DELIVERING PALLIATIVE CARE TO PATIENTS AND FAMILIES FROM DIVERSE CULTURES

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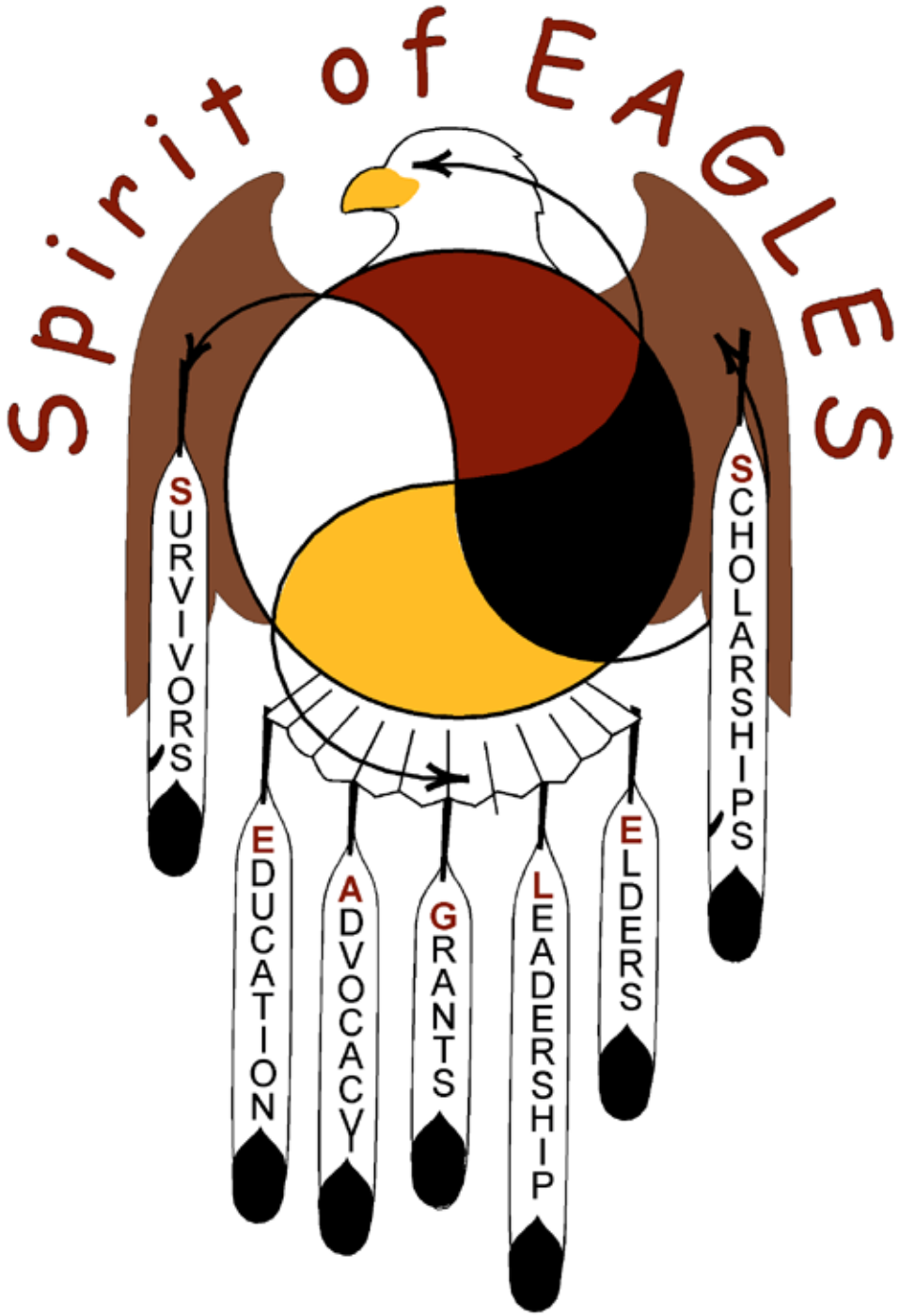
Spirit of EAGLES
SURVIVORS
EDUCATION
ADVOCACY
GRANTS
LEADERSHIP
ELDERS
SCHOLARSHIPS

