



# Death Expo

4 Day End-Of-Life Educational Series

## 2014 Resource Book

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[www.DeathExpo.com](http://www.DeathExpo.com)

# Death Expo

## Resource Book

### Track 1:

### End-of-Life Planning

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## **BE Ready:**

### **Checklist for End-of-Life Planning**

Life is fleeting and comes with no guarantees, but if you plan ahead you can spare your loved ones a great deal of stress and ensure that your deepest wishes are carried out. Use this checklist to get your records and papers in order. Then store everything in a safe place that your family members know about and can access. **Karen Wyatt MD: [www.karenwyattmd.com](http://www.karenwyattmd.com)**

1. \_\_\_\_ **Will:** Make sure it is updated regularly and reflects your wishes.
2. \_\_\_\_ **Trust Documents** for any family or charitable trust you have established
3. \_\_\_\_ **Bank Accounts:** List all accounts with numbers, beneficiaries
4. \_\_\_\_ **Credit Cards:** List all cards and account numbers along with cancellation info
5. \_\_\_\_ **Social Security Number**
6. \_\_\_\_ **Birth Certificate**
7. \_\_\_\_ **Marriage Certificate** (If applicable)
8. \_\_\_\_ **Veteran's Discharge Papers:** (If applicable)
9. \_\_\_\_ **Insurance Policies:** Record policy numbers and contact info for ALL policies
10. \_\_\_\_ **Business Agreements and Contracts**
11. \_\_\_\_ **Real Estate Deeds**
12. \_\_\_\_ **Stock Holdings Certificates**
13. \_\_\_\_ **Savings Bonds**
14. \_\_\_\_ **Automobile Title(s)**
15. \_\_\_\_ **Cemetery Lot and Marker** (If pre-purchased)
16. \_\_\_\_ **Funeral Preferences** (If applicable)
17. \_\_\_\_ **Advanced Directive** or Living Will: specify your wishes for care at the end-of-life
18. \_\_\_\_ **Durable Power of Attorney** or Health Care Proxy
19. \_\_\_\_ **Internet Information:** Websites, email, or ecommerce accounts with passwords
20. \_\_\_\_ **Auto-Pay Accounts:** List any accounts or products that are automatically billed to you or deducted from your bank account each month

# A Simple, 10-Step Estate Planning Guide



Estate planning becomes more and more important as we age, accumulate wealth, and have children and grow our families. No matter what age you are, it's a good idea to consider beginning the estate planning process.

## **Why Estate Planning is Important**

A proper estate plan helps to ensure that, when you pass away, your assets will be distributed according to your wishes and not according to the state law rules. Estate planning also helps your descendants avoid the slow, painful, and costly probate process. So now that you understand why estate planning is important, get started with this 10-step estate planning guide.

### **Step 1: Create a Will**

A will is probably the most crucial piece of a proper estate plan. It determines who will inherit your property and how your wealth and assets will be distributed. It also appoints a guardian for any young children you may have, in the event that both parents are no longer around to care for them.



## **Step 2: Set Up a Trust**

A trust is a necessity if you own property because it will allow your heirs to avoid the lengthy and costly probate process, meaning they will receive their inheritance much sooner.

## **Step 3: Arrange a Power of Attorney for Health Care and Financial Matters**

Granting someone a “power of attorney” will protect your wishes in the event that you become incapacitated and are unable to make medical decisions or handle financial matters. You should declare what your desired approach to health care will be in your living will, and appoint an “agent” to make decisions for you and carry out your plan. You will also appoint an agent to manage your financial matters, such as paying taxes, selling property, managing bank accounts, and more.

## **Step 4: Appoint Beneficiaries and File the Forms**

You will want to appoint a beneficiary for your bank accounts, brokerage accounts, and retirement plans, and file the necessary paperwork. This will ensure that, upon your death, those funds become payable to the appropriate beneficiary and your heirs will be able to avoid the probate process.

## **Step 5: Buy Life Insurance**

Life insurance is a good idea if you own property or have young children or other dependents relying on you for financial support. It will provide them an immediate source of cash to take care of themselves, and also can be used to pay off any debts you owe or estate taxes.

## **Step 6: Prepare for Estate Taxes**

The vast majority of people won’t have to worry about estate taxes, but if you are wealthy and have a lot of assets, estate tax planning should be a major concern. Talk to an accountant and tax lawyer to make sure your estate is properly structured to minimize your estate’s tax liability.

## **Step 7: Protect your Business Interests**

If you are a business owner, you need to have a plan for what will become of your business when you pass on. If you’re the sole owner, you should have a successor in place. If you are a shareholder in a private corporation or member of an LLC, be sure to have a buyout agreement in place.

## **Step 8: Provide for Funeral Expenses**

It can be a major burden for your heirs and family members to have to come up with the cash for funeral expenses. So if it’s feasible for you, set up a bank account with enough funds to cover your funeral that becomes payable upon your death.

### **Step 9: Final Arrangements**

Decide whether you will be buried or cremated and whether you will be a tissue and organ donor and make those wishes known so that your body can be disposed of according to your wishes.

### **Step 10: Gather and Store your Documents**

Finally, you need to make sure that your descendants will have access to all the documents related to your estate plan, including your will, trusts, insurance policies, bank account info, stock certificates, info about any debts from credit cards and mortgages, etc. Keep them in a safe place and make sure the appropriate people know where to find them.

Estate planning can be a headache for many people, but it is extremely important and can make a world of difference to your loved ones after you pass away. The best thing you can do is to hire a qualified estate planning lawyer to properly advise you on all of these key areas. Doing so will ensure that your loved ones will be as well off as possible when you're gone.

# Your Conversation Starter Kit

The Conversation Project is dedicated to helping people talk about their wishes for end-of-life care.

We know that no guide and no single conversation can cover all the decisions that you and your family may face. What a conversation can do is provide a shared understanding of what matters most to you and your loved ones. This can make it easier to make decisions when the time comes.

Name: \_\_\_\_\_

Date: \_\_\_\_\_



This Starter Kit doesn't answer every question, but it will help you get your thoughts together, and then have the conversation with your loved ones.

You can use it whether you are getting ready to tell someone else what you want, or you want to help someone else get ready to share their wishes.

Take your time. This kit is not meant to be completed in one sitting. It's meant to be completed as you need it, throughout many conversations.

<b>Step 1: Get Ready .....</b>	<b>1</b>
<b>Step 2: Get Set .....</b>	<b>3</b>
<b>Step 3: Go .....</b>	<b>6</b>
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## Step 1: Get Ready

There are a million reasons to avoid having the conversation. But it's critically important. And you can do it.

### Consider the facts.

More than **90%** of the people think it's important to talk about their loved ones' and their own wishes for end-of-life care.

Less than **30%** of people have discussed what they or their family wants when it comes to end-of-life care. Source: National Survey by The Conversation Project 2013.

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**60%** of people say that making sure their family is not burdened by tough decisions is "extremely important"

**56%** have not communicated their end-of-life wishes

Source: Survey of Californians by the California HealthCare Foundation (2012)

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**70%** of people say they prefer to die at home

**70%** die in a hospital, nursing home, or long-term-care facility

Source: Centers for Disease Control (2005)

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**80%** of people say that if seriously ill, they would want to talk to their doctor about end-of-life care

**7%** report having had an end-of-life conversation with their doctor

Source: Survey of Californians by the California HealthCare Foundation (2012)

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**82%** of people say it's important to put their wishes in writing

**23%** have actually done it

Source: Survey of Californians by the California HealthCare Foundation (2012)

**One conversation can make all the difference.**

## Remember:

- You don't need to talk about it just yet. Just think about it.
- You can start out by writing a letter—to yourself, a loved one, or a friend.
- Think about having a practice conversation with a friend.
- These conversations may reveal that you and your loved ones disagree. **That's okay.** It's important to simply know this, and to continue talking about it now—not during a medical crisis.

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**What do you need to think about or do before you feel ready to have the conversation?**



## Step 2: Get Set

Now, think about what you want for end-of-life care.

Start by thinking about what's most important to you. What do you value most?

What can you not imagine living without?

### Now finish this sentence:

What matters to me at the end of life is

Sharing your “What matters to me” statement with your loved ones could be a big help down the road. It could help them communicate to your doctor what abilities are most important to you—what’s worth pursuing treatment for, and what isn’t.

### Where I Stand scales

Use the scales below to figure out how you want your end-of-life care to be.

Select the number that best represents your feelings on the given scenario.

#### As a patient...

1

2

3

4

5

I only want to know  
the basics

I want to know  
as much as I can

1

2

3

4

5

Ignorance  
is bliss

I want to know how  
long I have to live

1

2

3

4

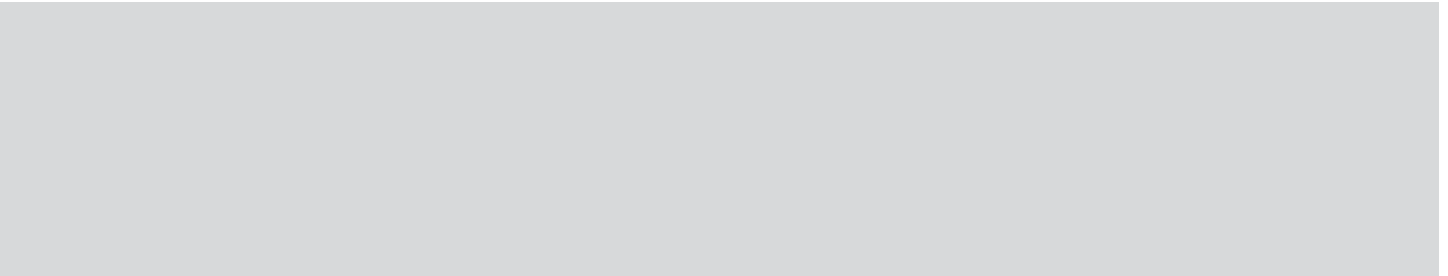
5

I want my doctors to  
do what they think  
is best

I want to have a say  
in every decision

## Look at your answers.

What kind of role do you want to play in the decision-making process?



