

**The other side of communicating bad news: a comment on the article
'The experiences of Indonesian parents receiving bad news about their
children's diseases: A qualitative descriptive study'**

Dear Editor,

The article by Mariyana and Betrina (2024) explores how parents of children with chronic illnesses interpret and respond to the communication of diagnoses and other bad news. This area of research is significant, as effective communication in pediatric care, particularly in the context of chronic disease, has been widely recognized as a critical factor influencing parental understanding, psychological adjustment, and engagement in care. The topic remains a recurrent focus in the literature due to its complex ethical, emotional, and clinical implications.

We know that communicating bad news is present in health professionals' daily lives. It is a necessary part of their intervention and has consequences for the entire care provision and the well-being of those involved (Cust et al., 2022; Rosado et al., 2024; Silva et al., 2020). This study underscores the vital role of nurses in communicating bad news. Parents acknowledge their contribution through empathy, trust, clear language, active listening, understanding, and emotional support (Mariyana & Betriana, 2024). Parents also view nurses as key figures in the communication of bad news, expecting them to be confident, empathetic and supportive. Nurses serve as a crucial link, helping parents navigate and ease emotional pain, offering comfort and reassurance during times of sadness, doubt, and uncertainty (Mariyana & Betriana, 2024).

This study and others like it confirm that nurses play an essential role in communicating bad news in healthcare, especially in pediatrics. Furthermore, these studies demonstrate the importance of training professionals on how to communicate bad news as a part of their continuing education. A nurse who is adequately prepared and trained can play a pivotal role in reducing the impact of bad news on the recipient. Skilled communication not only helps to minimize feelings of sadness, helplessness and denial, but also fosters the development of a strong therapeutic relationship. Furthermore, effective disclosure can enhance acceptance and understanding, thereby improving adherence to the therapeutic care plan and contributing to higher quality and continuity of care (Chen et al., 2021; Ebelhar & Brock, 2024; Zanon et al., 2020). However, how do nurses prepare for, feel about, and manage their emotions when communicating this type

of information and managing the reactions of families and children? In other words, what impact sharing this information has on nurses? Since communicating bad news is considered one of the most complex and difficult aspects of interpersonal relationships, as reflected in the daily practice of health professionals, it requires physical, emotional and professional preparation. This makes it a situation of great vulnerability, even for health professionals (Cust et al., 2022; Zanon et al., 2020). Given the importance and emotional sensitivity of communicating bad news, it is essential that professionals are adequately prepared for these moments and for dealing with their consequences.

Professionals often feel unprepared and may delay or avoid delivering bad news out of fear of causing suffering, which in turns leaves them feeling emotionally unwell and insecure (Agnese et al., 2022; Silva et al., 2020). It is important to recognize that health professionals are the first recipients of such news. They must first process and manage this information themselves in order to share it to the child and family in a manner that is both appropriate and humanized (Silva et al., 2020). In addition to delivering the news, they are also responsible providing ongoing care, which includes managing the consequences and reactions that follow.

In this context, the act of communicating bad news can lead to frustration and trigger intense feelings of anxiety, fear, discomfort, anguish, and helplessness among health professionals. These feelings can lead them to alter their communication style to protect themselves and find an escape mechanism in these moments (Nnate & Nashwan, 2023; Silva et al., 2020; Wahyuni et al., 2023).

A lack of adequate preparation and ineffective communication can lead to emotional exhaustion. This exhaustion often stems from the empathic burden of processing difficult information and witnessing others' suffering without sufficient emotional support. Over time, these experiences can contribute to moral distress, compassion fatigue, burnout and emotional detachment, all of which negatively impact both the quality of care and professionals' well-being (Nnate & Nashwan, 2023; Silva et al., 2020; Wahyuni et al., 2023). When their well-being is compromised, professionals may struggle to communicate effectively, provide less humanized care, and resort to avoidance strategies to distance themselves from such emotionally challenging situations (Nnate & Nashwan, 2023; Silva et al., 2020; Wahyuni et al., 2023).

Since communication in healthcare involves more than just talking, it is a complex process carried out by all the professionals in the multidisciplinary team and in all types of care. It requires empathy, calmness, clarity, honesty and adaptability, so information

can be received and interpreted well, creating space for the transmission of all types of information, including bad news (Cust et al., 2022; Rosado et al., 2024; Silva et al., 2020; Zanon et al., 2020). The impact that transmitting this type of information can have on healthcare professionals, particularly nurses, and the consequences it can have on their future practice, reveals the need to define coping strategies and train nurses to deal with these situations.

It is crucial that health professionals do not feel vulnerable, guilty or incapable of delivering bad news. Otherwise, they can jeopardize their well-being, daily care practices, communication, and consequently, the experience of children and families during these times. Communicating bad news is an inevitable challenge for nursing care and the entire multidisciplinary team. Recognizing the emotions involved and their implications for professional practice is essential to developing strategies that support professionals and contribute to quality, humanized, expert care. To this end, multidisciplinary teams must consider the well-being of their members, more studies must be carried out in this area, and investment must be made in the training and support of health professionals.

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