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Lived Experiences of Staff Nurses in Handling Palliative Care Patients

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ABSTRACT

This study explored the experiences, emotional challenges, and professional growth of staff nurses in handling palliative care patients in hospital settings. Three major themes emerged: ***Emotional and Psychological Challenges,*** *which highlights nurses' experiences of compassion fatigue, emotional exhaustion, and moral distress when caring for patients facing life-limiting illnesses, as well as their struggle to balance professional responsibilities with personal emotional responses;* ***Meaningful Professional Growth,*** *which discusses how nurses developed deeper empathy, strengthened clinical judgment, and gained a renewed sense of purpose in providing holistic and compassionate care despite the difficult circumstances of end-of-life situations; and* ***Coping Mechanisms and Support Systems****, which emphasizes the role of peer support, spirituality, reflective practice, and family connections in helping nurses manage stress and maintain emotional resilience. The findings provide a comprehensive understanding of the emotional, psychological, and professional dimensions of palliative care nursing, highlighting the importance of institutional support, emotional preparedness, and training in end-of-life care. Despite the challenges associated with caring for terminally ill patients, nurses demonstrated resilience, compassion, and professional dedication as they continued to provide dignified and patient-centered care.*

Keywords: *Palliative care, staff nurses, lived experiences, end-of-life care, nursing resilience*

INTRODUCTION

The field of palliative care is a fundamental aspect of healthcare practice, aimed at improving the quality of life for patients with progressive illnesses by managing pain, providing psychological support, and practicing compassion. Nurses who work in palliative care are often required to handle clinically challenging and emotionally taxing scenarios, in which they must be professionally competent in providing comfort, dignity, and holistic care to patients and their families. In the course of administering palliative care to terminally ill patients, nurses have to face long-term pain in patients, stressful relations with patients' families, emotional burnout, and moral distress, which may affect their emotional status and practice (Ye et al., 2024). These issues suggest the need to consider nurses' perceptions and coping strategies regarding the realities of palliative care in clinical settings (Yoong et al., 2024).

Globally, palliative care has increasingly been acknowledged as one component of the healthcare systems, owing to the increasing population of patients suffering from chronic and terminal illnesses. In several nations, there has been increased emphasis on improving end-of-life care practices and training in nursing institutions. Research carried out in different countries

showed that nursing staff working in palliative care settings experience emotional distress, compassion fatigue, and psychological burden, among other adverse outcomes, owing to frequent interactions with death and suffering (Yoong et al., 2024). Nevertheless, these nurses continue providing compassionate care. In the Philippines, palliative care remains a developing practice due to cultural beliefs, spirituality, and the active involvement of family members in healthcare decision-making. Palliative care nurses in the Philippines face the emotional aspects of caring for their patients at the end of life and addressing their family members' needs (Corpuz, 2024). Growing demand for palliative and end-of-life care in hospitals and healthcare organizations places additional professional and emotional burdens on nurses working in these settings. Despite recognition of the need for palliative care training programs among nursing staff, many nurses still struggle with the emotional aspects of providing palliative care (Soriano et al., 2023).

Statement of the Problem

The purpose of this qualitative phenomenological study, titled "Lived Experiences of Staff Nurses in Caring for Palliative Care Patients," is to explore and understand the personal and professional experiences of staff nurses who provide direct care to patients requiring palliative care.

Central Question: How do staff nurses experience and cope with the challenges of caring for palliative care patients?

Scope and Delimitations

This phenomenological study will conduct an in-depth exploration of the lived experiences of staff nurses caring for patients with life-limiting illnesses. Being a qualitative study, the number of participants is limited to focus on depth rather than generalization. This is further narrowed down by purposive, criterion-based sampling to nurses who have already provided direct palliative care, hence limiting the diversity of perspectives represented. The time constraints may affect data collection and analysis, since interviews must be scheduled around nurses' clinical responsibilities and work shifts. The emotional sensitivity of the care might also affect participants' willingness to disclose deeply personal experiences related to death, suffering, or ethical dilemmas.

Review of Related Literatures

Palliative care is one of the core domains of professional nursing practice, placing nurses as constant companions to patients and their families during life-limiting illness. Nursing care in a palliative setting is continuous, relational, and deeply human, unlike episodic medical interventions. Consequently, nurses have responsibilities not only in managing pain and symptoms but also in protecting dignity, alleviating emotional suffering, and caring for families experiencing anticipatory grief and bereavement (World Health Organization, 2023). These place the nurse at the emotional epicenter of end-of-life care and make palliative nursing uniquely demanding compared to any other clinical area of practice

Theoretical Framework

Jean Watson's Theory of Human Caring served as the theoretical basis for this research, providing a framework to examine the phenomenon under consideration by examining the experiences of nursing professionals working with terminally ill individuals in the context of palliative nursing care. The theory explained how nurses express their emotions and display empathy when working with dying patients, demonstrating that even under difficult psychological conditions, nurses can remain concerned for their patients. The theory also enabled the study of how nurses found meaning in their work, developed coping strategies, and remained committed professionals despite the emotional challenges of their daily routines.

Conceptual Framework

The Conceptual framework upon which the research was based was Jean Watson's Theory of Human Caring. This is because, according to this theory, caring for someone goes beyond giving them medication and providing physical care. It includes offering emotional, psychological, and even spiritual support. The nurses provide holistic care and support people in pain or at the end of life. The nursing process involves building caring, healing relationships with clients through humanistic approaches, respecting, honoring, and connecting with them with presence and compassion. According to Watson's Theory of Human Caring, caring is what nursing practice revolves around. Both the patient and the nurse will gain personally and emotionally from the caring relationship.