## How long do you want to receive medical care?

**1**

I want to live as long as possible, no matter what

**2**

**3**

**4**

**5**

Quality of life is more important to me than quantity

**1**

I'm worried that I won't get enough care

**2**

**3**

**4**

**5**

I'm worried that I'll get overly aggressive care

**1**

I wouldn't mind being cared for in a nursing facility

**2**

**3**

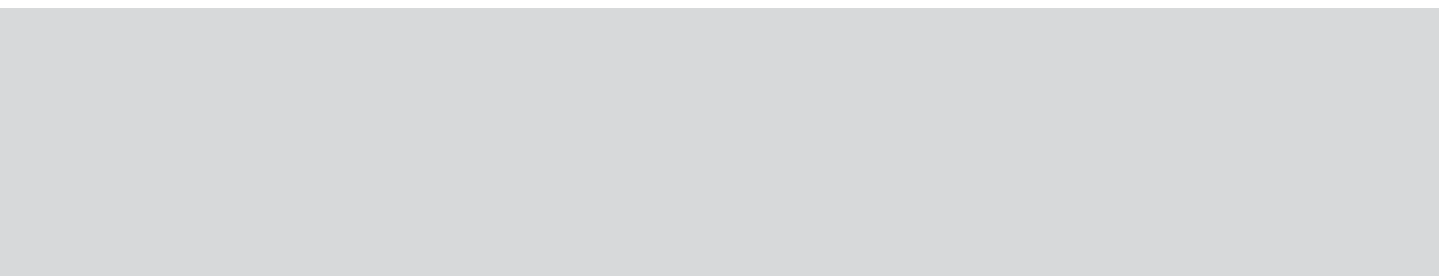
**4**

**5**

Living independently is a huge priority for me

## Look at your answers.

What do you notice about the kind of care you want to receive?



## How involved do you want your loved ones to be?

**1**

I want my loved ones to do exactly what I've said, even if it makes them a little uncomfortable at first

**2**

**3**

**4**

**5**

I want my loved ones to do what brings them peace, even if it goes against what I've said

**1**

When the time comes, I want to be alone

**2**

**3**

**4**

**5**

I want to be surrounded by my loved ones

**1**

I don't want my loved ones to know everything about my health

**2**

**3**

**4**

**5**

I am comfortable with those close to me knowing everything about my health

**What role do you want your loved ones to play? Do you think that your loved ones know what you want or do you think they have no idea?**

**What do you feel are the three most important things that you want your friends, family and/or doctors to understand about your wishes for end-of-life care?**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Step 3: Go

When you're ready to have the conversation, think about the basics.

**Mark all that apply:**

**Who** do you want to talk to? Who do you trust to speak for you?

- |                                  |  |   |
|----------------------------------|--|---|
| <input type="checkbox"/> Mom     | <input type="checkbox"/> Child/Children        | <input type="checkbox"/> Friend           |
| <input type="checkbox"/> Dad     | <input type="checkbox"/> Partner/Spouse        | <input type="checkbox"/> Doctor/Caregiver |
| <input type="checkbox"/> Sibling | <input type="checkbox"/> Minister/Priest/Rabbi | <input type="checkbox"/> Other: _____     |
- 

**When** would be a good time to talk?

- |  |  |                                       |
|--|--|---------------------------------------|
| <input type="checkbox"/> The next big holiday          | <input type="checkbox"/> Before my next big trip | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> At Sunday dinner              | <input type="checkbox"/> Before I get sick again |                                       |
| <input type="checkbox"/> Before my kid goes to college | <input type="checkbox"/> Before the baby arrives |                                       |
- 

**Where** would you feel comfortable talking?

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> At the kitchen table         | <input type="checkbox"/> On a walk or hike           | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> At a cozy café or restaurant | <input type="checkbox"/> Sitting in a garden or park |                                       |
| <input type="checkbox"/> On a long drive              | <input type="checkbox"/> At my place of worship      |                                       |
- 

**What** do you want to be sure to say?

If you wrote down your three most important things at the end of Step 2, you can use those here.

## How to start

### Here are some ways you could break the ice:

- “I need your help with something.”
- Remember how someone in the family died—was it a “good” death or a “hard” death? How will yours be different?
- “I was thinking about what happened to (Uncle Joe), and it made me realize...”
- “Even though I’m okay right now, I’m worried that (I’ll get sick), and I want to be prepared.”
- “I need to think about the future. Will you help me?”
- “I just answered some questions about how I want the end of my life to be. I want you to see my answers. And I’m wondering what your answers would be.”

## What to talk about







- ☐ When you think about the last phase of your life, what’s most important to you? How would you like this phase to be?
- ☐ Do you have any particular concerns about your health? About the last phase of your life?
- ☐ Who do you want (or not want) to be involved in your care? Who would you like to make decisions on your behalf if you’re not able to? *(This person is your health care proxy.)*
- ☐ Would you prefer to be actively involved in decisions about your care? Or would you rather have your doctors do what they think is best?
- ☐ Are there any disagreements or family tensions that you’re concerned about?
- ☐ Are there circumstances that you would consider worse than death? *(Long-term need of a breathing machine or feeding tube, not being able to recognize your loved ones)*
- ☐ Are there important milestones you’d like to meet if possible? *(The birth of your grandchild, your 80th birthday)*

- ☐ Where do you want (or not want) to receive care? (*Home, nursing facility, hospital*)
  - ☐ What kinds of aggressive treatment would you want (or not want)? (*Resuscitation if your heart stops, breathing machine, feeding tube*)
  - ☐ When would it be okay to shift from a focus on curative care to a focus on comfort care alone?
  - ☐ What affairs do you need to get in order, or talk to your loved ones about? (*Personal finances, property, relationships*)
- 

This list doesn't cover everything you may need to think about, but it's a good place to start. Talk to your doctor or nurse if you're looking for more end-of-life care questions.

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### **Remember:**

-  Be patient. Some people may need a little more time to think.
-  You don't have to steer the conversation; just let it happen.
-  Don't judge. A "good" death means different things to different people.
-  Nothing is set in stone. You and your loved ones can always change your minds as circumstances shift.
-  Every attempt at the conversation is valuable.
-  This is the first of many conversations—you don't have to cover everyone or everything right now.

### **Now, just go for it!**

Each conversation will empower you and your loved ones. You are getting ready to help each other live and die in a way that you choose.



## Step 4: Keep Going

### Congratulations!

Now that you have had the conversation, here are some legal and medical documents you should know about. Use them to record your wishes so they can be honored when the time comes.

- **Advance Care Planning (ACP):** the process of thinking about your wishes—exactly what you have been working on here.
- **Advance Directive (AD):** a document that describes your wishes.
- **Health Care Proxy (HCP):** identifies your health care agent (often called a “proxy”), the person you trust to act on your behalf if you are unable to make health care decisions or communicate your wishes. In some states, this is called the Durable Power of Attorney for Health Care. This is probably the most important document. Make sure you have many conversations with your proxy.
- **Living Will:** specifies which medical treatments you want or don’t want at the end of your life, or if you are no longer able to make decisions on your own (e.g. in a coma).

You can find more information about these documents from the link in the “Keep Going” section of the website Starter Kit at **[www.TheConversationProject.org](http://www.TheConversationProject.org)**.

Remember, this was the first of many conversations.

You can use the questions below to collect your thoughts about how your first talk went, and then look back to them when you prepare for future conversations.

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**Is there something you need to clarify that you feel was misunderstood or misinterpreted?**

**Who do you want to talk to next time? Are there people who should hear things at the same time (like siblings who disagree about everything)?**

**How did this conversation make you feel? What do you want to remember? What do you want your loved ones to remember?**

**What do you want to make sure to ask or talk about next time?**

We hope you will share this Starter Kit with others. You have helped us get one conversation closer to our goal: that everyone's end-of-life wishes are expressed and respected.

# Personal Self-Assessment Scale (PSAS)

PSAS Level	MOBILITY	ACTIVITY LEVEL & EVIDENCE OF DISEASE	SELF-CARE	INTAKE	CONSCIOUS LEVEL
PSAS 100%	Full	Normal activity & work <b>No evidence</b> of disease	Full	Normal	Full
PSAS 90%	Full	Normal activity & work <b>Some evidence</b> of disease	Full	Normal	Full
PSAS 80%	Full	Normal activity & work <i>with effort</i> Some evidence of disease	Full	Normal or reduced	Full
PSAS 70%	Reduced	Unable normal activity & work <b>Significant</b> disease	Full	Normal or reduced	Full
PSAS 60%	Reduced	Unable hobby/house work Significant disease	Occasional assistance	Normal or reduced	Full or confusion
PSAS 50%	Mainly sit/lie	Unable to do any work <b>Extensive</b> disease	Considerable assistance	Normal or reduced	Full or drowsy or confusion
PSAS 40%	Mainly in bed	Unable to do most activity Extensive disease	Mainly assistance	Normal or reduced	Full or drowsy +/- confusion
PSAS 30%	Totally bed bound	Unable to do any activity Extensive disease	Total care	Reduced	Full or drowsy +/- confusion
PSAS 20%	Totally bed bound	Unable to do any activity Extensive disease	Total care	Minimal sips	Full or drowsy +/- confusion
PSAS 10%	Totally bed bound	Unable to do any activity Extensive disease	Total care	Mouth care only	Drowsy or coma
PSAS 0%	Dead	-	-	-	-

