

# Providing Culturally Appropriate Spiritual Care in the Context of the End of Life Care

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**HealthCare  
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# The Process

- **Creating a faith-friendly environment**
- **Being culturally sensitive**
- **Assessment**
- **Check your assumptions and biases at the door**
- **Listen, Listen, Listen**

# The End Game

**A health care institution where patients, family members and staff can live out their spiritual and religious beliefs, values, and practices within the bounds of mutual respect and safe health care practice.**

# The Mindset

- **Not about avoiding anything that might possibly offend someone.**
- **Not about minimizing risk**
- **It's about “why not” rather than “why”**
- **It's about customer service, patient engagement, and patient-centered care**

# Cultural Competence/Sensitivity

- **Being culturally sensitive or competent does NOT mean knowing everything about every culture...**
- **It is instead respect for differences, eagerness to learn, and a willingness to accept that there are many ways of viewing the world.**

# What Are Your Own Predispositions?

# Attitudes

- **What causes illness?**
- **What does it mean to be a “good patient”?**
- **How to treat illness and injury?**
- **Who do you go to?**

# Attitudes- Right and Wrong

- **Is it whatever works for the patient?**
- **What is “wrong”?**
- **What were you taught about how people should die?**



# Aspects of Culture

# Health Care Culture

Beliefs	<ul style="list-style-type: none"> <li>a) Standardize definitions of health and illness</li> <li>b) The omnipotence of technology</li> </ul>
Practices	<ul style="list-style-type: none"> <li>a) Maintenance of health and prevention of disease via mechanisms such as the avoidance of stress and the use of immunizations</li> <li>b) Annual physical examinations and diagnostic procedures such as Pap smears</li> </ul>
Habits	<ul style="list-style-type: none"> <li>a) Charting</li> <li>b) Constant use of medical jargon</li> <li>c) Use of a systematic approach and problem solving methodology</li> </ul>
Likes	<ul style="list-style-type: none"> <li>a) Promptness</li> <li>b) Neatness and organization</li> <li>c) Compliance</li> </ul>
Dislikes	<ul style="list-style-type: none"> <li>a) Tardiness</li> <li>b) Disorderliness and disorganization</li> </ul>
Customs	<ul style="list-style-type: none"> <li>a) Professional deference and adherence to the “pecking order” found in autocratic and bureaucratic systems</li> <li>b) Hand washing</li> <li>c) Employment of certain procedures attending birth and death</li> </ul>
Rituals	<ul style="list-style-type: none"> <li>a) Physical examination</li> <li>b) Surgical procedure</li> <li>c) Limiting visitors and visiting hours</li> </ul>

# Aspects of Culture

- **Sense of self and space**
  - Informal, handshake, eye contact
  - Formal, bows, handshakes
- **Communication and language**
  - Explicit, direct. Emphasis on content – meaning found in words
  - Implicit, indirect. Emphasis on context --- meaning found around words. Gaps in conversation are common.

# Aspects of Culture

- **Dress and appearance**
  - “Dress for success” ideal. Wide range in accepted dress
  - Dress seen as a sign of position, wealth, prestige.
  - Religious rules
  - Jewelry & hair
- **Food and eating habits**
  - Eating as a necessity – fast food
  - Dining as a social experience. Religious rules

# Aspects of Culture

- **Time and time consciousness**
  - Linear and exact time consciousness. Value on promptness. Time = money
  - Elastic and relative time consciousness. Time spent on enjoyment of relationships
- **Relationships, family, friends**
  - Focus on nuclear family. Responsibility for self. Value on youth, age seen as handicap
  - Focus on extended family. Loyalty and responsibility to family. Age and gender given status and respect

# Aspects of Culture

- **Values and norms**
  - Individual orientation. Independence preference for direct confrontation of conflict
  - Group orientation. Conformity. Preference for harmony.
- **Beliefs and attitudes**
  - Egalitarian. Challenging of authority. Individuals control their destiny. Gender equality.
  - Hierarchical. Respect for authority and social order. Individuals accept their destiny. Different roles for men and women.

# Aspects of Culture

- **Mental processes and learning**
  - Linear, logical, sequential, problem-solving focus.
  - Lateral, holistic, simultaneous. Accepting of life's difficulties.
- **Work habits and practices**
  - Emphasis on task. Reward based on individual achievement. Work has intrinsic value.
  - Emphasis on relationships. Rewards based on seniority, relationships. Work is a necessity of life.

# Use of Authority

- **Traditional**
- **Negotiating**
- **Individualistic**



# It's All About Assessment

# Cultural/Religious Issues

- **Beliefs- especially about health related issues like pain med**
- **Values**
- **Family structure- who gets medical information**
- **Modesty**
- **Food**
- **Dress**
- **Daily & Sabbath Religious Observance**
- **Ritual Items**
- **End-of-life care- prayers, rituals, care of the body**
- **Mourning**

# Assessment Issues

- **Stereotypes**
- **Cultural Patterns**

# Tips

- **Don't treat others as YOU would want to be treated.**
- **Address all adult patients from other cultures by their surnames unless specifically asked to use a first name.**
- **Mind your tone of voice.**
- **Every culture has its own rules for touching and distance especially between genders.**
- **Don't ask a limited English-speaking patient or family member: "Do you understand?"**
- **Informed consent forms and regulations can be extremely upsetting and frightening.**

# Tips

- **Different is different, it's not right or wrong.**
- **Don't be concerned about being with someone from a religion or culture you don't understand**
- **I'm not afraid to ask, even when I feel uncomfortable.**
- **It's *not* about me!**

# Tips

- **Make sure the right people are in the room**
- **Who is the family?**
- **Outline the process**
- **Why are we here?**
- **Have a facilitator**
- **Give information in small doses**
- **Invite patients/families to tell their story first.**
- **Make sure all members are heard**
- **When in doubt, listen**

# Tips

- **Don't negotiate religion even if you know it.**
- **Don't try to negotiate**
- **You can explain the expected medical consequences of their proposed course of action**
- **You can explain what you are not permitted to do or won't do ethically**
- **Direct language- not magical thinking**

# Cases

- **The Miracle**
- **God will decide**
- **My clergyperson said.....**
- **The multi-faith family or faith/no faith**
- **I am being punished**
- **Jehovah's Witness**



# Resources

- **Advancing Effective Communication, Cultural Competence, and Patient-and Family-Centered Care: A Roadmap for Hospitals**
- <http://www.jointcommission.org/assets/1/6/ARoadmapforHospitalsfinalversion727.pdf>
- **Handbook of Patients' Spiritual & Cultural Values for Health Care Professionals**
- [https://www.healthcarechaplains.org/docs/publications/landing\\_page](https://www.healthcarechaplains.org/docs/publications/landing_page)
- **cultural\_sensitivity\_handbook\_from\_healthcare\_chaplaincy\_network\_11\_11\_2015**

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