Attitudes and Responses to Death Education of a Sample of Primary School Teachers in Belfast

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Given the fact that loss and death education has had a short history in the United Kingdom and death has been looked upon as a taboo subject for so long, one might expect that primary school teachers would wish to avoid teaching about this topic in the classroom, The main aim, therefore, of a study carried out in the city of Belfast was to examine the attitudes and responses to death education of a sample of primary school teachers in the city. The motivation to carry out this investigation stemmed from my experiences as a voluntary counsellor with the voluntary organisation Cruse—Bereavement Care, working with bereaved adults. Many of those I have worked with have shared unresolved pain and grief from their childhood years, simply because they were never given the opportunity to talk about and work through childhood losses.

Twenty-seven primary schools in the city of Belfast were randomly selected from the Belfast Education and Library Board's list of primary schools. These were selected from the North, South, East and West of the city. Attempts were made randomly to select equal numbers of schools from each geographical area. The schools and individuals invited to take part were given a guarantee of anonymity. All teachers, except those of the two youngest classes, were asked to complete a questionnaire. A total of 284 teachers was surveyed; 158 responded, a response of 55.7%. The sample consisted of 44 (27.8%) male and 114 (72.7%) female teachers. It is not surprising to find a much smaller percentage of males in a sample of primary school teachers, given the higher overall ratio of female to male teachers in Belfast city primary schools.

The main aim of the study was to examine the attitudes and the responses of the teachers to death education, but there were also a number of subsidiary aims. These were:

a. To determine whether the teachers surveyed believed they had a part to play in educating about death.
b. To ascertain whether there were any significant differences between attitudes and responses of teachers in the controlled (Protestant) sector as opposed to those in the maintained (Roman Catholic) sector*.
c. To look at school policy on death education and determine whether schools had a defined policy.
d. To ascertain whether teachers' personal awareness or exposure to death had had any effect on how they had viewed death education.
e. To examine some of the comments made by those teachers who completed the questionnaire.

It was anticipated that answers to the following questions would emerge:

1. Do primary school teachers believe that they have a part to play in helping children to develop an understanding of what death actually means?
2. Will the religion of the teachers have played any significant part in determining the teachers' responses?
3. Do schools have a defined policy or not with regard to death education and will this finding be the same in the controlled sector as it is in the maintained sector?
4. Will the geographical location of a school have any effect on school policy? For example, would those schools in 'troubled areas' of the city, such as North Belfast, be more likely to have a defined policy than schools in a 'more peaceful area' of the city, such as East Belfast?
5. Do any of the following factors appear to have influenced how the teachers view death education?
   (i) teaching a bereaved child
   (ii) the death of a pupil
   (iii) a personal bereavement.

The questionnaire devised was divided into three sections:

Section A: requiring factual information

Section B: relating to school policy

Section C: personal experience.

The results revealed a number of findings.

I When teachers were asked whether they believed they had a part to play in helping children to develop an understanding of what death actually means, the vast majority (78.3%) responded that they do believe they have a part to play. No significant differences were found in relation to the sex of the teacher, the number of years of teaching experience or whether the teachers were parents or not. Nor were any statistically significant differences found in religious persuasion, the experience of the death of someone close, or having thought about one's own death.

II The findings suggested that teachers in the maintained sector were more likely to think that religion had influenced their attitude toward death, and they were also more disturbed by the thought of their own death.

III Differences were found in the policy of the school towards including opportunities to discuss loss and death in the classroom. Teachers who held the belief that they do have a part to play in helping children understand what death means tended to be more likely to teach this where

In Northern Ireland the controlled sector (which receives 100% capital funding) is made up primarily of children of the Protestant faith who are taught by teachers of whom the majority are also Protestant. The maintained sector (which receives 85% capital funding) is made up almost exclusively of children of the Roman Catholic faith who are taught by teachers of the Roman Catholic faith.

there were opportunities to do so. Forty-eight (30%) of the total sample surveyed responded that the policy of the school included opportunities to discuss loss and death in the classroom. Thus the vast majority, approximately 70% of the teachers surveyed, teach in schools which do not have a defined policy in this respect and, indeed, guidance is not given to those staff in these schools about how to cope with this issue.

There was no significant difference between the controlled sector and the maintained sector in relation to whether or not schools had a defined policy about death education. Teachers in controlled schools were almost four times more likely to have access to books and resources on death and bereavement in their staff library than teachers in maintained schools. This did not mean, however, that they were any more likely than teachers in maintained schools to make use of books or resources to enable them to help children understand loss and grief.