## INSTRUCTIONS:

- A)** Each PSAS level is explained by reading across the rows from left to right.
- B)** After reviewing PSAS levels, move to the green columns under the title “Personal Preferences”.
- C)** Each green “Personal Preference” column identifies medical decisions that you may choose in advance to have activated when you reach a certain PSAS level\*:
- DNR** = Do Not Resuscitate order (no CPR, electrical shocks, breathing tubes)
  - No AN** = No artificial nutrition (example: feeding tubes)
  - No IVH** = No IVs for artificial hydration
  - Other** = Any medical treatment(s) that you may elect not to have (blood transfusions, dialysis, hospitalization for anything other than comfort care, etc). Details of the “Other” category must be listed in the space provided beneath the columns.
- D)** For each medical decision that you wish to make in advance for yourself, place an “X” in each column (example, DNR) in the row matching the PSAS level of your choice (example, PSAS level 30%).
- E)** Sign and date this document. Place it in your living will. Give a copy to your health care provider, your surrogate medical decision maker and any family or friends whom you wish to have a copy. Take a copy with you whenever you go to see a doctor. You may write “VOID” on this document at any time, destroy it and create an updated version. Updated versions should be shared with your health care provider, your surrogate medical decision maker, and any family or friends who have a previous copy.
- \* You must be fully conscious in order to make decisions for yourself in advance.**

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## Personal Preferences

DNR	No AN	No IVH	Other

**Write your “Other” preferences here:**

Sign your name: \_\_\_\_\_ Date: \_\_\_\_\_

Witness/Notary: \_\_\_\_\_ Date: \_\_\_\_\_

(It is strongly advised that this be reviewed at least every 6 months, or upon any major change in your medical condition in order to keep it current with your preferences. When renewing or if changes are needed, then use a new form with a new date of completion, and *destroy the older one.*)

# Fierro's Four R's

## A Tool For Surrogate Medical Decision-Making

You, as the surrogate medical decision-maker, do not have to decide what to do by yourself.

Let (your loved one) decide for himself or herself, following these four steps:

### 1. Reflect:

Think back and imagine (your loved one) when he or she was still able to make his or her own decisions.

### 2. Reconstruct preferences:

Answer the following questions: What are his or her favorite things? What is his or her favorite color? What are his or her hobbies? What is his or her favorite meal? What things did he or she dislike? \_\_\_\_\_

\_\_\_\_\_

### 3. Reconstruct values:

Think about whom he or she was, his or her opinions, his or her beliefs. What were his or her values? How did he or she choose to live his or her life? \_\_\_\_\_

\_\_\_\_\_

### 4. Review medical options and decide:

Now, imagine that (your loved one) is standing here beside you, looking at himself or herself here in this hospital bed. He or she hears the diagnosis and the available options the doctor has given. What does he or she want us to do, or not do next?" \_\_\_\_\_

\_\_\_\_\_

## End-of-Life Conversation Template from Dr. Stan Terman

1. Is this a good time for us to talk about a personal subject?
2. Have you thought much about the last chapter of your life?
3. Do you know that Living Wills can specify what treatments you DO want or do NOT want your physicians to provide—for future specific medical or mental conditions?
4. For Alzheimer's and other dementias, people often lose their mental capacity to make medical decisions years before their lives end. That's why it is urgent to express your judgments SOON while you still can. Keep in mind that even young people can have accidents that suddenly lead to a coma or "vegetative state" that make it TOO LATE to inform their loved ones and future physicians, what treatment they would or would not want.
5. Do you know that if you someday reach the stage of Advanced Dementia, it is important to have a Living Will that will be effective; in other words, a Living Will that specifically expresses your wishes, which others will honor?
6. Would you be willing to consider several options to complete a Living Will that are designed for the stage of Advanced Dementia (as well as other terminal illnesses) to express your wishes about treatment?
7. While it may be a bit unpleasant to think about these things, people who complete their Living Wills often feel comfortable from knowing they have expressed and memorialized their end-of-life wishes. Confidence that others will HONOR their wishes may let them feel less anxious.
8. For example: If you fear becoming trapped in unending, unbearable pain—you can specifically request "Palliative Sedation"--so that you can get complete relief from unbearable, unending pain.
9. Another example: If you fear years of being dependent, having lost what you consider "dignity," and being a burden to others (in your opinion)—as often happens for those who reach the stage of Advanced Dementia—you can request NOT continuing any treatment that would only prolong your dying.
10. After you complete your Living Will, you can decide if you also want to sign some strategic forms, record yourself on video, and store your forms and video in a registry for rapid access—so that your request will be effective.
11. Living Wills are considered a "gift" to loved ones. The reason is that the more certain loved ones are that they did honor WHAT you really wanted and WHEN--the less stress, the less anxiety, and the less guilt they are likely to feel.

12. So: To plan for possible Advanced Dementia (as well as other terminal illnesses), would you consider completing a Living Will with one of several possible forms and tools? If you are NOT ready now, would you let me know when you are? Do you want me, or someone else to help with the technical aspects of the task?



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## List of Resources for a Timely, Peaceful Transition

- *If you do NOT want to linger in Advanced Dementia or another terminal illness...*
- *If you DO want total relief from unending, unbearable pain and suffering...*
- *If you also want to reduce the stress and suffering of your loved ones...*

The ***Plan Now, Die Later-Peacefully*** “channel” or [YouTube.com/DrTerman](http://YouTube.com/DrTerman) has over 30 videos for personal viewing. Contact Caring Advocates to obtain permission for public showings. The main videos are:

**For Loved Ones with NO or Vague Living Wills-Making End-of-Life Decisions if There’s No Plug to Pull.** 37 minutes. (Nov. 2012) <http://youtu.be/24jRy7vDfc8>; Introduces this new technique: “Consensus of Substituted Judgment.”

**It Isn't Easy Being Pink: POLST's Potential Problems. (Physician Orders for Life-Sustaining Treatment).** Includes possible Elder Abuse Using a POLST form. (Nov. 12) 33 min + 10 min discussion. [http://youtu.be/8\\_YOHoyQAik](http://youtu.be/8_YOHoyQAik)

**What Guides Clinicians' Conversations with Patients about Living Wills, POLST forms & Natural Dying?** 47 min. (Sept. 2012) [http://youtu.be/S\\_x0agHADTU](http://youtu.be/S_x0agHADTU); A lively 45 min. discussion: <http://youtu.be/8zd4Q2TDFmw>

**Why I Changed My Mind--From Natural Dying to Treat & Feed--for Certain Symptoms of Advanced Dementia** 20 minutes. (August, 2012) <http://youtu.be/qA0TQS1Pmwk>

**Please Try To Save My Life.** A personal example. August, 2012 (4 min.) <http://youtu.be/kMhUrNMUC6g>

**For a good death--unlike my Alzheimer's relatives: a Natural Dying-Living Will & Ironclad Strategy** (38 min.; July, 2012). <http://youtu.be/3heQOdNk-mE>

**How to reduce your, or your loved one's end-of-life suffering. A selection of recommended videos.** 712 (6 min. July, 2012). <http://youtu.be/t5NRH-NeFak>

**Try To Save My Life. What Your Doctor May NOT Tell You About DNR Orders and Living Wills.** 712 (13 min. July, 2012). For your safety--if you have a Living Will or a DNR order--to avoid clinicians' misinterpretation. Fine points about DNR orders. <http://youtu.be/IY4RUbcFY5o>

**An Ironclad Strategy for Advanced Alzheimer's Dementia and Unbearable End of Life Pain.** 26.612 (7.5 min. July, 2012). A Five-Step program to help make sure others will honor your Last Wishes. <http://youtu.be/yinnWHZwY1r4>

**The Dementia Fear Survey--Why is it so important, for you and others?** (6.5 min. July, 2012). <http://youtu.be/Jqp5uHt2rQg>

**For the Dementia Fear: Avoid Premature Dying by a Moral & Effective Natural Dying Living Will.** Part I (24 min. June/July, 2012). <http://youtu.be/u0HQIY0V7bl>

**For the Dementia Fear: Avoid Premature Dying by a Moral & Effective Natural Dying Living Will.** Part II (39 min. June/July, 2012). <http://youtu.be/S82gdCHXge8>

**Advanced Training for Advance Care Planning esp Advanced Dementia** 12 712 (16 min. July, 2012). <http://youtu.be/p9tBLMxUYzs>

**Plan Now, Die Later Series of Videos—Introduction; the Dementia Fear and Timely Dying.** 31.D11.wmv (30 min.; Dec. 2011). <http://youtu.be/YPwu11tq56w>

**For UK residents: To Prevent Prolonged Dying & Pain in Alzheimer's Dementia & Terminal Illnesses.** 29 (37 min; Nov. 2011). <http://youtu.be/lwd18wCVlg8>

**For a Living Will Effective for Dementia & Terminal Illnesses, Sort Natural Dying Living Cards** (17 min; Nov. 2011). [http://youtu.be/j\\_hs51AcYmk](http://youtu.be/j_hs51AcYmk)

**Making Hard End of Life Decisions for Your Loved One. Can ALL Agree by Sorting Natural Dying Cards?** (11.5 min; Nov. 2011). <http://youtu.be/twg4TAnF4XE>

**To Prevent Prolonged Dying & Pain in Dementia & Terminal Illnesses.** I.Challenges. 25.X11.wmv (30 min. Oct. 2011). <http://youtu.be/dW3hxUWiPzU>

## List of Resources for a Timely, Peaceful Transition

To Prevent Prolonged Dying & Pain in Dementia & Terminal Illnesses.II.Strategies.28.X11.wmv (30 min. Oct. 2011). <http://youtu.be/OdfvPfEkjck>

FASTING: A Peaceful Way to Avoid a Prolonged Dying with Pain and Suffering. 25 X11 (25 min. Oct. 2011 and 2007). [http://youtu.be/wtD8O\\_uptt0](http://youtu.be/wtD8O_uptt0)

At The Bedside of a Peaceful Transition 08 X11 <http://youtu.be/pj3-jlr1Ww> (11 min.; Oct. 2011)

A Living Will for Alzheimer's Dementia: It's easy & effective 23 X11 <http://youtu.be/NnKkj1rk8dU> (11 min; Oct. 2011).

