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Death: The Cross-Cultural Context

Source: https://ethnomed.org/resource/death-the-cross-cultural-context/

Note On Assessing Culture:

- A person who identifies as a member of a particular ethnic group or religion does not necessarily possess the set of beliefs associated with that ethnicity or religion
- An assessment on how acculturated a person and their family are (speaking/listening/reading language, etc.) is key

African American

Source: https://geriatrics.stanford.edu/wp-content/uploads/2014/10/african_american.pdf

- · African Americans may be reluctant to participate in end-of-life care due to general mistrust of the healthcare system based on past (and current) history of segregation
- Believe that God is in control in determining the timing of one's death
- Tend to favor aggressive life prolonging treatment in the case of terminal illness more than White groups
- Providers should be particularly sensitive to issues regarding refusal or withdrawal of tube feedings as older adults may request tube feeding even in the face of terminal illness

Cambodian

Source: https://ethnomed.org/culture/cambodian/

- Many Cambodians are Buddhist
 - Life does not end with death
 - Reincarnation
 - Monk is often invited to recite sermon at bedside of dying patient
- Family undertakes care of body
 - o before cremation, family keeps body at home for 3-7 days
- Traditional practice does not allow autopsy, organ removal or embalming
- Many elders prefer to return to Cambodia for the end of their life can be honored at death in traditional ways
 - o Returning to Cambodia is not financially feasible option for most people

Chin

Source: https://ethnomed.org/culture/chin/

- · Christian funeral and burial
- No funeral homes in Chin Hills
 - Body is instead wrapped in puan (traditional Chin blanket)
 - then placed on a bed in the family home for 1-3 days
 - visitors come to pay their respects during this time
 - after waiting period, body is given burial ceremony at the cemetery

Chinese

Source: https://inelda.org/the-chinese-approach-to-death-and-dying/

- In Confucian tradition, death should not be feared (if one lived a moral life)
 - o Confucius did not explicitly discuss an afterlife, eternal life, gods, or spirits
- Taoists accept death as a natural part of life
 - Life is an illusion, death an awakening
 - A person achieves immortality after death if they lived a moral life
- Because of filial piety, Chinese children may push for aggressive treatment throughout their parents' illness (to honor their parent and follow tradition)
- Chinese people have profound respect for doctors
- Dying at home is viewed to bring bad fortune

Eritrean

Source: https://ethnomed.org/culture/eritrean/

- When someone is dying, it is best to first tell a family member or next of kin
 - o this person may be able to provide advice on how to approach patient
- Often a group of close friends or family goes to the house of relative/spouse of deceased
 - o group will inform them of death and offer support
- Traditional mourning period: up to 2 weeks
 - o modern mourning period: a weekend
- Mourning ritual involves someone crying loudly to spark emotional responses and move the grieving process along
- Do not practice cremation, instead bury their dead
- Often families wish to send deceased back to Eritrea for burial (expensive however -\$20,000+)
 - This tradition is fading

Ethiopian

Source: https://ethnomed.org/culture/ethiopian/

- Death is community responsibility
 - Citizens pay monthly fee for a burial society membership
 - When there is a death, burial societies take charge of organizational details of funerals
 - o For 3 days after death, the family does not have to do anything except mourn
- Delivery of news of death is one of the largest issues of difference for Ethiopian communities
 - o In Ethiopia, the immediate family usually is not told right away about a death
 - o Often an elder is called to deliver the news at the right time
- In the US, a close friend or family member is told first (usually an elder)
- Funeral home washes the body and the family bring the clothing
- Autopsies and organ donations are not influenced by the culture but is a family/individual decision
- Resources for cultural clarification, guidance, and translation:

Community House Call Program

Supervisor, Lea Ann Miyagawa, 206-744-9256 Caseworker Cultural Mediator (CCM), Amharic-speaking, Yodit Wongele-Mengist 206-744-9266

Ethiopian Community in Seattle

8323 Rainier Ave S, Seattle, WA 98118 (206) 325-0304

Hmong

Source: https://ethnomed.org/culture/hmong/

- May be important for terminally ill patients to return home to die, so that the soul does not wander and can be reincarnated
- May refuse autopsies
 - Belief that intact body parts and organs are needed for smooth reincarnation
 - Also, rumors that organs are taken out for eating and for sale

Japanese American

Source: https://geriatrics.stanford.edu/wp-

content/uploads/downloads/ethnomed/japanese/downloads/japanese american.pdf

- Common saying that Japanese people are born Shinto but die Buddhist
- In Shintoism, terminal illnesses, dying and death are considered negative and impure and akin to contamination
- It is said that Japanese people often come to embrace death as a natural part of life (Buddhist belief)

Karen

Source: https://ethnomed.org/culture/karen/

- Indigenous to Thailand-Burma border region
- Saying "no" is often a way of being modest
- Organ donation is very foreign one's body should be kept intact upon death
- Christian Karen buries their dead
- Buddhists and Animists perform cremations

