

The Council on Palliative Care

Inside this issue:

Events & Happenings	4
International Congress on Palliative Care—Volunteers Highlighted	5
How to contact us	6

Mitzie Begay, an elegant 76-year-old Navajo, can interpret the nuances of her language and traditions with contemporary verve and understated wit — qualities that make her a good fit for a job that could hardly have been imagined in the Navajo Nation a generation ago.

Ms. Begay, whose title is cross-cultural coordinator for the home-based care program at the Fort Defiance Indian Hospital here in northeastern Arizona, helps Navajos deal with the complex and confusing process of decision-making at the end of life.

In Navajo culture, talk?



Palliative Care, improving quality of life for patients and families.

“Our goal is not just to change the way people die,” he said, “but to change the way dying people live, and how their families experience and will remember the death.”

On this day Ms. Begay and Gina Nez, the program’s director of nursing, are bumping along in a four-wheel-drive S.U.V. to visit elderly patients in isolated communities. They drive past hogans, the six-sided traditional Navajo dwellings, past herds of cattle and sheep that dot the grass meadows.

“At first I was uncomfortable,” Ms. Begay said about her introduction to end-of-life discussions. “But the staff got together and we talked about it, and we agreed on a way to approach it.”

The vehicle was a poem: “When that time comes, when my last breath leaves me, I choose to die in peace to meet Shi’ dy’ in” — the creator. Written in both Navajo and English, it serves to open a discussion about living wills and advance directives.

Fewer than 30 percent of Americans have signed advance directives for health care. But Dr. Domer says almost 90 percent of patients in the program have signed the poem and other standard directives.

“Our elders tell us they want to die with dignity — the way they lived,” he said. “We’ve

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