When We Die: Does physician-assisted suicide/dying always mean dying is timely? (30 min.; Oct., 2011). <http://youtu.be/wmy8d5zywoY>

Toward an Ironclad Plan for Dementia 2006 StanleyTerman X11 <http://youtu.be/mN3HYIXWQbs> (53 min.; 2006)

### Books

**Peaceful Transitions: Plan Now, Die Later—Ironclad Strategy** and **Peaceful Transitions: Stories of Success and Compassion** (2011; Second Edition). Available as two separate, smaller books, or as one larger, combination book at [www.CaringAdvocates.org](http://www.CaringAdvocates.org), Amazon, Barnes and Noble—in paperback, hardbound, and e-book formats.

**The BEST WAY to Say Goodbye: A Legal Peaceful Choice at the End of Life** (2007).

The book **Peaceful Transitions** provides detailed information about the oppositions' challenges and strategies to overcome them; describes how to complete strategic forms, includes guest essays and sample arguments, suggests how to select a trustworthy proxy, and reveals a private way to find out if one might have "a little" dementia. Visit: [www.PeacefulTransitions.com](http://www.PeacefulTransitions.com).

### Illustrated Cards for Advance Care Planning

**My Way Cards for Natural Dying** or **Natural Dying Living Will Cards** is a new Advance Care Planning tool. The "deck" of reusable cards includes one Living Will; available also as a separate e-book. Sort the illustrated cards to decide about one symptom at a time and to generate a Living Will that lets others know *WHEN* you would want Natural Dying. More info is at: [www.MyWayCards.org](http://www.MyWayCards.org) or [www.NaturalDyingCards.org](http://www.NaturalDyingCards.org).

**These clinical and strategic forms** work with most other Living Wills and state's required forms:

1. **Natural Dying—Living Will** (generated by sorting My Way/Natural Dying Cards);
2. **Natural Dying Advance Directive** combined with the **Natural Dying Physician's Orders**;
3. **Consent Form to Relieve Unbearable Pain by Palliative Sedation**;
4. **Natural Dying Agreement & Natural Dying Affidavit**—strategic forms based on the law;
5. **Natural Dying Organ Donation Form (Optional)** and **Natural Dying Explanation and Commitment** (for skilled nursing and assisted living facilities); and,
6. **Designation of Proxies/Agents; Specifying their Authority**.

**So emergency clinicians and physicians can quickly retrieve your forms to learn your wishes:**

The [www.MyLastWishes.org](http://www.MyLastWishes.org) Program is a national registry, website, and card system that lets clinicians rapidly view emergency orders; obtain downloads/faxes of your clinical and strategic forms; and view videos by you and your physician. It helps you avoid unwanted treatment; increase your chances of surviving a medical emergency; provide your contact information

## **List of Resources for a Timely, Peaceful Transition**

including your address and map (if you get lost); and it displays videos to convince others to **HONOR** your ***Last Wishes*** if the time has come to attain your **timely, peaceful transition**.

E-Mail: [DrTerman@gmail.com](mailto:DrTerman@gmail.com) SKYPE: stan\_terman

**Selected videos from the channel, [www.YouTube.com/DrTerman](http://www.YouTube.com/DrTerman) = Plan Now, Die Later-Peacefully**

GEN = Introduction to the problems, challenges, and proposed solutions--in increasing specificity:

A Living Will for dementia: It's easy and effective: <http://youtu.be/NnKkj1rk8dU> (Approachable)

What is Advanced Dementia like? <http://youtu.be/u0HQIY0V7bl> (Excerpt from an award-winning video that begins after min. 11) **A HIGHLY RECOMMENDED SIX-MINUTE VIDEO**

The Five-Step "ironclad strategy": <http://youtu.be/yinnWHZwY1r4> (Overview that may inspire confidence in the approach)

For a good death, unlike my 3 relatives: <http://youtu.be/3heQOdnK-mE> (personal & motivating)

HOW = to complete an effective Living Will and to personalize DNR for your specific needs

To help you sort the illustrated cards, to complete your own **Natural Dying—Living Will:**

Natural Dying Living Will Cards: [http://youtu.be/j\\_hS51AcYmk](http://youtu.be/j_hS51AcYmk)

OR: My Way Cards: <http://youtu.be/jJqR8D9TLWs>

Fine points about Living Wills, DNR orders: <http://youtu.be/IY4RUbcFY5o> (for a timely dying)

PEACEFUL = How to make Natural Dying peaceful:

For patients, fasting can be peaceful and HOW loved ones can treat thirst:

[http://youtu.be/wtD8O\\_uptt0](http://youtu.be/wtD8O_uptt0)

For loved ones at the bedside, it can be peaceful, too: <http://youtu.be/pj3-jlrl1Ww>

TIMELY = How to make sure your dying will be timely:

"Choosing to Die" by Physician-Assisted Dying may be premature:

<http://youtu.be/wmy8d5zywoY>

The "Dementia Fear Survey strives to prevent premature dying: <http://youtu.be/Jqp5uHt2rQg>

A rapid way to let clinicians know WHAT treatment you do or do not want:

My Last Wishes <http://youtu.be/RfOERS7Zrtc> (currently unlisted)

Please save my life: <http://youtu.be/kMhUrNMUC6g>

LO = For a family member/loved one who did not in the past clearly state specific end-of-life wishes:

For general audience: <http://youtu.be/twg4TAnF4XE> (recommended view this video first: [http://youtu.be/j\\_hS51AcYmk](http://youtu.be/j_hS51AcYmk) )

For professionals: <http://youtu.be/24jRy7vDfc8>

Pro Basic = For professionals who want to appreciate how they can help patients/clients:

Potential Problems using POLST Paradigm forms: [http://youtu.be/8\\_YOHoyQAik](http://youtu.be/8_YOHoyQAik)

The "deliberative model of the physician-patient relationship" may help patients change their mind so their dying is not premature: [http://youtu.be/S\\_x0agHADTU](http://youtu.be/S_x0agHADTU) &

<http://youtu.be/8zd4Q2TDFmw> (discussion)

The companion video of a patient interview: <http://youtu.be/qA0TQS1Pmwk>

Compared to Physician-Assisted Dying: <http://youtu.be/wmy8d5zywoY>

Pro Advanced: For professionals who want to learn how they can help their own patients/clients.

Challenges and strategies for the US: <http://youtu.be/dW3hxUWiPzU> and

<http://youtu.be/OdfvPfEkjck> ; for the UK: <http://youtu.be/lwd18wCVlg8>

Avoid premature dying by a moral & effective Living Will: <http://youtu.be/u0HQIY0V7bl> and <http://youtu.be/S82gdCHXge8>

For historical interest only (2006 lecture): <http://youtu.be/mN3HYIXWQbs>

Information about professional training: <http://youtu.be/p9tBLMxUYzs>



# Death Expo

## Resource Book

### Track 2: Caring for the Dying

#### Contents:

5 Tools for a Peaceful Passing

Checklist for Hospice Care

How To Be With A Dying Person

Preparing For the Death of a Loved One

Taking a Spiritual Inventory



# *5 Keys to a Peaceful Passing*

Adapted from *What Really Matters* by  
Karen Wyatt, MD

## *1. Physical Comfort*

- Pain management
- Symptom relief
- Alternative modalities

## *2. Love*

- Connections with family and friends
- Compassionate care

## *3. Forgiveness*

- Healing old wounds
- Letting go of resentment from the past

## *4. Enjoyment of Every Moment*

- Finding the “little gifts” that life offers
- Expressing gratitude

## *5. Meaning*

- Tying up “loose ends”
- Seeing the “big picture” of life
- Finding resolution and completeness

## Questions About Hospice Care

*A checklist of questions to ask as you try to find the right hospice service for your loved one.*

Involvement with a hospice service can be a choice that you plan for, or one that comes up suddenly. Regardless, it helps to know the right questions to ask when shopping for hospice care.

Below are some of the most important questions you should ask when interviewing a hospice service. Before you go to an interview, print this list of questions, read over it, and identify the questions that are most important to you and your loved one. Take the sheet along with you, and jot down the answers during the interview.

If you go on several interviews, the answers to this questionnaire will allow you to more easily compare services and decide which is right for your loved one.

- 1) Is the agency accredited by a nationally recognized accrediting body?
- 2) Is the program Medicare and/or Medicaid certified?
- 3) Does your state require hospice licensing? If so, is the service licensed?
- 4) Is there written documentation regarding the eligibility requirements, financial aspects, employee jobs, liability insurance, and general services of the hospice?
- 5) Will the agency provide references from other healthcare organizations?
- 6) Is the hospice service in good standing with the Better Business Bureau or State Attorney General's office?
- 7) How flexible is the hospice service in negotiating patient differences?
- 8) Does the agency work with the family to generate a professional plan of care for each patient? Will the service provide you with a copy of this plan?
- 9) Is this plan updated periodically or when the need arises?
- 10) Does the hospice require a primary caregiver?
- 11) Will the hospice work with the caregiver to cover job schedules, travel plans, or other responsibilities?
- 12) Does the service hold an evaluation to determine patient needs?
- 13) Does the service consider what the patient can do for him or herself?

- 14) How many personnel references does the agency require?
- 15) Are the hospice workers licensed and bonded?
- 16) Does the agency have a routine way of handling complaints?
- 17) How does the agency handle billing?
- 18) Will the agency help find financial assistance?
- 19) Are there payment plans available?
- 20) Does the agency have a 24 hour on-call service?
- 21) Did the hospice inform you of the patient's rights and responsibilities?
- 22) How quickly do hospice services begin?
- 23) What specialized services are available?
- 24) What are the policies regarding residential admission? Inpatient care?
- 25) What hospitals work closely with the residential facilities?

