

# Culturally-Appropriate End-of-life Care: Do and Don't Review Findings to Inform Healthcare and Other Service Providers

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\* **Dr. Donna M. Wilson**

**Professor, Faculties of Nursing and Medicine & Dentistry, University of Alberta,  
Edmonton, Canada; Adjunct Professor, University of Limerick**  
[donna.wilson@ualberta.ca](mailto:donna.wilson@ualberta.ca)

\* **Dr. Jean Triscott**

**Professor, Faculty of Medicine and Dentistry, University of Alberta**

\* **Brooklyn Grainger**

**Registered Nurse, former Nursing Student, Faculty of Nursing, University of Alberta**

## Introduction

- Each year, 67 million people die worldwide. Many are people who immigrated to another country as adults after they got used to their homeland death and dying rituals.
- Practices occurring near death, at death, and after death are heavily subject to cultural norms and taboos, with some practices expected and others considered unnecessary or perhaps inappropriate or even taboo.
- 300,000 deaths take place in Canada, with 1/5 born in the Philippines, India, China/ Hong Kong, Pakistan, Vietnam, Mexico, Korea, Nigeria, Ethiopia, or Lebanon.
- Culturally-appropriate end-of-life care is very important.

## Design and Methods

- Through an extensive literature review, we developed a list of do's and don'ts for providing culturally-appropriate care to dying immigrant people and their families.
- This search started in library databases, followed by a Google search, with recent findings retained.
- The findings for each immigrant group were then confirmed/validated or corrected by discussions with cultural group leaders in Canada.

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## Results

- Significant differences across the 10 cultural groups were found, often related to religious or spiritual beliefs and social customs:
- before death differences in: (a) religion/spiritual preferences, (b) beliefs about death, (c) talking about dying, (d) disclosure of a terminal diagnosis or prognosis, (e) who is to be decision maker, (f) planning for the end, (g) any life preservation preferences, (h) expected family involvement in end-of-life care, (i) pain and analgesia preferences, (j) interpretation services need, (k) food preferences, (l) other specific cultural considerations;
  - at the time of death differences in: (a) preferred location, (b) ceremonial rites, (c) how grief is to be shown or revealed, (d) additional more diverse cultural considerations;
  - after death differences in: (a) care of body, (b) body donation preferences, (c) autopsy preferences, (d) bereavement support expectations, (e) body disposition preferences, (f) gift giving and other funeral or memorial practices, (g) additional cultural group considerations.

## Conclusion

- Culturally-appropriate end-of-life care is essential, so the dying person and their family feel respected and valued, and family members do not grieve longer and harder following the death.
- A case by case approach is advised for appropriate end-of-life care as customs change over time, place, and circumstances.

