

EXPERTISE IN CREATING CULTURALLY CONCORDANT PALLIATIVE CARE PROGRAMS

Understanding our patient's culture is critical when caring for patients with serious illness, as culture impacts the way people perceive serious illness, suffering, death and dying through their own cultural lens. Yet the palliative care model is one that's based on white, Christian, middle class values, that are not the same values in many other cultures. Lack of a culturally based model of care seriously impacts the care of minority patients, as well as those from other cultures.

Developing Culturally Based Palliative Care Programs for Underserved or Underrepresented Groups:

Dr. Ronit Elk's research focuses on using Community Based Participatory Research, a method in which there is full partnership with underserved communities, to develop culturally based palliative care programs. The first such program in the US was developed by Dr. Elk and her team for rural Southern, African American and White elders. Palliative Care clinicians were trained by community members, and the efficacy of this program is currently being tested by an NIH-funded grant to Drs. Elk and Bakitas in three rural hospitals in three Southern States. With Dr. Elk's mentorship, this model has been replicated for communities in Ghana and Puerto-Rico, and will shortly be replicated in the US with Hindu patients. Dr. Elk's team is currently working with members of the LGBT community to create a culturally based program for older LGBT with serious illness.

Developing a Goals of Care Conversation Guide:

In partnership with members of the African American community, including pastors from leading churches, in Birmingham, Drs. Elk and Barnett are currently developing a culturally based Goals of Care Conversation Guide for clinicians caring for older African Americans with serious illness.

Training Clinicians in Culturally Based Palliative Care:

In partnership with members of the African American community, Dr. Elk has created a series of training videos for clinicians caring for patients with serious illness. Dr. Barnett has created a training program to accompany these, and clinicians are currently being trained using this model.