The influence of religion and culture on patients facing advanced illness.

An advance care planning behavioral perspective

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Helping patients who face advanced illnesses discern preferences and priorities requires a highly individualized approach. An understanding and appreciation for each person’s unique interpretation of cultural and religious beliefs is critical.

Factors impacting Advance Illness Decision-Making

There are many factors shaping how patients face the end of life, all of which play a role in determining how individuals process the difficult decisions they must make. These can include gender, education, generational cohort, and family roles, and to an outsider they provide clues to understanding the individual as a whole.

But no attempt at labeling and categorizing ever captures who we truly are. And of all the forces that shape a human being, perhaps none is more complex – and important for medical and behavioral professionals to effectively take into account, than the power of culture and religion.

FACTORS INCLUDE:

- Gender Roles
- Age
- Religion
- Education
- Personality
- Medical History
- Generational Cohort
- Financial Situation
- Support System
- Gender Identity
- Family
- Spirituality
- Ethnicity
- Family Roles
- Culture
- Marital Status
The Influence of Religion and Culture

For the professional, an understanding of different cultural and religious backgrounds provides important directional guidance. The diversity of thoughts and practices within cohorts make generalizations difficult, yet they can provide a helpful starting point from which to go deeper.¹

One of Several Jewish Perspectives

Medical Care:
- Follow medical advice, transplantation is acceptable

Patient Autonomy:
- Patients have choice, Medical care may play greater role in decision making

Consultation Prior to Decision Making:
- Family, Rabbi

Dying and Death:
- Hastened death not an option, dying process should not be prolonged
- Perspective impacts hydration and artificial nutrition
- Multiple versions of Jewish Advance Directives in use

One of Several Islamic Perspectives

Medical Care:
- MD is expected to take steps to prevent premature death

Patient Autonomy:
- Decisions on aggressive treatments made in collaboration
- Medical authority may play greater role in decision making

Consultation Prior to Decision Making:
- Family, Religious leaders

Dying and Death:
- Hastened death not an option, dying process should not be prolonged
- Life support removed only if MD is certain death inevitable
- Brain death has different guidelines

One of Several Hispanic Perspectives

MDs are respected and viewed as authority figures:
- Likely to adhere to medical advice, instruction
- Less likely to share cultural beliefs with MD

Family Role is important:
- May prefer to hear diagnosis/prognosis from family member
- Discussions about EOL may be avoided

Religion often a factor:
- Belief in hope, miracles
- Hospice utilization low, ACP often not completed

1 References:

Effective Advance Care Planning

At its core, effective Advance Care Planning requires careful, compassionate detective work to unravel the many facets that make a person whole. At Vital Decisions, our Specialists engage over 30,000 patients each year in the Advance Care Planning process. We’ve found that respect for religious beliefs and cultural traditions is a key foundational element essential to initiating a more productive dialog between patients, medical professionals and families.

Working closely with health plans around the country, our job is to serve as a catalyst to ensure that these dialogs are ongoing so patient preferences and priorities can be understood and honored. Regardless of background, our experience shows that’s one outcome everybody can agree with.

To request more information on The Influence of Religion and Culture on Patients Facing Advanced Illness please go to www.VitalDecisions.net/culture or call 800-301-3984 x2165.