IV There was an hypothesis that the geographical location would influence some aspects of school policy with regard to the treatment of death and bereavement. (Geographical location refers to whether the teachers surveyed taught in the North, South, East or West of the city. Although the city of Belfast has had a traumatic history during the past 20 years, the North and West of the city have been exposed to more death from violence than the East or South.) This hypothesis was not supported statistically. It would seem that school policy throughout the city has not been influenced differently by the present situation in Belfast.

V A need to educate for loss was demonstrated by the finding that 114 or 72% of the teachers responding were aware of having taught a bereaved child. Of these 114 teachers, 81 or 71% had noticed behavioural changes in the bereaved child. These changes included tiredness, disruptive behaviour, withdrawal and attention seeking. It was also noticed that if a teacher had taught a bereaved child and believed in education about death and loss, there was more likelihood of the teacher being sensitive to uncharacteristic behaviour in that child.

Nineteen teachers had experienced the death of a pupil from their class. They were asked how they had reacted to the death of a pupil, both personally and with the class. They expressed emotions such as anger, sadness and shock and, in the majority of cases, related how they felt ill-equipped to deal with the loss, not only in the classroom but when faced with the parents or siblings of the deceased.

From some of the comments and observations, it can be concluded that teachers are somewhat confused about how to handle the issue of death in schools. The views expressed ranged from 'Death and coping with death is a very personal and private affair' to 'To talk about death in class, if handled with care and tact, is helpful to all.' Overall, the comments and observations suggest that teachers feel inadequately prepared to teach about the subject of death and would welcome information and guidance.

The main limitations of this study were the small size of the sample and the omission of any questions relating to whether or not teachers thought preparation for death education should be included in their initial training or during in-service training. It is impossible to reach any absolute conclusions or to make sweeping generalisations from the study, but if it has achieved anything it has illustrated that primary school teachers in Belfast are inadequately prepared and are lacking in information, guidance and support when it comes to coping with the subject of loss and death in the classroom. It has highlighted the fact that this is an area worthy of research and exploration, not only in the primary sector, but in all levels of education.

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REVIEWS

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HANDING OVER

Barry Mason. D. C. Publishing, 17 Avenue Mansions, Finchley Road, London NW3 7AX. 1989. £6.50.

I liked this approach to 'developing consistency across shifts in residential and health settings'. Mason, a social worker and family therapist, has developed a systems approach which will be of immense help if applied to nursing patients who are seriously and terminally ill in hospitals, hospices and nursing homes. In most nursing handovers, the senior nurse who is going off duty does most of the talking and concentrates on content. The result is frustration, boredom and a feeling of powerlessness in those taking over. Mason proposes that the staff coming on take charge of the handover, not the staff going off, interviewing the retiring staff, and emphasising process and relationships rather than facts, which will anyway be recorded in the notes. He emphasises that the new handover is weighted towards helping people think and then act, rather than telling people what is and what to do. Throughout the book there are numerous examples and exercises and although no formal evaluation has been done of its usefulness, I commend it to those who have been using traditional methods of handover as a way of bringing fresh thinking to bear in the service of patients.

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CARE OF DYING CHILDREN AND THEIR FAMILIES

Guidelines from The British Paediatric Association, King Edward's Hospital Fund for London and the National Association of Health Authorities. Prepared by Rosemary Thornes. 1988. £6 inc. p&p. Birmingham: National Association of Health Authorities. Available from NAHA, Birmingham Research Park, Vincent Drive, Birmingham B15 2SQ.

This brief report is intended to provide guidelines for health authorities in the care of dying children and their families. It could be read with benefit by a wide audience including health care professionals, social workers, voluntary organisations and families themselves. It is clear, concise, comprehensive and remarkably sure-footed.

The report rightly emphasises the needs of the child *within* its family, with the home as the centre of care. The need for families to receive co-ordinated practical, emotional and spiritual support is powerfully illustrated by anecdotal evidence from parents themselves. The development of key workers is seen as vital and the central principle is defined as the right of parents to maintain control.

The first half of the report is a helpful and thorough examination of the care requirements of dying children and their families at various stages from diagnosis to death and afterwards. It is written in checklist style and is full of insight, acute observation and practical suggestions. The rest of the report considers how these requirements can best be met and put into practice. There is frequent criticism of the current system—'one of the greatest weaknesses lies in inadequate communication at every level'—but this is balanced with creative ideas for improvement. An example is the suggestion that a shared-care card, held by parents, should be routinely completed by all community and hospital staff. As a social worker, my only regret is that the report appears to perpetuate a limited and sterotypic view of the social work role as 'a potentially useful source of practical and financial help'.

Overall this is a thorough and useful survey. Those seeking a more detailed expansion of the issues could consult 'Parental Loss of a Child' by Theresa A. Rando, Research Press (reviewed in