



CROSS-CULTURAL CONSIDERATIONS IN PROMOTING ADVANCE CARE PLANNING IN CANADA

Andrea H. Con, PhD

Palliative Care in Cross-Cultural Context: A NET for Equitable and Quality Cancer Care for Ethnically Diverse Population

Cancer Rehabilitation, Sociobehavioural Research Centre, Vancouver, BC

Introduction

Advance care planning (ACP) is a process in which an individual creates instructions and guidelines about their medical care in the event that they are too seriously ill or injured to make decisions or communicate. Often, an individual is named to be a substitute decision-maker during this time.

Working with Health Canada's Secretariat on Palliative and End-of-Life (EOL) Care, we conducted a study to learn about how diverse cultural and Aboriginal groups in Canada might respond to ACP becoming a part of the health care system. Because we know the largest and most prevalent cultural and Aboriginal groups may have different perspectives about participating in a conversation that concerns terminal illness, suffering, dying, and death, our aim was to increase understanding of the diverse perspectives to ensure ACP practices are respectful, sensitive, and not offensive to individuals and their families from various cultural and Aboriginal groups.

Methods

One hundred and twenty-five key informant interviews and 4 focus groups were conducted. Using qualitative research methods the team developed questionnaires for use in semi-structured interviews. Interview questions were developed for three categories of key informants:

1. Organizational (e.g. national or provincial organizations; volunteer organizations, health organizations, hospices)
2. Health care professional (e.g. nurses, physicians, social workers, chaplains, health administrators, home/long term care providers)
3. Ethnic/cultural/Aboriginal (e.g. someone of a cultural or Aboriginal group)

Cultural Background of Key Informants

Cultural Background	%
Caucasian	63
Aboriginal	11
Chinese	7
South Asian	6
Black, Deaf, Filipino, Francophone, Iranian, Latin American	13

Results - General Themes

Death

- Unwillingness to discuss
- Can be considered taboo
- Seen as sense of failure for HCP

Like in Tim Horton's, you don't see it up on the wall, "We Support the Terminally Ill". But you see "We Support the Humane Society" or a picture of a little dog or we see "We Support the Children's Wish Foundation" and you'd see a bunch of kids playing. Now I've got nothing against those two groups because they're essential to those organizations and I support them myself but still, when it comes to end-of-life, palliative and end-of-life care, I mean that's going to impact on everyone but it's just something that people don't really care [to see], it's an unpopular subject.

ACP

- Most key informants had a positive attitude towards ACP
- ACP meant having control over EOL care and provided peace of mind for family
- ACP had potential to save resources & medical costs

Challenges:

- Cost of lawyer/notary
- Necessary to review one's ACP on regular basis
- Confusion on whether goal of ACP was the conversation or a document

Cultural Diversity

- Important to acknowledge variation within culture
- Minority-matched health care providers to patients
- Trusted/well-respected community leader or advocate will help to move ACP forward
- Language barrier an ongoing issue
- Communication skills and training are critical (use of interpreters is helpful)

Discussion

Advance care planning can play an important role in end-of-life care for cancer patients and families as well as for the health care providers and system in which they serve. The results from this study provide valuable insight for practitioners into how this application can improve palliative and end-of-life care for all cancer patients and their families.

Recommendations

- Public Education to normalize death
- ACP should be specific to disease
- Palliative care should be a medical specialty
- Research
- Organizations/health care facilities create pathways to guide health care professionals in ACP conversation
- Engage communities to develop outreach programs
- Be respectful of all people, regardless of culture