CULTURALLY COMPETENT COMMUNICATION ENHANCES QUALITY OF CARE IN GERIATRIC ONCOLOGY

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Culturally competent cancer care for elderly patients

- The complexity of cancer and its treatments influence communication between patients and their oncologists and tensions may be further magnified by cultural differences.

- As the age of cancer patients increases worldwide, delivering culturally sensitive cancer care has become a priority also in geriatric oncology.

Cross-cultural issues in oncology

• Culture is involved in every patient-doctor relationship.

• We all belong simultaneously to multiple cultures.

• Cross-cultural encounters are increasing.

• Cross-cultural encounters may generate ethical dilemmas.

• Cultural factors contribute to disparities in access to health care and research for minority cancer patients.
Culture: definition

Culture is the sum of the integrated patterns of knowledge, beliefs and behaviours of a given community.

Members share thoughts, communication styles, ways of interacting, views of roles and relationships, values, practices, customs.

Culture: contributing factors

- race and ethnicity
- geographic boundaries
- socioeconomic status
- educational level
- spoken language
- urban or rural contexts
- religion
- gender
- sexual orientation
- occupation
- disability
Culture, health and illness

– *perceptions* of disease, disability and suffering
– *degrees* and *expressions* of concerns
– *responses* to treatments
– *styles* of relationships to individual health professionals
– *approaches* to institutions and health care systems
– *attitudes* toward research and clinical trials
Cultural competence in medicine

A set of **acquired skills**, founded on **virtues** and **moral character**, that requires:

- **understanding** of the *key notions* related to culture.
- **appreciation** of difference in *health care values*.
- **attitudes** of *humility, empathy, curiosity, respect, sensitivity* and *awareness*.

*Betancourt 2003; Kagawa-Singer 2003, Surbone 2006*
Cultural competence in medicine

The patient and the physician must negotiate their possible different views, in order to achieve their common therapeutic goal.

Aging and culture

The meaning we attribute to old age shapes the very meaning of our entire cycle of human life.

Simone de Beauvoir, 1970
The coming of Age.

Old age cannot be understood apart from a cross-cultural and historical perspective.
review

The illness trajectory of elderly cancer patients across cultures: SIOG position paper

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Culturally competent cancer care for elderly patients

• Cultural differences between patients and oncology professionals often give rise to bedside misunderstandings and conflicts with respect to

  • truth telling and information
  • locus of decision-making
  • end of life choices
  • prevention and screening
  • involvement in clinical trials
Culture and health disparities

- Cultural factors contribute to disparities in access to health care and research for minority and underprivileged cancer patients.

- Elderly patients are more likely to be among the underprivileged, due to their loss of productivity and social isolation.
Research and intervention perspectives in cultural competence in geriatric oncology

• Clinicians, researchers, educators, legislators, and policy makers should seek an innovative perspective on aging and cancer to
  • improve resources
  • target exceptional professionals for the field of geriatric oncology
  • broaden their knowledge regarding more sophisticated and redesigned culturally competent systems of care
Culturally-competent health-care systems

– assessment of cross-cultural relations

– vigilance toward the dynamics related to cultural differences

– expansion of cultural knowledge

– adaptation of services to meet culturally unique needs of patients or groups of patients.

Ten tips for the geriatric oncologist

• Do not make assumptions based on race, nationality, language, gender, educational and socioeconomic status.

• Ask your patients to briefly describe their cultural and religious background.

• When necessary, acknowledge your own background.

• Ask your patients to what type of family do they belong (extended vs nuclear, close vs distant.)
Ten tips for the geriatric oncologist

- Ask your patient what language do they speak at home.
- Offer professional translation, remembering to consider the translator as also a “cultural mediator”.
- Find ways to double check if the translation of a relative or friend is correct and covers all relevant information.

Surbone, Supp Care Cancer 2003
Ten tips for the geriatric oncologist

• Never assume that elderly cancer patients are unwilling to receive information or to discuss prognosis and death.

• Never stereotype elderly cancer patients as unwilling to fight for their life and undergo treatments.

• Ask your patients how informed do they wish to be, while clarifying ethics/laws of the country where you practice.

• Ask your elderly patients for their understanding of the illness and for changing preferences over time.

Surbone, Supp Care Cancer 2003
Thank you for your attention!