

**Prior D (1997) *Life-death-life: urban Aboriginal culture and palliative care*. Unpublished Master of Science thesis, Flinders University, Adelaide, South Australia.**

This thesis explored issues which must be considered for developing culturally appropriate palliative care services for Aboriginal people in urban communities. The aim of the study was to learn from Aboriginal people about these issues and therefore a descriptive ethnographic approach was used. The ethnographic methodology used for his study incorporated the theoretical perspective of symbolic interactionism and was informed epistemologically by social constructionism. This methodology was chosen because of its suitability to Aboriginal cultural beliefs and because the research methods enabled one to gain an emic view of an Aboriginal community. Data collection occurred over a total period of twelve months. The first nine months involved interviewing and observing staff from several Aboriginal health care centres, for the purpose of developing a relationship and gaining information which needed to be considered before progressing to more intensive fieldwork. A full-time period of fieldwork was undertaken at Waratah Nursing Centre [pseudonym], which is a residential care facility for elderly and sick Aboriginal people. The participants of this study were selected purposefully on the basis of their knowledge of Aboriginal culture and their experience with life threatening illness, either as a patient or health care staff. Data collection methods included interviews, observation, participation in the daily activities of the residents of Waratah and accessing additional sources of data from other staff and from other written documents. The Ethnograph computer program was used to manage and store the data and Spradley's (1979) Development Research Sequence model facilitated a systematic process of data analysis. Three cultural themes emerged as being relevant to the aim of this study. These were, i) Aboriginality, ii) the process of communication, and, iii) how people dealt with health problems. The theme of Aboriginality was constructed from several sub-themes that included, spirituality, history and cultural identity. communication included concepts of non-verbal expression, techniques such as, the pace of conversation, use of eye contact and questioning. The theme of dealing with health problems, incorporated experience and perception of hospitals and individual ways of dealing with health and illness.

The major finding of this study was the incongruence of Anglo-Australian approaches to palliative care with Aboriginal peoples' aspiration for self determination, their ways of communicating, and their social organisation associated with caring for their sick. Another key finding was that the concept of terminal illness, which is integral to the definition of palliative care, conflicts with the Aboriginal view of life-death-life as a continuum. Recommendations for improving cultural appropriateness of palliative care include, reviewing assessment procedures to give a more integrated holistic focus which reflects the Aboriginal view of *body-land-spirit*, and, having a culture-centered approach to grief counseling which recognises the significance of ceremonies and rituals. Another recommendation from this study is to improve the cultural awareness of non-Aboriginal staff by increasing education about Aboriginal history and culture. This strategy is recommended as a means of encouraging a closer liaison between mainstream services and the Aboriginal community health care staff, it would also have the effect of increasing Aboriginal influence on the future development of palliative care services.