The Asian American population has a growing influence and presence in the United States. As a diverse group, Asian Americans represent at least, 20 different countries and 60 distinct ethnicities. Immigrants make up two-thirds of all Asian Americans. Influenced by an array of experiences reflective of country of origin and ethnicity, Asian American’s beliefs, values and practices create a distinct construct that shapes the way Asian Americans view illness, suffering, and dying in the context of Western culture.

In the United States open communication and patient autonomy are important elements in the delivering of quality care. These fundamental elements are in stark contrast to the Asian American belief systems. The dichotomy between Asian American and Western perspectives often leads to miscommunication between Asian patients and their healthcare providers. Therefore, it is important to recognize and respect the differences that exist. Thus, Asian American attitudes towards care and caring near the end of life can be understood in terms of cultural traditions, communication style, and health perspectives.

**Cultural Traditions**

Traditionally, the Asian family is an extended, interdependent social unit where children provide emotional and financial support for their aging parents. Filial duty is the expectation that children, in gratitude for their parents’ caring and sacrifices, will care for their parents when they can no longer take care of themselves.

Asian Americans are reticent to use nursing homes and hospice care because it makes caretakers feel that they have failed in taking care of their own family and honoring filial duty.
Communication Style

Asian Americans are reluctant to discuss death and treatment issues because their belief system tells them that talking about it may tempt fate into hastening death.

When it comes to disclosing serious diagnoses, withholding information is highly preferred. Asian Americans, wanting to protect loved ones from suffering unnecessary emotional distress, believe that knowing the truth causes more harm than good. Avoiding truth telling is a way of keeping hope alive for the patient.

Nonverbal communication is commonly understood as a vital means of interpersonal connection. Asians are more likely to show their support to a dying loved one solely through their actions rather than ever talking directly about how they feel.

Health Perspectives

While Western medicine emphasizes patient autonomy, Asians perceive decision making as primarily the responsibility of the family of the dying patient, not the individual. Asians feel that the patient must be protected from the burden of making difficult choices about medical care.

Asians place a high value on honor, especially on achieving and maintaining honor within a family. Seeing psychological illness as a source of shame to the family, Asians have difficulty accepting the diagnosis of mental disorders, such as learning disabilities and depression and will tend to deny treatment for such diagnoses.

Buddhism, which is widely practiced in Asia, values suffering as a means of spiritual growth and development. Asians who practice Buddhism may decide to delay or even avoid getting pain relief from illnesses.

For more information contact:
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Rallying Points is an initiative of The Robert Wood Johnson Foundation’s Last Acts campaign to improve care and caring near the end of life.