

End-of-Life Care is Everyone's Business

In the everyday perceptions of students and working Americans, end-of-life issues seem like an intrusion into our purpose-driven working worlds. Young people inexperienced with death and the processes of dying can be jolted when they first encounter the death or terminal illness of someone too dear for them to ignore. Later, when we are fully engaged in a productive phase of our lives, attending to our dying loved ones becomes a set of tasks we must work into our schedules. After discharging those responsibilities, we gladly run back to our normal work and home routines, which both distract us from death and recharge us with the energy of living.

End-of-life encounters can be an unwelcome requirement for maintaining relationships, or they can be a first journey into a world of loss and change that benefits both the living and the dying. When we open ourselves to a dying loved one -- or even a stranger we happen to meet on his or her deathbed -- we get a glimpse into a reality more charged with meaning than any work of fiction could ever present, and a chance to improve the last days of someone who may be surprised or relieved that their end is coming soon. The patient may have one of a number of motivations to interact with you: confession, reconciliation, fear of the unknown, hunger for companionship, or a reason as unique as the individual.

Whatever the motivation for reaching out, a person's last days and hours will cultivate the mindset he or she will have at death, as well as the mindset of the survivors approaching the new reality of permanent absence. These moments can bring forth sudden realizations and moments of clarity. While there is no script and no guarantee of an edifying event, the attempt generates its own path and its own reward in the experience of an encounter that cannot be initiated after death.

The final processes of dying can produce unpredictable interactions. Social norms dictate that we have minimal contact with the late stages of a naturally occurring death, because medical procedures take precedence over family contact, and in many cases the patient is already rendered unconscious by medication. Children rarely experience directly the death of a pet, because custom now encourages pet owners to "put down" a pet rather than endure the normal processes of an old cat or dog undergoing

organ failure and finally becoming still. However, death throes were and are a familiar sight in agrarian cultures, and people in developing countries are familiar with the emotional pain of seeing a loved one slip into the potential dementia and pain of a natural death.

We prefer to avoid the discomfort of these events, and children, in particular, should be protected from emotional trauma for which they are not prepared. However, without living such pivotal moments together with the dying, we are separated from an essential part of life, which is an experience of our loved ones' realities as they prepare to meet the unknown. The late Dr. Elizabeth Kubler-Ross, a pioneer in the science of death and grief, documented that profound experiences are frequent among those who engage with people who are dying. "Watching a peaceful death of a human being reminds us of a falling star." Kubler-Ross wrote. "One of a million lights in a vast sky that flares up for a brief moment only to disappear into the endless night forever." While the experience of such a sublime perspective may be difficult to convey with words, Dr. Ross' metaphor expresses a singular moment whose emotional power can be transformative for all involved. A falling star can produce tremendous emotion in an astronomical observer, but the transformative value of a personal experience with the ineffably unknown can be immeasurably more personal and meaningful.

--Joe Bauer