

NHPCO Project ECHO *Equity Where It Matters*

Key Takeaways: Supporting Chinese Patients in Serious Illness at End-of-Life

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Key points:

- With an expected exponential population rise, Chinese American patients who experience serious illness or approach end-of-life (EOL) may find their cultural values influencing the medical care they receive, and often at odds with the mainstream American/Western values.
- Not understanding diverse cultural values and not having appropriate access to information pose barriers to health equity and health justice.
- Relationship, harmony, and reliance within the family may supersede autonomy, advance care planning needs to identify the family hierarchy and elicit the patient's desire to participate in decision making.
- Acknowledging that traditional filial piety can influence families to pursue intensive End of Life (EOL) treatments that conflict with the patient's desire for comfort-focused care can build respect and decrease the medical team's moral distress.
- Chinese culture inherently respects physicians, so it is important for clinicians to build a trusting relationship, provide a safe space to discuss difficult topics or mediate conflicts, and feel comfortable making medical recommendations.
- Accurate translations are critical to accessing palliative and hospice services.

Actionable Steps:

- Use interpreters to discuss sensitive topics such as EOL care and to accurately describe palliative care and hospice care. Prepare interpreters ahead of time that the conversation may be emotionally charged.
- Discuss advance care planning with Chinese patients using indirect approaches to avoid offending the patient and family.
- Engage chaplaincy to help support patients through using plain language and a practical approach when introducing the service.
- Ensure family members feel included and are knowledgeable about the patient's condition.

Conversation Starters:

- What could be some reasons for a patient's family to request the medical team to not tell the patient about their medical condition? Who should discuss code status and with whom?
- How could hospice staff utilize resources to clarify the wishes of the patients and their families?
- What could hospice staff do to communicate the patient's needs and develop a mutual understanding while building trust with the family?
- What other techniques have you used when working with families who honor traditional values such as filial piety and family responsibility?

Participant Perspectives:

- "The tips shared so far, especially the role of the family and the need to explore and respect the family hierarchy," are important concepts.
- "The concept of an indirect approach to talking about ACP (Advance Care Planning) is something to learn more about. In general, the best practice is to ask what the pt/ family know or understand before



sharing any information, as well as asking permission before sharing information. I wonder how the "indirect" approach fits into this model."

- "More times than not, patients already know that they are dying, when the family thinks they don't know."
- "Also wishing we could get away from "DNR (Do Not Resuscitate)" and adopt the Allow Natural Death (AND)."
- "He may feel great responsibility as the oldest son and so we must provide support and remain neutral with the siblings, but work in such a way to advocate for the patient and what she wants with the son."
- "Are there any important/highly valued rituals that are important to keep in mind, encourage, or understand with those experiencing serious illness or EOL?"

Additional Resource:

Top Ten Tips Palliative Care Clinicians Should Know About Caring for Chinese American Patients: [Top Ten Tips-Caring for Chinese American Patients](#)

References:

- Pan CX, Luo EJ, Wang E, Szeto DA, Lum H, Ma J, Chen Stokes S, Chan S, Wong C, Guo J, Wang L, Chang V, Crupi RS. *Top Ten Tips Palliative Care Clinicians Should Know About Caring for Chinese American Patients*. J Palliat Med. 2023 Mar;26(3):423-430. doi: 10.1089/jpm.2022.0470. Epub 2022 Oct 18. PMID: 36260416.
- Jia Z, Stokes SC, Pan SY, Leiter RE, Lum HD, Pan CX. *Heart to Heart Cards: A Novel, Culturally Tailored, Community-Based Advance Care Planning Tool for Chinese Americans*. Am J Hosp Palliat Care. 2021 Jun;38(6):650-657. doi: 10.1177/1049909121989986. Epub 2021 Jan 27. PMID: 33499666.
- Pan CX. GeriPal Blog: *Lost in Translation: Google's Translation of Palliative Care to 'Do-Nothing Care.'* [Lost in Translation: Google's Translation of Palliative Care to 'Do-Nothing Care' \(geripal.org\)](#)
- CACCC website. <https://www.caccc-usa.org/>
- CACCC End of Life Care Glossary: [EDUCATIONAL MATERIALS | CACCC \(caccc-usa.org\)](#)
- Chinese American Resource Guide: https://www.nhpc.org/wp-content/uploads/Chinese_American_Outreach_Guide.pdf
- Stanford Medicine, *Ethnogeriatrics website*. [Geriatrics – Ethnogeriatrics \(stanford.edu\)](#)
- NHPCO Access and Inclusion - <https://www.nhpc.org/resources/access-and-inclusion/>
- *Hospice Through the DEI (Diversity, Equity, and Inclusion) Lens: A Research Study Identifying Barriers to Hospice Care in Underserved Communities*, National Hospice and Palliative Care Organization.
- NHPCO Diversity Tools and Resources <https://www.nhpc.org/education/tools-and-resources/diversity>
- Culturally and Linguistically Appropriate Services (CLAS) <https://thinkculturalhealth.hhs.gov/clas>
- CMS Framework for Health Equity <https://www.cms.gov/about-cms/agency-information/omh/health-equity-programs/cms-framework-for-health-equity>





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