

Culture Sharing: Death and Dying in North India

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Background

Harriet Benson Memorial Hospital (HBMH) is a charitable organisation delivering health care services in rural North India. Following a review of its palliative care services¹, St Columba's Hospice funded a 10-day development visit by a Community Palliative Care Clinical Nurse Specialist and Practice Development Facilitator.

Our Visit

The first few days were spent building relationships and trust through adopting a positive enquiry approach. As Hindi was the first language it fell to a nurse from the palliative care team to translate for us. We shadowed the team whilst out on community visits and during inpatient care episodes. When out in the community, the palliative care team also took every opportunity to deliver health education sessions on cancer prevention (see figure 1).

Our Learning

We were humbled by what can be achieved with very limited resources and a 'can do' attitude in a rural setting and a low-income country. Clinical and non-clinical staff worked side by side with the patient and family. Death and dying was open and transparent, nothing appeared to be hidden around the time of death or in the immediate period following death (see figure 2). What was evident throughout the whole Hospital community was the richness of the spirit and support gained through shared Christian values. This was reflected in the palliative care team and there was a sense of peace and calm gained through joint worship every morning.



FIG 1.
Health education: highlighting the risks of chewing tobacco sometimes with children as young as five years old.

Their Learning

Many areas of extraordinary practice were identified along with areas for development; current practice reflecting the Hospice UK (2009) toolkit for resource limited areas². The main areas for development and learning were assessment and management of different pains, identification of depression, development and introduction of a holistic top to toe assessment tool and clinical record keeping.

The Plan

- To continue to support this remarkable team and the work that they do by further visits to reinforce learning, evaluate work to date and identify further areas for development.
- To reflect on the open and transparent culture of death and dying in India and pose the question "can we say the same about Scotland?"



FIG 2.
Non-clinical staff joining clinical staff in carrying out care after death, outside in the Hospital grounds, in the presence of the deceased person's family.

References:

- ¹Help the Hospices (Now Hospice UK). *Palliative Care Tool Kit*. Help the Hospices: London
- ²Haraldsdottir, E. and Mundy, D. 2015. *Evaluation of the EHA Palliative Care Project Funded by EMMS International*. Edinburgh.