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For additional tools for caregiving or aging, visit [www.CaregiversLibrary.org](http://www.CaregiversLibrary.org)

## How To Be With A Dying Person

*A guide to helping a loved one through his or her final days.*

By Frank Ostaseski

Dying is much more than a medical event. It is a time for exchanging love, for reconciliation and transformation for all involved. It is a chance for a dying person's loved ones to become compassionate companions on a journey of continuous discovery.

Fear is only natural. Doubt is to be expected. Whether we are making the bed or confined to it, we will come into contact with the precarious nature of this life and also come to appreciate its preciousness.

Each person's death is as unique as their birth. No one technique can fit every situation, but the following tips can serve as a rough guide during a loved one's final days.

**Be Yourself** Relate to the person, not the illness. Bring both your strength and vulnerability to the bedside. It's okay to cry. People who are dying continue to need intimate, natural, and honest relationships. Don't use your role in a person's death to downplay or avoid that person's suffering.

**Empathize** The greatest gift we can offer one another is our undivided attention. Listen without judgment or an agenda. Be aware of feelings and nonverbal cues. Respect the personal truths the dying person may be discovering. Be mindful of your own inner experience and talk about your discoveries.

**Show Human Kindness** Details do matter. A cool cloth on a perspiring brow, holding the hand of a frightened patient, listening to a lifetime of stories. When offered with attention and love, these ordinary activities convey caring and acceptance, build trust, and enhance self-esteem. Trust your innate compassion and capacity to embrace the suffering of another as your own.

**Keep It Simple** Have confidence in the healing power of human presence. Particularly in the final days, slow down and leave room for silence. Reduce distractions. Create a calm and receptive environment. Honor the spiritual dimensions of dying. Let go of control and be willing to acknowledge ignorance in the face of this extraordinary mystery

**Frank Ostaseski is the founding director and guiding teacher of the [Zen Hospice Project](#) in San Francisco.**

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## Preparing For The Death of a Loved One

*The impending death of a loved one is always a difficult emotional time, but knowing what to expect during a loved one's final days can help you prepare to handle the event.*

The physical and emotional-spiritual-mental signs and symptoms of impending death which follow are offered to help families understand the natural kinds of changes which may happen during the dying process and how to best respond. All these signs and symptoms will not occur with everyone, nor will they occur in this particular sequence. Each person is unique and needs to do things in his or her own way. The body prepares itself for the final days of life in the following ways:

**Fluid and Food Decrease** There is usually little interest in eating and drinking. Allow the person to eat and drink whatever is appetizing to them, but any nourishment should be taken slowly and in small amounts. Let the person decide how much and when to eat and drink. Be careful of decreases in swallowing ability, and do not force fluids if the person coughs soon after. Reflexes needed to swallow may be sluggish. Small chips of ice, frozen juices, or Popsicles may be refreshing in the mouth.

The person's body lets him/her know when it no longer desires or can tolerate foods or liquids. The loss of this desire is a signal that the person is making ready to leave. This is not a painful process. Dehydration no longer makes them uncomfortable. Glycerin swabs may keep the mouth and lips moist and comfortable. A cool, moist washcloth on the forehead may also be welcome.

**Decreased Socialization** The person may want to be alone with just one person or with very few people. Speech is often slow or difficult or the person may not have the ability to speak at all. It is natural to not feel like socializing when feeling weak and fatigued. It can be disturbing to the dying person to have more than a few people in the room.

Think about taking shifts in order to be with the person but also keep the environment quiet and calm and reassure the person that it is okay to sleep.

**Sleeping** The person may spend an increasing amount of time sleeping and become uncommunicative, unresponsive, and difficult to arouse at times. This normal change is due in part to changes in the metabolism of the body. Sit with the patient, gently hold his or her hand; speak softly and naturally. At this point, "being with" is more important than "doing for." Never assume that the person cannot hear; hearing is said to be the last of the five senses to be lost. Hearing may still remain very acute although the person may seem asleep, so do not say anything in their presence you would not say to them when awake.

**Restlessness** The person may make restless and repetitive motions such as pulling at sheets or clothing or have visions of people or things that do not exist.

These symptoms may be a result of a decrease in the oxygen circulation to the brain and a change in the body's metabolism. Do not be alarmed or interfere, or try to restrain such motions. Talk calmly and reassuringly with the confused person so as not to startle or frighten him/her further. Lightly massaging the hand/forehead, reading to the person, or playing soft music can also have a calming effect.

**Disorientation** The person may seem confused about time, place, and identity of people around him/her, including close and familiar people. Identify yourself by name rather than asking the person to guess who you are. In conscious moments the person may speak or claim to have spoken to people who have already died, or to see places not presently accessible or visible to you. This is not a hallucination or a reaction to medication. It signifies a person beginning a normal detachment from this life, preparing for the transition so it will not be frightening.

Accept this transitional time. There is no need to contradict, explain away, belittle, or argue about what the person claims to see or hear. Listen with respect to whatever the person has to say, allow free expression of feelings and offer comfort through touching and/or talking reassuringly and calmly.

**Incontinence** The person may lose control of urine and/or bowels as the muscles in the area begin to relax. Diapers or chux may be helpful to protect the bed and assist in keeping the person clean and comfortable.

**Urine Decrease** Urine output normally decreases, becomes more concentrated, and may become the color of tea. This is due to decreased fluid intake and to a lessening of circulation through the kidneys. The hospice nurse may suggest that a Foley catheter be inserted or irrigated.

**Breathing Pattern Change** The person's usual breathing patterns may change with the onset of a different breathing pace. Breathing may become shallow, irregular, fast, or abnormally slow. A particular pattern consists of breathing irregularly with shallow respiration or periods of no breaths for 5–30 seconds, followed by a deep breath. The person may also have periods of rapid shallow panting type breathing. Sometimes there is a moaning-like sound on exhale; this is not distress, but rather the sound of air passing over relaxed vocal cords.

Changed breathing patterns are very common for a person nearing death and indicate decreased circulation in the internal organs and buildup of body waste products. Elevating the head and/or turning onto the side may increase comfort.

**Congestion** Oral secretions may become more profuse and collect in the back of the throat. The person may develop gurgling sounds coming from the chest. These sounds can become loud and distressing to hear. These normal changes come from fluid imbalance and an inability to cough up normal secretions. It is helpful to raise the head of the bed or use pillows to raise the person's head so

that the secretions pool low and won't stimulate the gag reflex. Turn the person's head to the side and allow gravity to drain the congestion. You may also gently wipe the mouth with a moist cloth.

**Color Changes** Due to changes in circulation the person's arms and legs may become cold, hot, or discolored. This may be especially noticeable in extremities where the color may change to a darker, bluish hue. This is a normal indication that the circulation is conserving to the core to support the most vital organs.

Irregular temperatures can be the result of the brain sending unclear messages. Keep the person warm if they appear cold, but do not use an electric blanket. If the person continually removes the covers, then allow them just a light sheet. Sweating may occur and there may be an odor resulting from the many physiological changes taking place in the body. The heartbeat and pulses may become slower, weaker, and irregular.

**Permission To Go** When someone enters the last days of dying, their body begins the process of shutting down, which will end when all the physical systems cease to function. This is usually an orderly and non-dramatic series of physical changes that are not medical emergencies and do not require invasive interventions. These physical changes are a normal, natural way in which the body prepares itself to stop. This release may include resolving whatever is unfinished of a practical nature, and seeking or receiving permission from family members to "let go."

A dying person will commonly try to hold on, even though it brings prolonged discomfort, in order to be assured that those left behind will be all right. A family's ability to reassure and release the dying person from this concern is the greatest gift of love they can give at this time.

**Saying Good-bye** When the person is ready to die and the family is able to let go this is the time to say good-bye in personal ways. It may be helpful to just lay in bed with the person, hold a hand, and/or say everything you need to say. Tears are a normal and natural part of saying good-bye, and do not need hiding or apology. Tears express your love and help you to let go.

**At The Time Of Death** It may be helpful for family members to discuss ahead of time what to do when the final moment arrives. At the time of death: breathing ceases, heartbeat ceases, the person cannot be aroused, the eyelids may be partially open with the eyes in a fixed stare, the mouth may fall open as the jaw relaxes, there is sometimes a release of bowel and bladder contents as the body relaxes.

The death of someone in a hospice program, although an anxious event for family and friends, is not an acute medical emergency. While you should call the hospice, it is not necessary to call the medical examiner, the police, or 911. When the death has occurred, take the time needed to call a supportive person



or to adjust to the situation. There is no rush. Taking care of you is what is more important now.

The physical and emotional-spiritual-mental signs and symptoms of impending death described above are intended to help families understand what may happen in a way appropriate and unique to the values, beliefs, and lifestyle of the individual patient.

We hope that this information will alleviate some of the natural anxiety and fear that accompanies caring for a terminally ill person.

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## **Taking A Spiritual Inventory**

*As death approaches, it's natural to take spiritual stock of one's life.*

By Kathleen Dowling Singh, Ph.D.

The fact of death is the great mystery and the great truth that illuminates our lives. To face our own imminent death is to examine our lives with an urgency and honesty we may never have felt before.

A spiritual assessment is a helpful practice as we move close to dying. Such an assessment seems to arise naturally in the course of the profound psychological and spiritual transformations of dying. Since we all share the same human condition, many terminally ill people report asking themselves the same questions. These are many of the questions that those who have had a near-death experience report that they have been asked. They are questions that pierce through the frivolousness at the surface of life and confront us with the value and significance this precious gift of a human life offers

It is not too late to take stock of our lives, even in the last weeks and days of terminal illness. And for those of us in the midst of life, in the apparent safety and security of our health, it is not too early. No matter how much time we have left to live, the answers to the following questions, voiced in the quiet honesty of our own hearts, provide direction to the rest of our living.

Who have I been all this time?

How have I used my gift of a human life?

What do I need to "clear up" or "let go of" in order to be more peaceful?

What gives my life meaning?

For what am I grateful?

What have I learned of truth and how truthfully have I learned to live?

