

# Hospice enters bereavement area

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Normally patients in the hospice program have a six month prognosis. Physical and psycho-social assessments are updated weekly.

"Our patients are unique," Spilos said. "Our approach is up to the decision of the caregiver. There are books, tapes, poems. For people who have turned to the written word, we bring them something. Or the approach can be verbal, physical."

MOST HOSPICE PATIENTS are cancer victims "because their prognosis is easier to determine," Anderson said. "Most people serviced fall between the ages of 45 and 85."

Spilos joined Hospice at the invitation of Anderson, a member of his congregation for the past eight years.

"As hospice has grown, I've watched it grow," he said. "With my church background, I saw that it was important for me to understand what happens at the time of death. I can see the need for support, see the tremendous changes, see some of the pain and the

courage that people have. Here was a group to help me understand what takes place."

Spilos also credits two bereavement professionals, John Schneider, a Michigan State University psychologist and author, and Bob Weicker, the founder of New Beginnings support group with teaching him about the grief process.

"I personally gained a new understanding for people who are going through losses. It helped me with my own congregation," he said.

Holy Trinity has 300 member families.

Adds Anderson: "We really see everyone as having a spiritual aspect to their life. We see that at the time of loss. They ask 'where is my will to live,' 'where is my source of strength.' These are spiritual questions related to the physical and emotional side."

If the individual is a member of a church, synagogue, or mosque, Hospice involves the appropriate clergy.

"Many others aren't connected to some church," she said. "We are present for their spiritual care."

"We believe that recovery is possible. We are aware that the process can

be very painful. It is our hope that we can successfully assist the bereaved in seeking new direction by providing

them with an opportunity to talk, and by offering them understanding, reassurance and support."

## Grieving is natural

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because they don't know how to talk to you about your loss. But you can help them help you by simply telling them what you need.

If you normally have a pressing schedule, try to lighten it. Remember, grief is mentally stressful; you don't need the added strain of too much work to do. Set aside some quiet times just for yourself so you can think about the death and your feelings and put things in perspective.

Remember to watch your health. With grief taking a toll on you physically, you need to eat well and get enough sleep. Try to exercise, as well. Physical activity can often help offset depression and provide an outlet for your emotional energy.

What if you can't seem to handle your grief? Again, Dr. Rando emphasizes that there is no timetable for

grief, so it is difficult to say when a person needs professional help.

Dr. Grollman suggests that if you are worried that you aren't coping with your grief, it is time to seek help. (You also may be relieved to discover that you are reacting normally.) If you believe you need help, ask your clergyman or doctor to suggest a counselor. Your funeral director can also offer valuable advice.

Finally, remember that as time goes on, your grief will diminish. This does not mean you will forget your loved one; it means you accept the death and can no longer enjoy the deceased person's physical presence.

But he or she will still be part of you. Even though your relationship with your loved one has changed forever, its existence and your feelings live on forever.

This article was provided by the National Funeral Directors Association.

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