METHODOLOGY

The qualitative research design will be used in this study. In essence, qualitative research design focuses on investigating the meanings that participants attach to their lived experiences. Qualitative research design focuses more on describing experiences in rich detail than on measuring them numerically. According to Polit & Beck (2021), this research design is appropriate for investigating complex human emotions, psychology, and experiences that cannot be measured numerically but can only be explored through participants' stories.

Research Design

A descriptive phenomenological approach is relevant to this research design, as it enables detailed analysis of the lived experiences of staff nurses providing palliative care. Palliative care entails working through highly emotional, ethical, and psychological experiences, and to understand them, it is important that they be described as lived by those who go through them. This will provide an opportunity for the researcher to accurately understand the nurses' experiences as they are lived.

Research Steps

The researcher will adopt purposive sampling to select subjects for this study, a non-probability sampling technique in which subjects are chosen based on characteristics and experiences that align with the study's purpose. Since this study is a qualitative study, purposive sampling is appropriate, as it allows the researcher to select participants with firsthand experience of the phenomenon under study and whose experiences offer valuable information.

To accomplish this aim, the researcher will adopt criterion-based purposive sampling, ensuring that the sample of staff nurses comprises only those with firsthand experience caring for terminally ill patients. The second form of purposive sampling to be used in the study will be the maximum variation sampling method to ensure a wide range of variation among the staff nurses participating in this study.

Data Collection and Sample Selection

The research process will start by presenting the research proposal to the research advisor and panel members for their consideration and endorsement. Once the proposal is endorsed, ethical approval will be sought from the Ethics Review Board (ERB) prior to initiating any data-gathering processes. After obtaining approval from the ERB, the researcher will request permission from the Director of Nursing Service, hospital administration, unit heads, and other institutional gatekeepers within the participating hospitals. Following the acquisition of the necessary permissions, the target respondents will be identified through nurse managers/supervisors serving as institutional gatekeepers. Potential participants will be invited via the organization's official email or messaging systems. An information sheet and informed consent form will be distributed to each potential participant.

Data Analysis Methods

The chosen method for analyzing the collected data in this study is Colaizzi's Method of Phenomenological Data Analysis, which entails a thorough and systematic process to describe the phenomena experienced by staff nurses caring for palliative patients. Audio recordings of the interviews will be made and transcribed verbatim right after data collection. The use of Colaizzi's method for data analysis is justified because its structured process helps maintain the integrity of participants' experiences.

Study Limitations and Ethical Considerations

To prevent any violations of participants' rights and minimize potential harm during the research process, ethical standards will be strictly followed throughout the study. Before commencing any data collection, the researcher will seek approval from the Research Ethics Committee of St. Bernadette of Lourdes College. This ethical clearance will ensure that the research adheres to institutional, national, and international ethical principles, particularly those safeguarding participant welfare, autonomy, and confidentiality. Approval from the ethics committee will serve as official authorization to proceed with participant recruitment and data collection in accordance with ethical research practices.

RESULTS AND DISCUSSION

The study identified three major themes that captured the essence of nurses' lived experiences: **Emotional and Professional Challenges in Palliative Care**, **Coping Mechanisms and Support Systems**, and **Professional Growth and Transformation**. These themes demonstrate that while palliative care work exposes nurses to grief, moral distress, and fatigue, it simultaneously fosters resilience, empathy, and a deeper sense of professional identity.

SUMMARY

In summary, the research simulacrum visually integrates the dynamic interplay between challenges, coping strategies, and professional growth. It demonstrates that while palliative care imposes significant emotional, psychological, and physical demands on nurses, structured support systems and reflective practices enable resilience, empathy, and professional development. The diagram effectively conveys how nurses' lived experiences evolve from emotional burden to adaptive coping and ultimately to growth and transformation, providing a holistic representation of the qualitative findings.

CONCLUSIONS

It can be concluded that palliative care nursing is a highly demanding yet deeply meaningful field that exposes nurses to a wide range of emotional, psychological, and physical challenges. The lived experiences of staff nurses revealed that compassion fatigue, moral distress, and workplace fatigue are common realities in caring for patients at the end of life. Frequent exposure to suffering, dying, and death contributes to emotional exhaustion and psychological burden, while the physical demands of patient care and long working hours further intensify stress and fatigue.

RECOMMENDATIONS

In light of the study's conclusions, several recommendations are proposed for nursing practice. Healthcare institutions are encouraged to establish structured emotional support programs, including regular debriefing sessions, counseling services, and stress management workshops. Mentorship programs should be strengthened to support novice nurses as they navigate the emotional and ethical challenges of palliative care. Additionally, adequate staffing, proper workload distribution, and sufficient rest periods should be ensured to minimize physical exhaustion and workplace fatigue.

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AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

REFERENCES

Amante, A. J. E., Awitan, C. D. T., Baesa, K. L. V., Bango, P. U., Bantilan, K. S. T., & Bullecer, E. C. E. (2025). Stress coping strategies in Filipino staff nurses: The role of personality type. Iranian Journal of Health Sciences, 13(3), 195–202. https://jhs.mazums.ac.ir/article-1-1001-en.pdf

Bisht, R. (2025). What is purposive sampling? Methods, techniques, and examples. Researcher.Life. https://researcher.life/blog/article/what-is-purposive-sampling-methods-techniques-and-examples

Bloomfield, J. G., O'Neill, B., & Gillett, K. (2015). Enhancing nurses communication during end-of-life care: A pilot study. Palliative & Supportive Care, 13(6), 1651–1661. https://doi.org/10.1017/S147895151500022X

Chang, S. J., Moon, S., & Lee, N. K. (2025). End-of-life care preparedness and educational needs among nursing staff of long-term care facilities: A cross-sectional study. BMC Nursing, 24, 608. https://doi.org/10.1186/s12912-025-03244-0