What have I learned of love and how well have I learned to love?

What have I learned about tenderness, vulnerability, intimacy, and communion?

What have I learned about courage, strength, power, and faith?

What have I learned of the human condition and how great is my compassion?

How am I handling my suffering?

How can I best share what I've learned?

What helps me open my heart and empty my mind and experience the presence of Spirit?

What will give me strength as I die? What is my relationship with that which will give me strength as I die?

If I remembered that my breaths were numbered, what would be my relationship to this breath right now?

Who am I?

*Kathleen Dowling Singh, Ph.D. is a former hospice worker, a transpersonal psychologist and the author of The Grace in Dying: How We Are Transformed Spiritually As We Die (Harper San Francisco). She lectures frequently on the spiritual dimensions of dying.*

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# Death Expo

## Resource Book

### Track 3: Funeral and Burial Options

#### Contents:

Green Burial Council Green Funeral Planner

General Timeline for Post-Death Care and Arrangements

Green Burial Questions and Answers

Home Funeral Checklist

Funeral Planning Checklist

Funeral Poems



# Green Burial Council Planning Guide

This document was created to assist in the planning and facilitation of your green burial. It addresses the components of a green funeral/burial, and should serve as a supplement to any other end-of-life planner you may be using. A full list of GBC approved funeral establishments, cemeteries, product manufacturers, and cremation disposition programs can be found at: [www.greenburialcouncil.org/finding-a-provider/](http://www.greenburialcouncil.org/finding-a-provider/)

## Environmental Aims

Environmental benefits that mean the most to me in order of importance (#1 most important, #4 least important):

- |   |   |
|---|---|
| _____ Conservation of natural resources | _____ Reduction of carbon emissions       |
| _____ Protection of worker health       | _____ Preservation/restoration of habitat |

## Funeral Service Provider

My preference is to have my funeral coordinated by:

- ☐ A funeral establishment that is part of the Green Burial Council's network of approved providers prepared to conduct my green burial:\*

Contact information: \_\_\_\_\_  
\_\_\_\_\_

- ☐ A family member/friend whom I have chosen to handle my arrangements:\*\*

Contact information: \_\_\_\_\_  
\_\_\_\_\_

- ☐ Other (Explain): \_\_\_\_\_  
\_\_\_\_\_

\*If you have prearrangement with a funeral home that is not part of the GBC list of providers, discuss your intentions with your funeral director to determine if they can meet your current needs. The GBC will be happy to help the funeral home understand the procedures for facilitating a green burial.

\*\*Please check to ensure that your state allows for a funeral to be facilitated without a licensed funeral director. As of 2010 the list of states that require families to use a licensed funeral director are as follows: CT, IN, IL, LA, MI, NE, NJ, and NY.

## Body Preparation

I approve of the following practices/products to disinfect, deodorize and temporarily preserve my body after my death:

- |   |  |
|---|--|
| <input type="checkbox"/> Dry Ice  | <input type="checkbox"/> Refrigeration |
| <input type="checkbox"/> Topical application (i.e. sprays, compounds) using nontoxic, essential oils approved by the Green Burial Council                                 |  |
| <input type="checkbox"/> Topical application and/or internal injection (excluding arterial injection) using nontoxic, essential oils approved by the Green Burial Council |  |
| <input type="checkbox"/> Topical application and/or internal injection (including arterial injection) using nontoxic, essential oils approved by the Green Burial Council |  |

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## Burial Container

My preference is for use of Green Burial Council approved:

- |  |                                 |
|--|---------------------------------|
| <input type="checkbox"/> Casket                                      | <input type="checkbox"/> Shroud |
| <input type="checkbox"/> Casket and shroud                           | <input type="checkbox"/> Urn    |
| <input type="checkbox"/> Burial container that will be obtained from |                                 |
| <input type="checkbox"/> Other (Explain): _____                      |                                 |

## Type of Service/Viewing

My preference is for a:

- |  |  |
|--|--|
| <input type="checkbox"/> Private open casket funeral   | <input type="checkbox"/> Private closed casket funeral |
| <input type="checkbox"/> Public open casket funeral  | <input type="checkbox"/> Public closed casket funeral  |
| <input type="checkbox"/> Public closed casket funeral with a private viewing of my body prior to the funeral |  |
| <input type="checkbox"/> Public closed casket funeral with a private viewing of my body after the funeral    |  |
| <input type="checkbox"/> Other (Explain): _____  |  |

## Place of Funeral Service

My preference is to have:

- |  |
|--|
| <input type="checkbox"/> A graveside funeral only  |
| <input type="checkbox"/> A funeral at my home  |
| <input type="checkbox"/> A funeral at the funeral home handling my arrangements (identified above) |
| <input type="checkbox"/> A funeral at the following specified location:                            |
| <input type="checkbox"/> Other (Explain): _____  |

## Disposition

- |   |
|---|
| <input type="checkbox"/> I have made arrangements for burial at: _____  |
| Contact information: _____  |
| <input type="checkbox"/> I have not made arrangements for burial at a cemetery  |
| <input type="checkbox"/> I would like to be buried on my property (at the location identified on the map attached to this document) and have verified with my local county planning department that burial is allowed to take place on this property. |
| <input type="checkbox"/> Other (Explain): _____   |

## Contingencies

If there is no green burial ground near where I live, I would be willing to have my body transported to:

- |  |
|--|
| <input type="checkbox"/> A GBC approved burial ground within 1000 miles of my home |
| <input type="checkbox"/> A GBC approved burial ground within 500 miles of my home  |
| <input type="checkbox"/> A GBC approved burial ground within 100 miles of my home  |
| <input type="checkbox"/> Other (Explain): _____                                    |

Continued on next page...

## Memorialization\*

I would like to have:

- |  |  |
|--|--|
| <input type="checkbox"/> A tree as a marker  | <input type="checkbox"/> No marker on top of my grave                |
| <input type="checkbox"/> A rock as a marker  | <input type="checkbox"/> My name listed on a central/memorial marker |
| <input type="checkbox"/> Wildflowers or native plants planted on top of my grave instead of a marker |  |
| <input type="checkbox"/> A rock as a marker engraved with the following words:                       |  |
| <input type="checkbox"/> Other (Explain): _____  |  |

\*These choices will not be available at all cemeteries. Please check individual cemeteries for what memorializations are available.

## Cremation (if applicable)

I would like to:

- ☐ Chose a cremation facility that recycles medical parts
- ☐ Offset the carbon emissions from cremation by making a donation in the amount of \$\_\_\_\_\_ to a carbon fund\*
- I have specified here: \_\_\_\_\_
- ☐ Chose a cremation facility that mitigates for mercury pollution (available in 2013)
- ☐ Have my ashes given to: \_\_\_\_\_
- with the request that they be committed in the following manner : \_\_\_\_\_
- ☐ Other (Explain): \_\_\_\_\_

It is suggested that you email and/or give hard copies of this completed Green Burial Planning Guide to a family member/friend, your next of kin, attorney, estate planner and the funeral home and/or cemetery with whom you have made your final arrangements along with any other specific instructions you have made regarding your funeral/burial. If you need further help or have any questions, please email the Green Burial Council at [info@greenburialcouncil.org](mailto:info@greenburialcouncil.org) or call 888-966-3330.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **A Will for the Woods**

### **Questions on Green Burial:**



#### **1. What is the definition of “green burial”?**

According to the GBC: "Green burial is a way of caring for the dead with minimal environmental impact that furthers legitimate ecological aims such as the conservation of natural resources, reduction of carbon emissions, protection of worker health, and the restoration and/or preservation of habitat."

We will often elaborate on that by defining it as: Green burial is a simple and natural alternative to resource-intensive contemporary burial or cremation. The deceased is laid to rest in the earth using only biodegradable materials and without a vault or toxic embalming, in a woodland or other natural setting, often with a fieldstone or indigenous plant marking the grave. This practice can be used as a conservation tool, enabling the acquisition, restoration, and stewardship of natural areas. Simple natural burials were prevalent for thousands of years (and still are in many parts of the world, including in traditional Muslim and Jewish burials) before the contemporary funeral industry propagated expensive and elaborate funerals as the standard.

#### **2. Can you elaborate on the terms *green funeral*, *green burial*, and *green cemetery*?**

Often when people talk about wanting this option, they really mean they want all three aspects to be green. A green funeral involves no chemical embalming (or more commonly, none at all) and uses only non-toxic, biodegradable materials for body preparation. For a green burial, the container and anything placed into the earth must be non-toxic and biodegradable, and no vault is permitted. It is the cemetery which makes the decision about whether or not they allow for green burials, either exclusively or in combination with conventional burials.

In an ideal situation, not only is the burial itself green, but the care of the burial ground is, as well. The Green Burial Council has three tiers of certification for green cemeteries, and the higher two require that all burials performed are green and that there are efforts toward ecologically responsible land care, which involves minimal watering and mowing; not using chemical pesticides, herbicides, or fertilizers; and in the highest cases, active restoration and conservation. (For further explanation of these three tiers, see question 15 or the GBC website, [greenburialcouncil.org](http://greenburialcouncil.org).)

#### **3. What are some of the most common misconceptions about funerals and the funeral industry?**



The following common myths are NOT true:

- That conventional burial is more respectful of the deceased.
- That loved ones should want to preserve the body for as long as possible in a casket and keep it away from the earth.
- That loved ones don't want to participate in the funeral process or be involved in rituals like decorating a casket or digging a grave.
- That one must use the services of a funeral director.
- That contemporary funeral practices are traditional. (See Q.25-28)
- That contemporary American funeral customs are the norm and that the rest of the world embalms and uses large caskets and monuments. (See Q.21-23 & Q.25-28)
- That cremation is green. (See Q.14)
- That dead bodies are dangerous or a health risk. (See Q.21)
- That embalming is required. (See Q.21-23)
- That vaults are necessary for safety reasons. (See Q.13)

#### **4. Can you provide some statistics on the funeral industry?**

What has come to be known as the American style funeral is the most resource intensive funeral in the world.

