

Death & Dying: Talking to Your Loved Ones

Death and dying are not common topics of family conversation in American culture. Even when a loved one is critically ill, many families struggle with how and when to share their thoughts and feelings about death and dying with each other. National Health Care Decisions Day, happening on April 16th, offers an opportunity to approach these topics.

Conversations occurring before the end of life is experienced can help reduce the fear of dying. When fear is present, people sometimes try to keep the impending death a secret. Individuals and families may react in this manner for several reasons:

- Fear that the patient will respond to the news by “giving up”
- Personal difficulty accepting the circumstances and a “if we don’t talk about it then it isn’t real” belief
- Lack of time or energy to have emotionally intense discussions due to the pressures of physical caregiving, financial concerns, job responsibilities, etc.
- A desire to avoid an appearance of weakness or vulnerability

Although people may believe they are protecting each other from emotional stress by not talking about death, avoiding these conversations may actually create additional heartache for everyone due to an inability to pursue individual goals for care and experience closure.

A hospice nurse I know identifies what she refers to as “the tasks of dying.” When people are aware that the end of life is approaching, their emotional and spiritual focus may change and certain activities may have greater importance, such as:

- Apologizing for past mistakes
- Forgiving others for uncomfortable situations/relationships
- Thanking family members, friends, and others who are significant
- Sharing love
- Saying “Goodbye”

The significance of these tasks was acutely demonstrated by one couple who were receiving services from this nurse. The wife’s physicians could not understand why she was clinging to life. The hospice nurse finally asked the husband if he was aware of any unresolved issue for his wife, and he immediately broke down. Many years prior, he had an affair. His wife knew of the affair and they remained married, but they never spoke about it, moving forward as if it had never occurred. With encouragement from the nurse, he acknowledged this situation and requested forgiveness from his wife, and she died within 20 minutes.

How does one initiate conversations about closure and end of life goals for care? For families who are reluctant to tell a loved one that he/she is dying, a question which might be helpful is “What is the worst case scenario if you tell your loved one?”

When speaking with the individual who is dying, recognize that one important concept for those who are near the end of life is legacy. People want to know that their lives mattered. Asking “What are you most proud of?” or sharing an accomplishment of the individual which made an impression on you can open the door to deeper dialogue.

Conversations held prior to a health care crisis allow more time for consideration of options to meet an individual’s goals. An often overlooked question is how certain medical treatments will influence daily life. Defining values with questions such as “What is a good death?” and “Is there something that you want to accomplish?” can help guide decisions. Wellspan offers Horizon Planning services: <https://www.wellspan.org/patients-visitors/patient-guide/horizon-planning/> .

Karen Kaslow, RN, BSN
Healthy Adams County End of Life Committee