



CANCERcare®

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fact sheet

FOR HEALTH CARE PROFESSIONALS: CULTURAL HUMILITY IN CANCER CARE

As a health care professional, you always want to help your clients and patients achieve the best care—but different people can have different interpretations of what “the best care” means in relation to individual identity. These conversations—with colleagues, with ourselves and with clients—are critical to determining what “the best care” can and should look like for each case.

WHAT IS CULTURAL HUMILITY?

When interacting with a client, they may be resistant to a recommendation that you find clinically obvious. In these cases, it’s important to take a “culturally humble” approach to finding out the root of this resistance. Cultural humility is the ability to remain open to aspects of a person’s cultural identity that differ from one’s own. It centers the role of beliefs, values, traditions and ideas and how they impact the decisions that clients wish to make. As a health care professional, being culturally humble involves critical self-reflection, recognizing and challenging power imbalances and the pursuit of institutional accountability.

Cultural humility builds upon previous movements in cross-cultural understanding. Cultural awareness promotes an understanding of how culture shapes thoughts, behavior, identity and interactions, while cultural competence highlights the attitudes, knowledge and skills that enable effective cross-cultural practice. Both are foundational to cultural humility, which is characterized by an openness to learning from the patient.

Put more simply, cultural awareness acknowledges differences; cultural competency offers strategies to bridge these differences; cultural humility contextualizes these differences within a broader framework for a patient-centered approach.

CULTURAL HUMILITY AND CANCER CARE

When discussing treatment options, priorities and quality of life, your client may express preferences that are not familiar to you. Consider how cultural or faith-based beliefs, values and traditions may factor into these reactions or choices, such as the following:

- **Family dynamics and gender roles.** A cancer diagnosis can reverse the dynamics of who is caring versus who is cared for, whether an adult child caring for a parent or one partner caring for the other. Consider other ways that cancer may disrupt existing household structures and gender roles that may be prevalent in the client’s community.



- **Shame.** Certain belief systems may connect past actions or karmic retribution to a diagnosis of cancer, leading to shame and stigma. Some clients may not be comfortable even saying the word “cancer” and may be reluctant to disclose a diagnosis with friends, employers or others. If a client is unwilling to have conversations about cancer with their support network, seek to understand the underlying reasons why.
- **Body autonomy.** Certain groups or religions may have specific beliefs around body autonomy and wholeness, which may be the basis for declining treatment options like stem cell transplants, transfusions and similar procedures, such as reconstructive surgery. The client should have the final say in what is right for them.
- **End-of-life.** An individual’s belief systems may affect their attitudes toward end-of-life planning and handling of dependents. Hesitance to discuss issues such as care decisions, estate planning and funeral arrangements may reflect cultural attitudes toward death; some consider it taboo to speak of them while the person is still alive.
- **Grief and loss.** Manifestations of grief vary widely. Maintain awareness of the assumptions you may make about a client who has experienced loss. What rituals do they observe around grief and mourning and who participates? Is grief expressed privately or publicly in their community? How does death affect family dynamics?

PRACTICING CULTURAL HUMILITY

The concept of cultural humility does not expect that one can ever be an “expert” on all experiences and all identities—in fact, the opposite is true. Openness can help make shared decision making a truly collaborative and cooperative experience. Like a yoga practice or a gratitude practice, using the word “practice” reflects an ongoing commitment to lifelong learning. Approaching client interactions with cultural humility can cultivate a more empathetic approach that values their personal wishes as much as medical standards of care.

Let the client guide your discussions. Listen actively, and take note of what is said and what is unsaid. Be open to discussing not only the aspects of their care plan but also what is important to them, and remember that questions are a powerful tool in the pursuit of understanding.

QUESTIONS TO ENCOURAGE CULTURAL HUMILITY

- What kind(s) of support does the client need from me?
- How can I invite the client into the conversation about their care?
- What assumptions am I making? How can I dive deeper into something that may seem clear-cut at first glance?
- If I have trouble understanding a client’s choice or viewpoint, what questions can I ask to learn more about the reasoning behind their choice?
- How can I validate the client’s choices?

CancerCare® Can Help

Founded in 1944, CancerCare is the leading national organization providing free support services and information to help people manage the emotional, practical and financial challenges of cancer. Our comprehensive services include case management, counseling and support groups over the phone, online and in-person, educational workshops, publications and financial and co-payment assistance. All CancerCare services are provided by master’s-prepared oncology social workers and world-leading cancer experts.

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