The following statistics represent the materials used annually in American funerals:

- 30-plus million board feet of hardwoods – mostly tropical and precious (used in caskets).
- 2,700 tons of copper and bronze (caskets).
- Over 100,000 tons of steel (caskets and vaults). This equals enough metal to rebuild the entire Golden Gate Bridge every year.
- 1.6 million tons of reinforced concrete (vaults). If you were to lay that concrete down it would be about the length and width of a two-lane highway stretching all the way across the continental US.
- 827,000 gallons of embalming fluid. This is enough formaldehyde and other toxic chemicals used in embalming to fill over one Olympic-size swimming pool every year.

Cremation – The following statistics on cremation are commonly quoted, and we've done our best to verify their accuracy:

- You could drive an average car around the equator 3 million times on the energy used annually for cremations in China, Japan, India, the UK, Canada, the US, Australia and New Zealand combined (based on government statistics 2008).
- You could drive about 4,800 miles on the energy used to cremate one person — and around the equator 85,000 times on the energy from all cremations in one year in the US.

- “The cremation process consumes fossil fuels and releases more than 23 million pounds (10.4 million kilograms) of CO<sub>2</sub> into the atmosphere annually (as well as a host of toxic pollutants).” -Robert Larkins, Funeral Rights
- During cremation the average person produces about 110lbs (50 kg) of carbon dioxide as the body is heated to 1270°F (690°C) for 70 to 90 minutes. -Professor Roger Valentine Short, University of Melbourne, 2007.
- Approximately 40% of American dead currently receive cremation.
- The British Environment Minister estimates that by 2020 crematoriums will be the biggest single contributor to mercury emissions in the UK, although some countries are now moving towards higher filter standards.
- Among the most significant noxious emissions produced by cremation are: Carbon Dioxide, Hydrogen Chloride, Carbon Monoxide, Formaldehyde, Organochlorines, Dioxins, Furans, and Mercury.

In 2014 there were over 40 GBC approved green burial cemeteries in the United States, and around 100 including the non-certified cemeteries. Since we began making *A Will for the Woods*, the number of green cemeteries has doubled and is continuing to grow.

### **5. How can I find out if I can have a green burial and funeral in my area?**

In the US and Canada, you can start with resources like The Green Burial Council (GBC) or The Funeral Consumers Alliance (FCA). Green burial is also offered in the UK and Australia. For these countries, please refer to the Natural Death Centre and the Natural Death Care Centre, respectively — see question 30 and the resources section for more details. The movement is ever-expanding, and many countries have intact traditions of natural burial, so an internet search may be worthwhile to see what’s happening in your area.

The GBC certifies funeral homes and cemeteries (as well as some funeral products), and lists them on their website. They have established standards and best practices for what should be considered “green”, and they verify that certified providers are adhering to those standards. The FCA is a national organization in the US with affiliate chapters in regions across the country, often run by volunteers. Their mission is to protect consumers’ rights around funeral choices, and they are another very well-informed and helpful resource.

Not all green providers choose to be certified by the GBC. If you conduct an independent search for funeral homes and cemeteries in your area, you may discover that some non-certified places are in fact offering green services. Keep in mind that without certification, standards may vary.

If providers are making green claims, you should feel free to ask questions. You may want to refer to the GBC Four-Part Green Burial Guide (see the resources section), which offers guidance in making informed decisions when dealing with providers, whether GBC-certified or not.

#### **6. Can I be buried on my own property?**

The laws regarding this vary by location, but are generally more permissive than one might expect. Among other regulations, states may stipulate minimum property size, allowed proximity to water, and that an easement be placed on the property. This last item can affect the value of the property, but some states make allowances in their tax code to incentivize easements. If there is a natural burial preserve near your home, burial there may offer the most ecological value.

#### **7. If someone has had radiation, chemotherapy, or an infectious disease, can they still receive a green burial?**

Yes. The vast network of roots, fungus, microbes, and animals in the earth function as a remarkable filtration system. As an extra precaution, most guidelines require burial plots to be at least 50 feet from water. Furthermore, disease ceases to be infectious soon after death, and radiation and chemo will dissipate. Also, the conventional alternatives do not actually offer the sealing away of those things, as popular belief may lead one to think.

#### **8. I like the idea of green burial for myself or a loved one, but I don't know if I want the home funeral aspect. Can I do one without the other?**

Certainly. One can choose green burial without a home funeral and vice versa. There are many funeral directors who will accommodate a green funeral, and there is no expectation that you or your community need to be equipped to handle a home funeral. It's simply a matter of knowing what you want, knowing your rights, and finding the right provider who will work with you.

#### **9. Can I donate my organs to science but still have a green burial?**

Generally speaking, yes, one's organ or organs can be removed prior to green burial. One exception would be that in the case of whole body donation, eventual green burial would probably not be possible, as bodies used in laboratories and medical school classes are typically embalmed the conventional way.

#### **10. Can a pet be given a green burial?**

Many natural cemeteries allow the interment of pet remains, whether whole body or cremated. There is sometimes an assumption these days on the part of veterinary staff that a deceased pet's human companions would prefer cremation, but many people find the

ritual of returning their pet's whole body remains to the earth preferable to cremation. As with natural human burial, many derive comfort from knowing that their companion is now a part of the earth and plants in that particular place. Some choose to bury their animal friend close by in their own yard, and others find comfort in choosing a green cemetery dedicated to ecological preservation and restoration, knowing that it will help ensure habitat for the many other animals.

Some state laws or specific cemeteries may prohibit human and animal burial in the same area, but that is not always the case. We asked Dr. Billy Campbell, green burial pioneer and co-founder of Ramsey Creek Preserve, to share something on the meaning of offering green burial to a beloved pet. He told us this beautiful story:

"When asked if we bury pets, our answer is 'of course we do'. Ramsey Creek is a nature preserve, and all sorts of animals live and die there: it is their home, after all. The land is the birthplace and graveyard for all manner of insects, reptiles, mammals and birds...this is actually true for most conventional cemeteries, but more-so at places like Ramsey Creek because we have better habitat. Why cemeteries would single out pets as beings-non-grata is beyond me.

"Other than lying on the couch with us, our Jack Russell Phoebe was happiest walking and running in the woods, where the smells must have been fantastic for her. When an accident claimed her life we were crushed, but I knew where she had to be buried: next to my spot down by the creek, where we planted a rhododendron on her grave. She died in the spring, and every year I think of her when the rhododendron blooms."

#### **11. What are the ways in which green burial protects and restores land?**

Green burial protects the land in a number of ways. On a legal level, the land is deeded as a cemetery, which offers certain protections. Deed restrictions and conservation easements provide additional assurance that the land will stay a nature preserve into perpetuity. Moreover, socially, there is an understanding of greater respect around the sacredness of a burial ground.

Additionally, some of these sites have the mission of adding on more land to grow their conservation area. Some are adjacent to other protected areas like national and state parks, creating important buffer-zones and biological corridors. And the work of natural burial grounds extends beyond just legally protecting the land. Restoring it to a fully functioning ecological space is part of the mission of many sites.

Furthermore, the nutrients and organic material returning to the earth do indeed nourish the environment, creating a richer ecosystem.

Every site has a unique situation, and therefore unique conservation stories. For example, Foxfield Preserve in Ohio is reforesting their woodland and at the same time restoring the adjacent prairie whose soil was depleted from years of over-farming before the land became a natural cemetery. They are situated along the migratory route of one of the planet's most spectacular migrations – the continent-wide journey of the monarch butterfly. The species is suffering from rapidly disappearing milkweed, which they need to lay their eggs on and also feed off of as caterpillars. Foxfield is removing invasive species and planting native ones, including milkweed, to help the butterflies on their impressive journey.

## **12. Why isn't a lawn considered "green"?**

A typical lawn cemetery often involves mowing, chemical fertilizers, pesticides, herbicides, and supplemental watering. While the grass can indeed function as something of a carbon sink (absorbing carbon out of the atmosphere), the carbon emissions associated with lawn care far outweigh that benefit. (It's also worth noting that concrete vaults and caskets made of precious wood or metal add even more embodied energy and create a larger carbon footprint.)

The care of a natural cemetery can be characterized as using a "lighter hand on the land." There is minimal or no mowing and watering, and no chemical fertilizers, pesticides, or herbicides are used. Machinery may be used for digging a grave (especially in winter) or for creating trails, and some extra watering or care may be called for during restoration efforts, but the idea is that a functioning natural area will mostly take care of itself with less need for intervention.

A natural landscape's capacity as a carbon sink varies greatly depending on the specific ecosystem – a forest will absorb much more carbon than a desert, for example. But the ecological benefits go beyond issues of carbon. Whereas a lawn has very limited ecological function, an intact or restored ecosystem provides valuable resources like food, shelter, and migratory corridors for animals. It protects the quality and quantity of potable water, enriches the soil, and filters the air.

Also, not all cemeteries are prepared to go completely green. The Green Burial Council has partnered with The Audubon Society to create guidelines on how conventional cemeteries can still "green up" their land by minimizing mowing, watering, pesticides, etc.

Lastly, it is also worth mentioning that many naturally occurring grassland and prairie ecosystems are of tremendous ecological value, and should not be confused with a conventional lawn.

### **13. What is a vault?**

Many people do not realize that in a conventional cemetery the casket is placed into what is known as a vault, a large container typically made of concrete, but also sometimes bronze, steel, or plastic. This keeps the ground from sinking, allowing for mowers to be used atop graves.

According to Green Burial Council standards, a green cemetery cannot use vaults. The production of the materials used is energy-intensive and polluting, and the vault's presence impedes the process of decomposition and regeneration.