Latinx

Source: https://www.caped.co/fall-2018/death-and-dying-latino-a-cultural-view-of-death/

- Expression of grief is a common and accepted practice especially during a loved one's end-of-life care or death
 - Crying and wailing are seen as signs of respect and love
 - However, men are expected to remain reserved
- Latinx people experience grief more deeply and intensely when compared to other cultures
- · Believe in continued relationship between living and dead
- Before-death rituals involve calling a priest for last rites, baptizing, or prayer
- Latinx children are socialized and exposed to death early on
 - o Death is portrayed regularly throughout Latinx art, culture, and history
- Catholicism is dominant religion

Source: https://www.alivehospice.org/news-events/culture-and-death-latin-and-hispanic-heritage-month/

Spain

- Common for deaths to occur at home
- Catholicism is dominant religion

Mexico and Central America

- People embrace death as a part of life
- Funerals blend Indigenous and Catholic traditions
- Día de Los Muertos (The Day of the Dead) combines remembrance of dead loved ones with family and community bonding

Caribbean Islands

- In Puerto Rico, standing funerals are common where the deceased is posed in a way that reflects the life they lived (poses include the deceased playing games, riding a motorcycle, or dressed up as a superhero)
- Spiritual beliefs are often a mixture of Catholicism and Santeria
- Hispanic/Latinx elders do not make end-of-life decisions autonomously
 - o Instead, decisions are made in a familial context
 - Usually with reliance on the physician for guidance

Source: https://geriatrics.stanford.edu/ethnomed/latino/delivery/hospice.html

Native American

Source: https://www.alivehospice.org/news-events/culture-and-death-native-american-heritage/#:~:text=Mourners%20bathe%20and%20dress%20the,along%20with%20any%20remaining%20possess ions.

- Beliefs vary depending on tribal nations and villages
- Common thread is that death is considered a natural part of life
- They believe in a spirit world (Wakan Tanka)
- Fear or acceptance of death depends on the tribe

Source: https://geriatrics.stanford.edu/wp-content/uploads/downloads/ethnomed/american_indian/downloads/american_indian.pdf

- Calmness and humility are valued over speed and self-assertion/directiveness in communicating with older Native Americans
- Many older Native Americans exhibit a basic distrust of the western healthcare system based on historical abuses
- Some Native American cultures do not speak of death or dying believing that doing say may manifest a negative outcome
 - Speaking the name of a deceased may delay that person's journey to the next world
- General preference for naturalness and home care is preferred for end-of-life care
- Generally, do not desire organ donation or autopsy

Native Hawaiian and Pacific Islander

Source: https://geriatrics.stanford.edu/wp-content/uploads/downloads/ethnomed/hawaiian_pacific_island.er/downloads/hawaiian_american.pdf

- Important to note that the Native Hawaiian and Pacific Islander population is extremely diverse racially and ethnically
 - Avoid stereotyping!
- Native hawaiians may try to establish a connection and sense of trust with the provider by asking questions about the provider
- As a loved one approaches end-of-life care decisions, the family often prefers to have the loved one at home
- All family members may want to be a part of end-of-life care decisions (due to importance of 'ohana)
- Sometimes fear that talking about a living will may hasten one's death
- May not be open to donating or accepting organ transplants

Nepali-Speaking Bhutanese

Source: https://ethnomed.org/culture/nepali-speaking-bhutanese/

- At time of death, members of deceased person's immediate family spend 13 days in formal mourning
- Men and women must be separated during these ritual

Oromo

Source: https://ethnomed.org/culture/oromo/

- In Oromia, community supports the family of the deceased person
- Support includes money, time, and physical labor

Pakistani

Source: https://geriatrics.stanford.edu/wp-

content/uploads/downloads/ethnomed/pakistani/downloads/pa kistani american.pdf

- Decisions are made collectively
- Active end of life care planning is often an unfamiliar concept to most Pakistani older adults
- Maintaining a prolonged period in a vegetative state is not encouraged in Islam
- May have a strong preference for same-sex nursing staff

Somali

Source: https://ethnomed.org/culture/somali/

- Important to tell immediate family first if there is a poor prognosis
- If a patient is terminally ill, it is best not to offer a timeframe for when death might occur
- Provider could instead say "According to us, we have done all that we can."
- Somali patients may prefer same-gender medical staff
- May appreciate detailed information about medications and procedures
- Life support is very controversial in Somali culture and religion
- May have complicated spiritual issues surrounding it
- Appreciate every effort to preserve life, but controversy over at what point life support may interfere with God's will and extend life artificially
- Organ donation is not traditional, but Somalis still would like to be given the option
- Somali funeral traditions
- https://ethnomed.org/resource/somali-funeral-traditi