The Worldwide Need

- Chronic diseases such as cancer increasing
- Shortage of palliative care professionals trained
- Human needs unmet for symptoms such as pain control, emotional and spiritual support

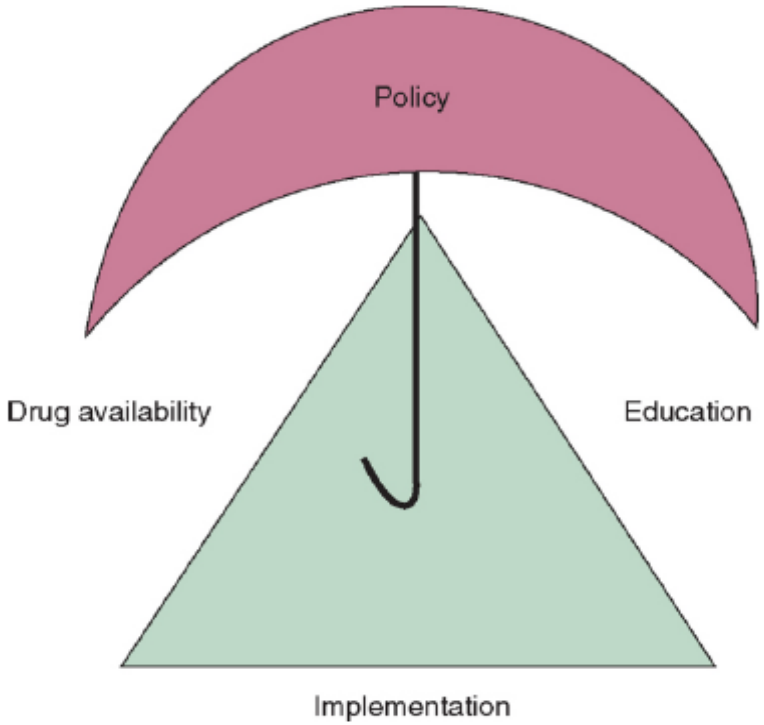

FIGURE 1-1 Foundation measures for establishing a National Palliative Care Program (NPCP).

Stjernsward J, Gómez-Batiste X. Palliative Medicine – The Global perspective: Closing the know-do gap. In: Walsh D (Ed), Palliative Medicine. Philadelphia: Elsevier, 2008; pp 2-8.

PALLIATIVE CARE IN ETHIOPIA

DOMAINS OF CULTURE

Ethnic identity	Communication styles	Time and space
Social Organization	Workforce issues	Health beliefs, practices and practitioners
Biologic variations	Sexuality and reproductive fears	Religion & spirituality
Death & dying		

Dying in America

- Who cares for the caregiver?
  - 82% are female
  - 23% have kids at home
  - 74% married
  - 47% employed
    - National Family Caregivers Association Survey

AVOID STEREOTYPES

- CULTURE COUNTS
- CULTURE IS TO A COMMUNITY AS MEMORY IS TO AN INDIVIDUAL
- CULTURE INFLUENCES MANY DX AND TX
- TAKE HEALTH BELIEFS SERIOUSLY
- PERSONAL CULTURE AND THE CULTURE OF MEDICINE!

International Telehealth Palliative Care Symposium

HOW DELIVERY SYSTEM CHANGE OCCURS

- MOTIVATION
- BARRIERS
- CHAMPIONS
- PLAN, ENGAGE, REVISE
- BRING UP TO SCALE


MAYO CLINIC

STAGES OF READINESS

- UNAWARE/DISENGAGED
- AVOIDANCE/RESISTANCE
- INITIAL RECOGNITION & DELIBERATION
- EXPERIMENTATION
- LOCAL NORMALIZATION
- DIFFUSION TIPPING POINT
- INSTITUTIONALIZATION