You bring your own culture to end-of-life care

All persons carry ethnic, racial, religious/spiritual, moral, education, economic and other values which can influence our actions. Yet, we are often unaware of our own biases and non-inclusive behaviors. Understanding our own cultural beliefs is like peeling an onion; after each layer, consecutive layers are exposed.

You can increase your cultural awareness through workshops, community discussions and other training opportunities.

Yet, your strongest growth will occur in multicultural situations which challenge your knowledge and comfort.

- What are some privileges you enjoy in life? How do these privileges affect your life? Your ability to achieve your goals? Your ability to achieve success?
- Which of these privileges are unavailable to others because of the group they belong to? Beside each unavailable privilege, write the name of the group(s) that don't enjoy these privileges.
- Do you believe that the current health care system is already fair to everyone? Is everyone treated the same by all health care providers?
- Think of a time when you felt tolerated. Write a few words about it. How did it feel to be merely tolerated? How did feeling tolerated affect your relationship with the tolerant person(s)?

"Endings matter, not just for the person but, perhaps even more, for the ones left behind."

- -Atul Gawande, MD, Being Mortal: Medicine and What Matters in the End
- Think of a time you felt appreciated. Write a few words about it. How did it feel to be truly appreciated? How did feeling appreciated affect your relationship with the appreciative person(s)?
- Do you incorporate inclusion and diversity into your organization and your life?
- Do you continually ask yourself whether you are making a value judgment about others, rather than recognizing that others might simply have different ways of reaching their goals?
- Do you listen actively; paraphrase what the other person has said and then ask her/him whether your paraphrase is an accurate version of what she/he was trying to convey?
- Do you consider talking less and thinking and listening more?
- Do you read publications that express viewpoints that differ from your own?
- Do you seek out situations, both at work and outside of work, that induce discomfort; then find ways of raising your comfort level?

• Is there any group of people for whom it would be difficult for you to work with or care for (LGBTQ+, specific faith tradition, homeless, drug user, convict, etc)? What would you do if you encountered someone from that population in your work?

How do I engage multicultural patients and families?

As a provider, you must be able to interact with others who are different from you. This requires that you:

- Recognize and adapt to the variety of listening behaviors you will encounter among diverse people.
- Listen for value-based cultural assumptions and expectations.
- Observe behaviors and monitor your interpretations and meanings.
- Learn about other views, work styles, assumptions and needs. Encourage others to do the same.
- Be comfortable in asking questions about the proper or preferred terminology, pronunciations, customs, etc.
- Be comfortable in asking if you have caused harm or offended and find out how to correct and avoid it.
- Ask people to explain such things as goals, objectives, instructions and directions to ensure common understanding.
- Develop a collaborative ("win-win") problem-solving process.
- When talking with non-fluent English speakers, speak clearly and avoid jargon and slang.
- Ensure that the person understands your meaning.
- Let others know, verbally and non-verbally, that you are willing to interact with them.
- Learn to feel and exhibit comfort with groups and individuals different from yourself.
- Respect the right of people to have beliefs, life-style choices or behaviors that you do not believe in or ascribe to

How do I evaluate my own patient and family multicultural competence?

- Test your own language for inclusiveness.
- Become aware of your own reaction to change, as well as your ability to interact with others who are different from you; your adaptability to alternative solutions and unstructured situations; your mental flexibility and your intellectual curiosity.

- Choose a colleague to meet with regularly who also wishes to provide care with more sensitivity to differences. Share goals, set milestones and report on progress.
- Learn about differences in end-of-life care through reading, attending workshops, fostering relationships with people who are different and participating in activities that are diversity related.
- Ask questions of people who are different from you. Ask them what it is you don't understand. Listen to others as they describe diversity issues. Seek clarification, rather than making hasty judgments.
- Develop concrete measures to evaluate patient care and patient satisfaction among diverse populations
- Strengthen patient and family decision-making by providing choices and offering visible support.
- Document family values, religious and spiritual beliefs and caregiver roles.
- Learn about the history and beliefs of other racial, religious/spiritual and national groups. Keep informed on current challenges that face these groups in your community.

What factors contribute to high levels of patient and family care satisfaction?

Hospices throughout the United States are learning that specific practical actions have a positive impact on patient/family satisfaction. These include:

- Care providers acknowledge that a wide variety of beliefs, traditions, values and choices exist with Families sometimes feel more comfortable with providers that reflect their own cultural or socio-economic background. And sometimes not.
- Line-item budgets are needed for patient/family interpretive services, including purchases of language and culture specific resources.
- Audio/visual patient and family materials in non-English languages are important communication aids. Graphical representations of people that reflect the diverse community in which you live are more inclusive.
- A gracious welcome and sincere smile always help to create a welcoming presence.
- Allow time to develop a trusting relationship, particularly when families have experienced significant distress with the health care system.
- Always document information about the beliefs, traditions, values and choices of each patient and their family. Ensure that documentation is available to all team and on-call staff.
- Rephrase and say your message again if you feel you are not being understood. Use pictures
 and diagrams when appropriate. Frequently ask open-ended questions to check for the other
 person's understanding.

• Do not rely on family members to translate for you. Family translation can put the family member in an uncomfortable position

Guiding patient/family care

Care Assessments: What you should ask patients and families

People are diverse in many different ways. While outward manifestations may be more noticeable, our inner worlds are

equally significant.

The only way to learn what is important to a patient is by asking honest questions and listening carefully. Completing a

patient/family care assessment is as important as completing a physical exam. In asking sensitive care-related

questions, you will learn how a patient prefers to be treated, cared for and honored.

Hospice and palliative care organizations can develop a patient/family assessment which meets their specific provider,

organization and patient needs. Examples of important patient-centered assessment questions include:

• Where was the patient born? If an immigrant/refugee, how long have they lived in this community and in this

country? Is their family living with them or is there geographic separation or isolation?

• Does your patient maintain a strong ethnic or cultural affiliation? Is their ethnic/cultural community important in

providing end-of-life caregiving and support?

Additional factors to consider include:

- Conversational style and pacing
- Non-verbal communication
- Personal space
- Eye contact
- Appropriate use of touch
- Time orientation or time values
- Use of interpreters

"When we listen and celebrate what is both common and different, we become a wiser, more inclusive and better organization.' Pat Wadors

Taken from NHPCO - Inclusion and Access Toolkit