

# Holistic care for patients from Asian communities

Erica Brown MEd MA(dist) DipSEN Head of Research and Development in Education and Care, Acorns Children's Hospice Trust, Birmingham

**'When people see me they simply see an Asian woman. What I would like is to be seen as a normal human being with normal feelings, wants and needs. I may have different cultural perspectives but I still buy my knickers at Marks & Spencer. Don't section me off and treat me differently. I don't want to be put in a different category from white British people.'** (Hexley and Schott)

Each of us will have had exposure, to some degree, to other cultures in our own society and to societies from other cultures. Almost certainly, we will have encountered attitudes of prejudice and disregard for the beliefs, faiths and cultures of others.

True care responds to the uniqueness of the individual. It means being sensitive to spoken and unspoken needs, and demands a response that is neither prescriptive, judgemental nor dogmatic. Information about different cultures is only useful if it is relevant, comes from reliable sources and is based on the philosophy that all cultures have intrinsic worth and deserve equal respect. Most healthcare professionals usually encounter patients briefly when they require medical attention. Therefore, meetings with them make up only a small part of their life. Learning about their culture can help us to gain greater insight into their needs and to respond more appropriately.

The term 'South Asian', or more commonly, 'Asian', is used widely in healthcare to refer to people whose families originated in the Indian sub-continent (India, Pakistan and Bangladesh). Almost half of the South Asians in Britain were born here and



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many are the children and grandchildren of immigrants. The label South Asian is used to define a 'racial group' that contains tremendous diversity in terms of origins, religions and cultures. Many stereotypes are belittling, one-dimensional and even hostile. Therefore, care based on stereotypes is often inadequate and lacking in insight. Physical features reveal little of the qualities and attributes that make up each human being. They convey nothing about a person's background, education, beliefs, experience, knowledge, skills or needs, but they often affect the way that people are treated.

Mutual dependence and support are valued in South Asian communities, and family members will often express

a wish to be involved in a patient's care. In some communities there are strict codes of behaviour between the sexes to preserve respect and morality. Men and women may prefer to remain physically separate in public, and female patients may be chaperoned by a female family member at appointments. Bodily functions or aspects of intimate care may not be discussed between men and women.

## Meeting holistic needs

Caring professionals are likely to be familiar with the term 'holistic care', and to be aware of the importance of meeting people's physical, social, emotional and spiritual needs. It is part of the role of a healthcare professional to strive towards enabling each individual to accept and value themselves, allowing them to make sense of being a new ostomist so that they are able to discover their own way forward in a manner that is acceptable to them. When people are ill they often find themselves in uncharted territory, feeling threatened by being in hospital in unfamiliar surroundings and being separated from their family and friends. These fears may make it hard for them to trust the people who care for them. Questions may arise such as, 'Will I be able to cope with a stoma?', 'Will I continue to be an effective husband, wife or parent?' and, 'How will the community to which I belong perceive my surgery?'

All planned stoma surgery poses patients with challenges and decisions. For Asian patients, it is important to discuss where the stoma is to be positioned so that, if possible, traditional dress can still be worn after surgery. If



surgery is unplanned choices may have been taken away, such as where the stoma is to be sited.

### Ablutions and personal hygiene

Most religions and cultures address aspects of purity and pollution. In South Asian communities all bodily secretions are considered polluting, with running water believed to be the most effective way of cleansing. Water from holy places or water that has been blessed may be of particular importance, bringing spiritual comfort in addition to physical cleansing.

People may find their stomas embarrassing, and will wish to wash and change their appliance before praying. It is not unusual for people to feel spiritually unclean as well as physically dirty if they are unable to wash, although some cultures limit bathing during illness. Many patients may prefer showers to baths so it is important to ensure that washing facilities include running water. For reasons of modesty, some people will prefer to wear their underclothes while showering, putting clean dry clothes on when they have finished. Many religious traditions have symbolic washing rituals, and most South Asians wash with running water after using the toilet.

Proper skin care is important for patients' morale and dignity and, where possible, a person's normal routine should be maintained. Different skin types require different care. Hard water, illness or medication can affect dark skin adversely, and it can be difficult to notice skin soreness or breakdown around a colostomy site.

### Modesty

Standards of modesty vary. Each person will have individual needs, and respecting this will help to preserve their self-esteem and to reduce anxiety and stress, particularly when carrying out rectal examination or collection of stool samples. Clothes are important factors in identity and are often influenced by cultural and religious values. It is a good idea for patients to wear clothes that make them feel comfortable and preserve their modesty when

attending appointments. Some communities observe religious requirements in relation to clothing. Women traditionally cover their legs, upper body and upper arms, and some women will wish to cover themselves completely at all times. Therefore, hospital gowns may be considered immodest and degrading. Men traditionally cover themselves from the waist to the knees and nakedness (even in the presence of other men) may be considered humiliating. Some communities may consider that a nurse or doctor of the opposite sex should never treat patients, except in an emergency. Healthcare professionals should ensure that a patient's wishes to be cared for by a person of the same gender wherever possible are respected.

### Diet

Food is not simply a matter of nutrition; it often has deep personal significance. What people eat and how they eat it may also reflect social and religious occasions, in addition to being a focus of interest and pleasure and a symbol of health, emotional wellbeing and security. Indeed, many cultures have strong beliefs about what people should eat or avoid eating to keep healthy. People need food that is acceptable and appetising to them.

Diet among South Asian communities is varied and the term 'Asian diet' is a misnomer. In many communities, fasting is thought to bring spiritual and physical benefits, and some patients will wish to fast before or during religious festivals, or in thanks for a successful operation. Nutritionists should

listen carefully to patient preferences before advising on diet. Often, colostomists are told to avoid spicy vegetarian foods that may cause an excess of gas. However, patients should be able to eat spicy foods in moderation, if accompanied by bread, chapattis or rice. Perhaps the best advice is for patients to judge for themselves which foods can be eaten freely and to notice which ingredients in dishes cause an undesirable reaction.

### Patient-centred care

Assumptions about what is or is not acceptable in the patient-professional relationship are generally unstated. If the two sides have different expectations, it is easy for one or both to become anxious or offended and for them to lose trust in each other. Holistic care means that professionals need to be willing to allow the agenda to be set by the patient. Asking people what they need requires courage, but unless we are prepared to take the risk we will never find out what they really do need.

#### About the author

Erica Brown is Head of Research and Development at Acorns Children's Hospice Trust in Birmingham. She has been a teacher and senior manager in schools and universities and has published in the fields of special education, religious and cultural education and the effects of loss and change on people's lives. She has had a colostomy for ten years and is fed by liquid nutrition.

## Key points

- Patients should be able to expect healthcare professionals to try to respect their modesty when carrying out examinations and, if they specifically request it, to be cared for by a person of the same gender wherever possible.
- It is a good idea for patients to wear clothes that make them feel comfortable and preserve their modesty when attending appointments.
- Spicy foods tend to cause excess wind, but may be eaten in moderation if accompanied by bread, chapattis or rice.