

Original Article

Preliminary Effects of Truth-telling Training

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Abstract.

Background: Cancer has been the leading cause of death since 1982. In everyday clinical practice, many cancer patients and their family need to hear the truth from doctors. However, due to a lack of empirical research data, the quality of truth-telling is not known. The Japanese SHARE Model of Communication Skills Training (CST) was designed based on strict qualitative and quantitative studies of cancer patients' truth-telling preferences. Because Taiwan's culture is similar to Japan's, a truth-telling training model based on the Japanese SHARE Model may better meet local needs. The main purpose of this study was to test whether a SHARE Model-based CST could improve the participants' truth-telling ability.

Method: The one group pre-post test design was adopted in this study and the subjects consisted of 74 medical and nursing staff from northern, central, southern, and eastern Taiwan. This study assessed whether CST could improve participants' truth-telling ability and whether a difference in training hours resulted in a difference in progress in ability.

Results: Comparison of overall truth-telling ability pre-test and post-test (immediately after the CST training) revealed a pronounced effect ($d=1.488$) and statistically significant difference ($t=12.716$, $p<0.0005$). The improvement of subscale scores in truth-telling methods, emotional support, and provision of information was particularly significant ($p<0.0005$). Although the overall truth-telling scores of participants receiving 12-hour CST training were better than those of participants receiving 6-hour CST training ($M=22.18$ vs $M=21.16$), this difference was not statistically significant ($p=0.728$). The internal consistency of the Japanese Truth Telling Overall Scale (Chinese Version) was 0.86, suggesting that the reliability was high.

Conclusions: The Japanese SHARE Model-based CST significantly increased the truth-telling ability of medical and nursing staff participating in this study. Because the post-tests were performed immediately after the CST courses, information on the long-term effects of CST on the truth-telling ability of medical and nursing staff could not be obtained. In this study, only a subjective self-assessment of participants was performed. In order to present the effects of CST more objectively, a 360-degree assessment from cancer patients, their family, and other health-related personnel has to be made.

Keywords : truth telling, cancer, SHARE Model

原著論文

病情告知訓練的初步效益