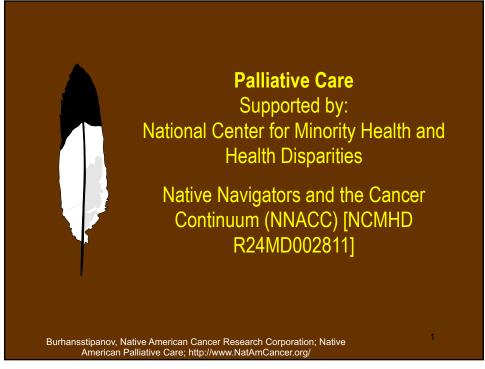
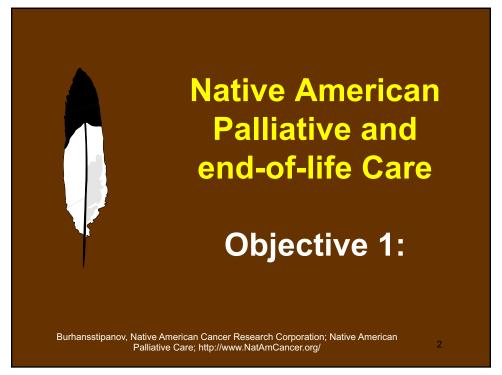
Native American Palliative Care - obj 1-2 Overview

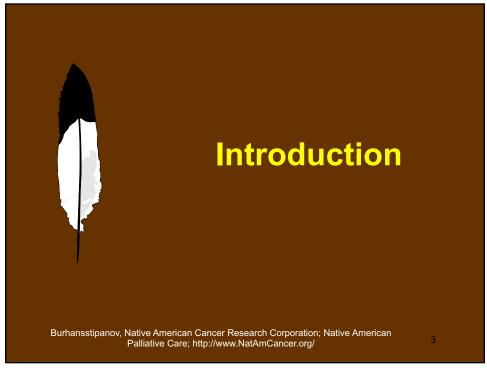


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Objectives: By the end of this session, the participant will be able to:

- Describe what palliative care is and how it helps the patient.
- 2. Describe what types of care are included in palliative care and who is the likely recipient of palliative care.

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What is palliative care? It is:

- →Pain and symptom management and is often provided for chronic illness as well as at end of life.
- Can be provided at home with the help of family members.
- ◆Is care that can last for years, even decades. It relieves the patient of pain and symptoms of long term illness, and end of life pain.

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What does palliative care look like?

- Taking treatments designed to cure your illness and/or to prolong your life.
- Being able to manage your pain or being pain free.
- Being at home or in a comfortable environment surrounded by loved ones and the things that make you feel safe and protected (feathers, drum, totem)

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Pain Management and Palliative Care throughout the cancer continuum

- Daily oral medication (narcotic or non narcotic)
- Daily and/or weekly injections of pain medication or steroids
- Regular use of hot and cold compresses
- Traditional Native pain management techniques

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It can also mean the following:

- Surgery recovery and rehabilitation
- Transfusions of blood and blood products
- Drugs and antibiotics
- Artificial feeding and hydration
- Electric Shock and heart
- Stimulation (drugs)
- Breathing tubes

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Quality Palliative Care allows you to...

- Concentrate on living life
- Be able to be free to pray and feel spiritual comfort and love from the Creator
- Be with your partner, children, grandchildren, nieces, nephews, friends

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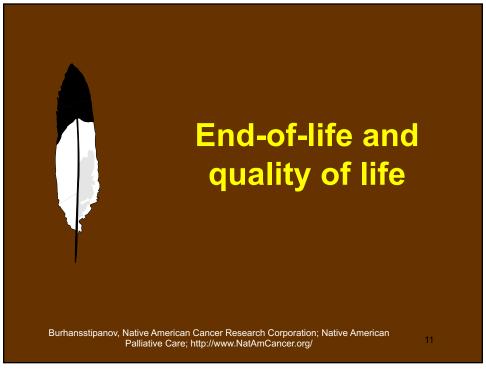
Quality Palliative Care allows you to...

- Be able to do physical activities with little or no discomfort
- ■Be able to think clearly
- Focus on life rather than your illness
- Be able to remember all of the good things that have happened in your life

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What is quality end-of-life care? Quality end-of-life care is care that addresses pain and remaining illness symptoms when there is no treatment that can cure a patient or prolong their life. End-of-life care is often called Hospice Care or care for those who are terminally ill. Burhansstipanov, Native American Cancer Research-Corporation: Native American Palliative Care; http://www.NatAmCancer.org/



What is quality end-of-life care?

- Hospice Care can also be provided in a Hospice Center, Assisted Living or other Center or Hospital.
- Hospice Care can be provided at home with the help of family members, often under the guidance of a hospice nurse.

