

# EXPLORING THE EXPERIENCES OF BLACK, ASIAN AND OTHER ETHNIC MINORITY HOSPICE SERVICE USERS

Authors: Dr Sarah Maan, Dr Leena Patel, Dr Corinna Midgley



## AIMS

To better understand the **Black, Asian and other Ethnic Minority** experience of our **hospice services** and to **identify ways** to ensure that our **services are inclusive for the local population**.

## BACKGROUND

National work identifies **risk of poorer access to palliative care services** for people **from ethnic minorities**. **Locally we identified that our referral rates did not reflect the palliative health needs of our most ethnically diverse borough**. Qualitative work was deemed essential to interpret this finding.

## METHODS

**Research ethics approval** for semi-structured telephone interviews **was granted**. **Patient information leaflets** detailing our aims and the option to opt out were **sent to individuals who met the inclusion criteria** (18 years and over, **identify as Black, Asian and other Ethnic Minority** and **accessed hospice services** between **September 2020-2021**).

On **telephone contact**, **consent was obtained** and capacity was checked. The **interviews were recorded**. The interview **comprised nine questions**, which were **designed with support from the research ethics committee** and from our **in-house research interest group**.

**Thematic analysis**, performed by **two researchers**, **independently identified patterns and codes** within the **interview transcripts**. Results were then **reviewed together to finalise themes**.

## IDENTIFIED THEMES

*"I didn't know"*

Promotion • Collaboration • Unfamiliarity of services  
Representation • Language

*"I have been listened to,  
I have been understood"*

Empowerment • Support • Information • Hope

*"They gave me courage"*

Awareness of culture • Connections/Relationships  
Heterogeneity • Discrimination • Diet • Social issues

## RESULTS

177

REFERRALS REVIEWED;

POTENTIAL PARTICIPANTS  
CONTACTED.

53

8

INTERVIEWS COMPLETED,  
2 BY PROXY.

Reasons for not interviewing included: not consenting, unable to contact, death, current admission, and incorrect coding.

## CONCLUSION

We learnt that most people were unfamiliar with the hospice until they had been referred. Overall, experiences were described as positive with individuals feeling listened to, supported and empowered. There was emphasis on the hospice needing to focus on promotion and collaboration, particularly with other health care providers, to reach Black, Asian and other Ethnic Minority communities.

### References

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