

## **Dignity in the Chinese Context**

**Dr Candy Fong, Senior Trainer Officer**

It stands to reason that a concept like dignity will be influenced by socio-cultural context and practices. How would the people in Hong Kong, a city with its unique cultural characteristic of East meets West, understand a concept like dignity? Will there be any differences compared with the Dignity Model (with its three notable categories, including Illness Related Concerns, Dignity Conserving repertoire and Social Dignity [Chochinov, 2002]) as it is used in the western culture<sup>1</sup>?

A research team lead by Dr. Andy Ho (Ho, et al., 2013) conducted a study in the Hong Kong Chinese context, in which they had face-to-face interviews with 16 advanced cancer patients. While similarities did exist compared with the original Dignity Model (Chochinov, 2002), some remarkable differences were found in this group of Hong Kong Chinese patients:

1. Death anxiety was not so much a concern for the Chinese cancer patients. Advanced patients expressed little anxiety or distress towards their advanced diagnosis and imminent death. Instead, many of them felt the need to communicate about the diagnosis, which would then facilitate conversations on care planning.
2. Enduring pain is a virtue in Chinese culture. Although advanced cancer patients suffered from multiple physical symptoms, they often regarded these afflictions as an inevitable part of life and a reminder of living. In fact, tolerable physical discomfort was considered as a challenge of life, in which their moral and spiritual character would be strengthened.
3. Generativity/legacy is something that people want to pass on to others. In this group of Hong Kong Chinese patients, instead of passing on personal achievements, the passing on of values (moral systems) and traditions from generation to generation (sustaining the family spiritual lineage) was most important.
4. The patients' resilience/fighting spirit was about rallying against illness related concerns. Chinese patients no longer seemed to fight against their illness, but instead, they focused on enhancing their well-being and improving their quality of life. Not only did most of the patients accept their advanced diagnosis, they even experienced spiritual awakening with respect to the impermanent nature of life.
5. Transgenerational unity reflects a need to be connected with family. This unity does not only exist between core family members, such as a spouse and children, but also between grandparents and their grandchildren. Having grandchildren and maintaining close connections with them symbolizes family continuity. Hence, grandchildren played an important role during the final chapter of the patients' lives, as it gave the patients in this study

---

<sup>1</sup> For more details, please see article "Dignified Care" on the website for more details on the dignity model

a sense of existential wholeness and spiritual connectedness.

The interesting findings from Ho's study (2013) provide us with possible directions to enhance dignity for Chinese patients that suffer from an advanced illness. For example, 1) facilitating open communication about advanced diagnosis and care planning may be valuable to patients and family members. However, attention needs to be paid to possible distress (such as anxiety and depression) that could arise throughout the process; 2) in addition to alleviating pain and physical symptoms, it may be important to facilitate patients with the opportunity to explore how they interpret the symptoms and how they cope with these physical symptoms; 3) family time is very important for the well-being and quality of life of Chinese advanced patients, especially spending time with their grandchildren. Arranging sessions to allow patients to pass on their life wisdom and family moral values can be helpful to achieve a sense of wholeness.

#### Reference

- Chochinov, H. M., Hack, T., McClement, S., Kristjanson, L., & Harlos, M. (2002). Dignity in the terminally ill: a developing empirical model. *Social science & medicine*, 54(3), 433-443.
- Ho, A. H. Y., Chan, C. L. W., Leung, P. P. Y., Chochinov, H. M., Neimeyer, R. A., Pang, S. M. C., & Tse, D. M. W. (2013). Living and dying with dignity in Chinese society: perspectives of older palliative care patients in Hong Kong. *Age and ageing*, 42(4), 455-461