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Quality end-of-life care

- Does not include disease treatment or life prolonging measures.
- Does include pain management.
- Does focus on the whole being of the person
- Does address all four aspects of their life: physical, mental, emotional and spiritual.

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Quality end-of-life care needs to: Focus on the whole being of the person Address all four aspects of their life: physical, mental, emotional and spiritual. Be available in the home Be supported by Hospice Care Staff Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/ Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/ Address all four aspects of their life: physical, mental, emotional and spiritual. Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/ Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/ Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/

End of Life for American Indians

Most Indigenous Peoples die at home
Many Indians are cared for by family
members during end of life care.

Many Indians are in pain when they die
(There is help!)



End of Life Caregivers

- Family caregivers are very important to both palliative care and end-of-life care.
- Family caregivers need to be sure to take care of themselves and share the load that they carry. Siblings need to work together to build a schedule that protects everyone.

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Quality Pain Management

Managing pain is easier with lighter pain. Therefore, many healthcare providers suggest that you try to treat pain before it gets severe. It usually takes less medication and the pain often responds to other methods of pain control.

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Quality Pain Management

- Quality pain management can include medication both oral, through shots and intravenous. It can also include the use of hot and cold compresses.
- When managing pain, treat the whole person, and treat the pain before it gets hard to handle.

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The Medicine Wheel

For most American Indians, quality endof-life care focuses on the whole being of the person.

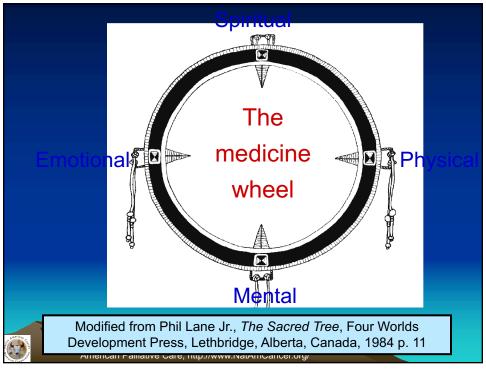
The medicine wheel is also a reflection of what the person needs to be comfortable in end-of-life care.

Is not used by all American Indian tribes however it is universally accepted as a cultural expression of life in balance.

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Physical Area Inform the patient about choices of care such as home care and/or hospice Review your physical surroundings. How safe are the physical surroundings How can they be made more safe Medications Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/

Physical Area Pain management Nutritious foods Physical activity Appearance of self (make-up, nails, hair, clothing, etc.) Water and other beverages (feeding tubes) Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/

Pain Management

Pain can be managed with medications such as pills, shots or intravenously.

- Pain can also be managed with heat and cold compresses.
- Patients should try to manage pain before it gets to sharp. This way less drugs and medications are used. Always consult with the doctor about pain medication and never take someone else's medication.

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Mental Area Thoughts of self, one's life and death Worries about how the family will thrive Mood swings (happy <-> depressed) Contentment about one's life and family Ability to think clearly

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Mental Area Creating a schedule of tasks, visitors, spiritual healers visits &/or ceremonies Keeping track of how medications or other situations affect the sick person's ability to concentrate or remember things. Creating an opportunity for the sick person to discuss Living Will and Final Will with family members Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/



Emotional Area Socializing with family members and friends Doing ceremonies Having some "alone" time Having good communication among loved ones, caregivers and doctors Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/ Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/ Socializing with family members and friends

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Emotional Area

- Organizing relaxing, healing activities such as reading, writing, listening to music and doing crafts.
- Sending out cards and letters and keep track of special occasions of loved ones (e.g., relatives birthdays) so that they are not forgotten.
- Providing a comfortable and welcoming setting that encourages others to sit and listen to stories or visit.

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Spiritual Area Creating a setting and opportunity for the patient to discuss spiritual needs. Working with the head spiritual authority/elders to make certain things are done properly. Getting permission from the hospital to burn sage, cedar, sweetgrass, etc. Last rites and tribal ceremonies/body preparation Burhansstipanov, Native American Cancer Research Corporation; Native American Palliative Care; http://www.NatAmCancer.org/ Creating a setting and opportunity for the patient to discuss spiritual needs. Working with the head spiritual needs. Working with the head spiritual needs. Substitute the patient to discuss spiritual needs. Working with the head spiritual needs. Substitute the patient to discuss spiritual needs. Substitute the patient the patient to discuss spiritual needs. Substitute the patient to discuss spiritual needs. Substitute the patient to discuss spiritual needs. Substitute the patient the patient



Summary of Palliative Care

- Quality Palliative care supports the family member in finding balance within the four areas of the medicine wheel while living with chronic illness and pain.
- Family is very important.

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Summary of Palliative Care

- Palliative Care does not extend or lengthen life. Palliative care provides comfort care and manages symptoms.
- Hospice Care is end of life care.
- Some people receive hospice care at home while others receive care in a center or hospital.

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