Tips for Nurses: First Australians – Communication

PAILIATIVE CARE AGED CARE EVIDENCE

What it is: Appropriate care for Aboriginal and Torres Strait Islander peoples is person-centred and meets their needs, expectations, rights, and those of their family. Cultural safety further provides people with power to influence care and support positive patient-centred outcomes. Communication is central to providing safe and appropriate care.

Why it matters: Aboriginal and Torres Strait Islander peoples have high risk of life-limiting conditions including cardiovascular, kidney and respiratory disease, and dementia. Communication with nurses supports the person and their family to influence care decisions.

What I need to know: For Aboriginal and Torres Strait Islanders, 'family' members may not be related by blood but be related through traditional kinship or cultural groupings.

If an Aboriginal or Torres Strait Islander patient is close to death, it is important that they do not die alone. Family presence is culturally important.

Building good relationships is important. Listen more than you speak. Introduce yourself and begin by simply 'having a yarn'.

Post-death practices or requirements will differ across communities. If these are not met, there can be significant cultural consequences and distress caused to the family and the community. If an Aboriginal or Torres Strait Islander person dies away from country, it is important to have the details of the correct family member who plans to escort the deceased back to country.

Acceptable terms to describe Aboriginal and Torres Strait Islander peoples are Aboriginal person, Torres Strait Islander person, and First Australian.

Actions

Ask the person if they want to hear information about what is happening now; or whether they prefer you to talk to family members instead.

Ask who has the right and obligation to make decisions on behalf of the person; this may not be the 'next-of-kin'.

You might like to ask:

- 'Are there cultural or spiritual practices that affect the way you wish to be cared for?'
- 'How can I provide the best care for you?'
- 'Are there other people that should be included in talks about your health care?'

Tips for talking together:

- check the person's understanding of what you're saying
- don't be too direct as this may be seen as confrontational and/or rude
- some people culturally avoid eye contact, even if they're not looking at you they may still be listening
- deal in practical, real issues, not uncertainties
- talk about what is happening now rather than the future or past
- avoid questions requiring a 'yes' or 'no' answer
- be a listener more than a speaker
- take time to build relationships.

Tools

The Kimberley Indigenous Cognitive

Assessment - a culturally sensitive tool developed to access the cognitive function of older Aboriginal people living in rural and remote areas.

My reflections:

When I first meet with an older Aboriginal or Torres Strait Islander person what could I do to make them feel comfortable?

What should I remember when talking with First Australians?

My notes:

See related palliAGED Practice Tip Sheets: Culturally Responsive Care – Communication People with Specific Needs Person-Centred Care

For references and the latest version of all the Tip Sheets visit www.palliaged.com.au/Practice-Centre/For-Nurses



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