



Nurses provide palliative care in various settings and with varying resources and training. [14] This list includes key psychological and emotional issues that should be assessed and addressed in palliative care: 1) assessment and treatment of psychological distress, 2) addressing the needs of the relative or caregiver(s), and 3) assessment and treatment of depression and anxiety. There is evidence in the literature about training programs in the psychological and emotional issues in palliative care. In one study, Kubota et al. (2015) implemented a psycho-oncology training program for nurses to teach topics such as the normal reactions of patients, detecting and managing clinically significant distress, and assessing suicidal thoughts and depression using multiple teaching pedagogies [15]. The results of this study demonstrated that nurses' knowledge and skills were increased with training. Pastrana, Wenk, De Lima (2015) used a workshop in another Latin America country, Colombia, to develop consensus-based palliative care competencies for undergraduate nurses and physicians [16]. The findings of this study described six categories of palliative care and included psychosocial and spiritual issues.

The ISNCC 2015 Palliative Care Statement states that the delivery of palliative care to cancer patients must be culturally sensitive and relevant to the country and context. Cancer nurses play a key role in attending to important cultural considerations, such as beliefs related to disease causation, stigma, diagnosis, treatment, side effects, end of life care and personal preferences [13]. In most cultures, decisions are made based on the family values and the needs of the patient but individual values may be unique to the patient and family and cannot be assumed based on the culture or religious and spiritual beliefs. It must be a willingness on the part of the nurses and palliative care providers to create time for open, sensitive discussions about the patient's and family's needs and concerns, separate from routine physical care.

## Psychosocial Communication in Palliative Care

Addressing psychosocial concerns is a core component of palliative care. The World Council of Nurses (WCN) is

nursing faculty for palliative care education in 2014 [20]. Given the need for palliative care including psychosocial care and symptom management, nurses require training in undergraduate education and practicing nurses need more advanced training [22,23].

In 2011 and 2012, the American Society of Clinical Oncology's