portrays itself as a parallel graduate-teacher. The results of this research show that some professors consider the theme death, dying, palliative care and the contents discussed in ethics and bioethics as apprehended by students. What portrays this teaching-learning dichotomy and the effectiveness of technical and scientific learning about the condition of dying. It is noteworthy that the technical approach to the health care process cannot be relegated to the background, but the teaching-learning of death and dying is confronted in the daily work of nurses. It is noteworthy, therefore, that the teacher most often reflects their own fragility in their training. Including to this portrait the imperative relationship between sensitivity and emotion to the use of technology and technique in nursing⁸.

It is considered that there is a fragile education in nursing to face, care for, assist and manage situations of death and dying and in palliative therapy. This brings to the research carried out a dichotomy between technical and theoretical, sensitive and practical, subjective and objective. Thus, it evidences the need for transversality of the theme in the curricula and academic-professional training of nurses

The study converges to the common sense, that the theme has great importance, but it is not sufficiently developed. The method used is portrayed as insufficient to convey the necessary knowledge about the content. The need for practice is also highlighted by the student body, not being preparatory, for the care scenario. The thematic approach is applied in the form of lectures and classroom discussions. The educational activities centered on the theoretical framework, only, present themselves as vulnerability to the professional future. Moreover, in this perspective, vulnerability is centered not on the individual and society in protecting themselves from events that put them in a vulnerable situation, but in the position of applicant for active and influential expressiveness in assistance in the process of death and dying³. It is observed that the effectiveness of the interface with vulnerability is confluence, since the experience of assistance to death is common in the daily practice of nursing care. Therefore,, people are not educated to face adversity, since they have not lived through them. In addition, the stoning of the personality for care, in nursing training, is done in care practice, when academics and teachers are faced with hardships beyond the condition of suffering from the disease, but as a result of the entire context they live and interdependent events and relationships.

Death presents itself as the final event of human existence, in which the development of the Being ceases. In addition, the reactions and experiences in the face of the death-dying process is another event in the life of the one who dies and the lives of those who live in this event in a family, community and professional way¹². In nursing training identified in this study, the students express their particularities, beliefs and customs in the face of end-of-life, illness and death news. And they show that the methodological approach to the theme, in the experience of the fifth curricular phase, brought a practical reality of care in the end-of-life stage. This data is concatenated with the analysis of the teaching plans of the compulsory and optional subjects of the course that do not explicitly bring the theme "death and dying", with the exception of subjects that focus on the fourth and fifth curricular phases.

The literature highlights the need for inclusion in educational practice, for reflective moments and practices that equip students to provide assistance in the reality of illness in the perspective of prognosis of death⁷. Knowledge and support during nursing training from the perspective of losses, which chronic health processes establish, is a factor to be exercised and worked on. The time devoted to the study of the theme of death is linked to emotions and to the particularities of culture and beliefs about finitude. Academics from the initial phases, in which the care practice is not yet installed, bring a more sensitive view, the feelings of the death and dying process. With the evolution of the curricular phases, in which the reality of care is experienced, the weaknesses are presented from a reduced training in this scope, both in content and in the time dedicated to the theme.



Bellaguarda MLR, Teixeira GC, Knih NS, Canever BP, Caravaca-Morera JA of palliative therapy, which is shown in the dying process and results in death, are linked to reduced teaching spaces and simple theoretical approaches focused on general care activities developed by nurses.

The approaches are centered on lectures, seminars and that coping depends on the caregiver's individualities, values and beliefs. The study thus shows that education for the care of death and dying requires active methodologies and coping with the condition of human finitude, which translate needs and actions for resolution in the physical-socio-emotional scope of care in health-disease processes. , death and dying. This refers to teaching-learning methodologies that address this issue in order to bring experiences of reality and positions regarding the care of the person and the family in a terminal condition. The limitations of the study are related to the approach of the students and the access at certain times for data collection, interrupting the dynamics in the classrooms.

From the institutionalization of health as a place to die, health professionals and, in this case, specifically nurses are responsible for welcoming and approaching people in this situation in a sensitive and technically competent manner. All the training of the professional nurse in academic training is centered on life and death as a limit to technical and scientific competence¹³.

The deficiency in the discussion on the subject brings repercussions elucidated by the academics themselves, referring that, in theoretical-practical fields, they do not feel prepared to deal with situations that permeate this subject. As already discussed, the lack of preparation in an academic environment is reflected in inexperienced nurses and nurses who are more susceptible to psychic suffering. Understanding the process of death and dying from an individual perspective and that of others is essential for the exercise of nursing care practice.

Conclusion

In the context studied, the process of death and dying in the academic-professional education of nurses presents an interface that is still fragile in the teaching of health care. The ways of caring in nursing within the scope

Fomentation

Research Registry from a Scholarship of the Institutional Scientific Initiation Program UFSC/CNPQ-2019.

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