Never Say Die: Euphemisms and misunderstandings at the end of life

Rawlings D1, Tieman JJ1, Sanderson C1, Parker D2 and Miller-Lewis L1
1Palliative & Supportive Services, Flinders University, Adelaide, South Australia
2 University of Technology Sydney

Introduction
A Massive Open Online Course (MOOC) on death and dying (Dying2Learn) was held in 2016 to open the dialogue with the general community. As a society that does not always speak openly about death and dying we can tend to shy away from what can be seen as harsh words or language.

An activity in week 1 asked participants to think of alternative words to death and dying (eg, kicked the bucket).

Aim: To explore the findings from the euphemisms and associated comments posted in the MOOC and to reflect on how language enables and sometimes disguises important messages and conversations.

Week one: How we engage with Death and Dying: Language

Misunderstandings in practice
“I prefer to use the word died. When arriving at a client’s door many years ago, her husband said, ‘she’s gone’. I asked where his wife had gone. She had died a few days earlier’” (MOOC participant)

“My great aunt was very worried that her husband would ultimately be transferred to one of two nursing homes, located quite some distance away, and therefore not easy for her to visit him. After a phone call one morning letting her know that her husband had ‘gone’, she inquired as to which nursing home he was transferred to; whereby the caller awkwardly clarified that her husband had in fact died. Plain language would have prevented an awkward conversation at a sensitive time.”

When it is appropriate
“….after Nursing in a multicultural area for years I’m aware of the cultural sensitivities that exist around death and dying” (MOOC participant)

This need to soften language is now translating into workplaces:
“…some line managers do not like the word ‘died’. I was told to write ‘passed away’ in a set of care notes” (MOOC participant)

And finally:
“I am getting the message that the word ‘die’ is like an obscenity or offensive word. How can it be right to continue the entrenched myths about death by not referring to it as an event except through shrouded inferences? How does it help children learn about how death is a part of the cycle of life if we are afraid to use the term ‘died’?”

Euphemisms
The euphemisms were many and varied and demonstrated how language has changed but also stayed the same. Many participants also provided comments about the use of euphemisms and how they can easily offend, or be misinterpreted.

This was a somewhat contrived task (an ice breaker) and we are aware that the euphemisms were ones that participants had found and not ones that they necessarily used. However, as over 2/3 of participants described themselves as health professionals an unintended outcome was the description of euphemisms in practice. While many decreed the use of words like ‘passed away’, they also mostly agreed that it was situational and that they would be guided in their use of language by the people they were talking to.

Ethics approval was received for this study, allowing de-identified content to be used (Flinders University HREC No: 7247).

Conclusion
Euphemisms have become a part of our everyday language to describe things we would rather avoid saying, and are used to soften conversations and avoid stating the obvious. This paper describes some of the euphemisms that were provided, examining why they are used and how their use can be easily misconstrued in daily life and in practice.

For oncology nurses there are implications for clinical practice in terms of the language used in communicating with patients and families which can cause embarrassment and distress.

Contacts
The CareSearch website is freely available at: www.caresearch.com.au
Those wishing to find out more can contact Deb Rawlings by emailing deborah.rawlings@flinders.edu.au