ELNEC- For Veterans
END-OF-LIFE NURSING EDUCATION CONSORTIUM

Palliative Care For Veterans

Module 4 Cultural Considerations in Palliative Care

PARTICIPANT OUTLINE
Module 4: Cultural Considerations in Palliative Care
Participant Outline

I. CULTURAL ASPECTS OF PALLIATIVE CARE
   A. Military culture
      1. Unique American subculture

II. CULTURAL DEFINED
   A. Meaningful from individual’s perspective
   B. Striving to understand culture
   C. Culture affects/influences palliative care

III. CULTURAL DEMOGRAPHICS SPECIFIC TO VETERANS
   A. Armed Forces subcultures
   B. Demographics of Veterans
   C. Period of service
   D. War Eras
   E. Women Veterans
   F. LGBTQ Veterans
   G. Poor and homeless Veterans

IV. CULTURAL SENSITIVITY
   A. Acknowledge diversity and strive for inclusion and equity

V. COMPONENTS OF CULTURAL ASSESSMENT
   A. Nurses’ self-assessment
      1. Awareness of one’s own culture and its influence on practice
      2. Assessment of team members’ culture
   B. Implicit bias
      1. Everyone has a bias
      2. Understanding one’s bias
   C. Other components of cultural assessment
      1. Social determinants of health
      2. Country of origin
      3. Immigration status
      4. Ethnicity
      5. Race
      6. Support community
      7. Decision-making process
      8. Primary Languages
      9. Communication practice
     10. Religion/spirituality
     11. Nutrition
     12. Economics
13. Gender, gender identity, gender expression
15. Health beliefs

VI. CULTURAL CONSIDERATIONS
A. Considerations in communication include:
   1. Safe environment
   2. Communication style
   3. Personal space
   4. Acceptability of eye contact
   5. Acceptability of touch
   6. View of healthcare professionals
   7. Auditory versus visual learning styles
   8. Narrative interviews
   9. Use of interpreters
   10. Language used regarding treatment decisions
B. Opening the door: Perform respectful introductions.
C. The family: who the patient identifies as family
D. Patient’s desire for information - disclosure of diagnosis and/or prognosis
E. Health equity in palliative & end-of-life care impact

VII. WHEN CULTURES CLASH
A. Seek to understand each other’s perspective
B. Assess own reactions and one’s implicit bias
C. Offer information
D. Use the interprofessional team

VIII. SPIRITUAL CONSIDERATIONS IN PALLIATIVE CARE
A. Definitions:
   1. Spirituality
   2. Religion
B. Spiritual assessment
C. Interventions