

Social Sciences and Palliative Medicine: a New World to blend

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The combination of principles, practises and methods employed by palliative care medicine in treating terminally ill patients and increasingly shared by the international scientific community would appear to represent a “new paradigm” in both scientific and cultural terms. This is now gradually establishing itself within the traditional “biomedical” model. At the same time, great importance is attributed to the various psychological, emotional, social, cultural, spiritual, ethical and organisational aspects involved in assessing the needs of the patient and their family – and interpreted as the primary objectives for care and treatment in tandem with pain management therapy and treatment of symptoms with the aim of attaining maximum quality of life. Whilst on the one hand these factors contribute to an ongoing belief in the need to humanise medicine, on the other they have revealed the need to complement medical knowledge drawing on the experiences and methods applied by the human and social sciences (SHS) and when these are employed in tandem with medical/clinical treatment they bring about a positive change in the care and treatment processes.

Among these we can count the anthropology of medicine. In the last thirty years, this area has gradually attained the status of a discipline per se having originally been considered a secondary area of study to cultural anthropology and which now exists within the more general context of the treatment of the terminally ill. It applies the methods of clinical ethnography, ethnology and applied anthropology and has been acknowledged as having an important function within the overall care of the patient and their family. This is a result of the considerable possibilities and range of action it offers in the context of the enormous social, cultural, organisational and research implications that are involved in the new scientific paradigm represented by Palliative Care and the personal and social frontier constituted by the “total” event that death and the dying process are considered to be within every culture.

The creation in 1991 of the first public and secular hospice at the Istituto Geriatrico Pio Albergo Trivulzio in Milan represented and today still constitutes a significant stimulus to cross-disciplinary comparison and multi-professional exchange concerning the multiple practical aspects and considerations which the health sciences must take into account in this field that is so highly critical – yet innovative – for both medicine and society.

The paper will describe the aspects and considerations arising out of the application of ethnography, ethnonursing and transcultural nursing used in the traditional field of ethnology and assessment techniques employed in ethnography as applied to Palliative Care also to determine some cross-cultural standard in hospice.