Though the issue of sinking is less of a concern in green cemeteries, due to the lack of mowing and the use of lower profile caskets and shrouds, it is attended to through a practice known as mounding. Mounding is a natural way to deal with the situation where, as the casket or shroud and the body decompose, the ground sinks. A mound of earth is placed atop the grave, often adorned with flowers, pine boughs, or other natural elements, and settles over time.

### **14. Why isn't cremation considered "green" if it isn't wasting land?**

Cremation can be a meaningful ritual for some. However, it is often opted for because someone thought it was the most environmentally friendly option or that they simply didn't respond to typical, conventional practices. The truth is that cremation requires quite a lot of fossil fuel to achieve the high heat and long burn durations required. Beyond that, the process creates particulate pollution and releases CO<sub>2</sub>, mercury, and other toxic chemicals into the atmosphere.

Many crematories do have filters of varying effectiveness. To further mitigate the impact, some people recommend contributions to carbon-offset funds. These things certainly do help, but in the end, cremation still creates pollution and uses significant amounts of energy. What many people find comforting about green burial is that it is a non-invasive process, that the body's nutrients are recycled and not destroyed, and that no energy is being added to a self-contained system of regeneration.

While cremation can arguably be considered greener than the perpetual lawn care of conventional cemeteries (with the mowing, pesticides, fertilizers, copious watering, etc.), the beauty of a green cemetery is that you aren't wasting land at all – you're saving it! The

idea is that you are helping create an ecologically and socially thriving place, which can clean the air and water, provide habitat and food for animals, and also be a space for people to enjoy.

### **15. What does it mean if a cemetery is Green Burial Council certified?**

The GBC's certification program for burial grounds offers three levels of standards, and clearly distinguishes between them, so consumers can see the environmental goals and benefits of each site. According to the GBC, it also requires cemetery operators to commit to a certain degree of transparency, accountability and third party oversight. And it prevents future owners from going back on whatever ecological or aesthetic promises have been made -- from limitations on burial density that protect a local ecosystem to prohibitions against the use of monuments that would negatively impact a viewshed.

The Green Burial Council certifies three categories of cemeteries: Hybrid Burial Grounds, Natural Burial Grounds, and Conservation Burial Grounds.

Hybrid Burial Grounds are conventional cemeteries offering the option for burial without the use of a vault or outer burial container of any type (partial, inverted or otherwise). Hybrid Burial Grounds must allow for any kind of burial containers including shrouds (including reinforced).

Natural Burial Grounds require the adoption of practices/protocols that are energy-conserving, minimize waste, and do not require the use of toxic chemicals. A Natural Burial Ground achieves GBC certification by prohibiting the use of vaults (partial, inverted or otherwise), vault lids, concrete boxes, slabs or partitioned liners, and by prohibiting the burial of decedents embalmed with toxic chemicals, as well as by banning burial containers not made from natural/plant derived materials. It must have in place a program of Integrated Pest Management (IPM) and be designed, operated and maintained to produce a naturalistic appearance, based on use of plants and materials native to the region, and patterns of landscape derived from and compatible with regional ecosystems.

Conservation Burial Grounds, in addition to meeting all the requirements for a Natural Burial Ground, must further legitimate land conservation. It must protect in perpetuity an area of land specifically and exclusively designated for conservation. A Conservation Burial Ground must involve an established conservation organization that holds a conservation easement or has in place a deed restriction guaranteeing long-term stewardship.

### **16. How much does a green burial cost?**

2.4 million Americans die every year, currently amounting to an annual US funeral industry gross of \$15-20 billion. The average American funeral costs between \$7,500 and \$10,000. Green burials tend to be less costly, given their relative simplicity. There is no vault or



monument to buy, nor embalming to pay for, and the coffins or shrouds used are generally more affordable than coffins used in conventional burials. The price of a grave at a green cemetery, including a marker (but not a casket, shroud, or any service outside of the cemetery), ranges from \$800 to \$3,500, with some of that cost generally going toward conservation and restoration.

### **17. How do gravestones or grave markers work in a natural cemetery?**

In a natural cemetery, conventional, upright markers of marble, granite, or concrete are not used. Beyond that stipulation, the details are often decided upon by the particular cemetery. A natural stone, sourced from the local environment if possible, is often used and placed flat on the ground. Alternatively, some meadow cemeteries will have a large memorial boulder with the names of those buried inscribed collectively. Some sites are even using GPS markers, which can be detected with a mobile device.

Whether or not a stone with a name, dates, or epitaph is used to mark the sacred space, many find meaning in special memorial plantings on the grave – and comfort in the knowledge that the land they are helping to protect is also their memorial.

### **18. What is the typical depth of a green burial?**

Three to four feet is the typical depth of graves in a natural cemetery. This keeps the majority of a body's nutrients within the root zone of the plants growing there, as well as within the area allowing for aerobic activity. This means oxygen is available to the microbes present, resulting in decomposition that is healthier for the environment. Furthermore, the ritual of including flowers, boughs, and other natural elements in the grave assists this processes by creating channels that allow for greater circulation.

### **19. How do you bury in the forest or other natural spaces without disturbing the roots of trees and other plants?**

A properly managed natural cemetery is cared for with this very much in mind. Strategies for mitigating this concern include limiting the number of burials per square foot, which is typically considerably lower in a natural cemetery than in a conventional one; considering the timing of burials in any given root zone, so that no one area receives more disturbance than it can recover from in a given period; and giving extra care to plants whose roots have been disturbed, in the form of compost, mulch, and perhaps supplemental watering. For smaller plants, it is sometimes possible to put the plant aside with the roots intact, and replace the intact root ball and plant once burial has occurred.

### **20. Will natural burials attract animals that could dig up the bodies?**



According to Ramsey Creek Preserve, the first conservation burial site in the US: “Burial is a very ancient and very successful ‘low tech’ solution for the concern that animals would be attracted to bodies. Pioneer cemeteries located in wild areas that contained animals such as grizzly bears were not disturbed. In the last decade at Ramsey Creek, we have seen absolutely no evidence whatsoever that animals are attracted to natural burial sites, despite the presence of dogs, coyotes, and the occasional black bear. Anyone who has ever dug or filled in a grave would be doubtful about such worries. Even relatively shallow natural burials where no casket is used are safe from animal interference.”

Most animals that might be present in the diverse habitats where green burial occurs lack a sense of smell that goes beyond about 18 inches or so in the ground. This consideration would also be part of the required ecological survey. And given green burials occur at about 3-4 feet, it's highly unlikely any animal would be able to detect the buried remains.

## **21. Will burying people without vaults and without embalming hurt water quality?**

According to Ramsey Creek Preserve, the first conservation burial site in the US: “Actually, we expect that creating memorial landscapes will protect or improve existing water quality. The main threats to water quality relate to intensive agriculture and urbanization, with the associated water use, erosion, chemical and petroleum product run off and animal waste. Conventional cemeteries also use a great deal of water for irrigation, and are heavy users of fertilizers and chemicals. They also bury thousands of gallons of chemicals used for embalming-some of which can leak out over the years (although it is doubtful that the amounts will be harmful to people).

While the human body contains bacteria and viruses at death, many of these die (or become inert) within hours or days; almost all are inert within 5 years. Before any surface water is contaminated, germs must percolate through many feet of soil and rock, and then exit via a spring, a process that can take many years. Studies in Great Britain suggest that the risk of any viable germs making it from a cemetery to surface water is very slim indeed. If large numbers of bodies are buried immediately above the water table during a short period of time, it is possible that some of the germs could reach ground water, but the scientific studies suggest that even then, the only warning is not to drink untreated well water under or within 75 feet of that area.

"In our memorial landscapes, we do not bury immediately adjacent to streams, and the density of burials is much less than for conventional cemeteries. By returning the areas to natural vegetation, we expect an improvement of adjacent waterways-and greater biological diversity over time."

## **22. Why do we embalm and why does the funeral industry consider it necessary?**

The funeral industry has created a perception that embalming is a public health issue when this is not necessarily the case. There is little to no public health hazard, as long as the body is kept at low temperatures, with the help of ice packs, dry ice, or refrigeration, or buried within 48 hours of the time of death.

It can be argued that chemical based embalming does have its practical purposes, such as transport, storage, and sanitation of the body, which are convenient in the management of a funeral home. Funeral directors often admire the ability of formaldehyde, and the other active chemical preservatives, for their ability to make the dead body feel firm and return a lifelike hue to the deceased, making them appear as though they were just sleeping. The “memory picture” is an industry term for the last image the family will see of their loved one when they are displayed in the casket. They maintain that it is very comforting for families to have this final memory. This can be true, though many also find comfort and closure witnessing the reality of the situation, as well. And you do not need to use chemicals and embalming in order to have a viewing.

Before opting for embalming, it should be known that it is incredibly invasive. (We would like to warn you that the following description is graphic.) According to the book “Grave Matters,” there are two stages to embalming. The first, known as arterial injection, involves draining the blood and replacing it with a liquid preservative, the main active ingredient of which is formaldehyde, but which also contains methanol, phenol (a preservative), and a pinkish dye formulated to stain body tissue to a lifelike tint. The second stage aims to disinfect the abdominal cavity by removing all the organs and flushing the system with disinfectant. Modern embalmers have invented an efficient tool for this procedure, called the trocar. This is a long, hollow needle, which connects to plastic tubing and an aspirator. The device is inserted through a hole in the abdomen and vacuums up the lungs, heart, stomach, colon, intestines, liver, and bladder, as well as any accumulated fluids, and purged into the home’s septic tank or straight into the sewerage system. The body cavity is then pumped full of formaldehyde and phenol and finally stopped up with a cotton plug or trocar button. Then the embalmer completes the more exterior procedures, which include the sewing shut of the jaw and eyes, hair washing, makeup, dressing, and lowering the body into the casket.

Mark Harris, author of “Grave Matters,” asserts that no federal laws, nor rarely any states’ laws, require a body to be embalmed, except sometimes during transportation. The few studies that examine the public health benefit to embalming show mixed results; and, in some circumstances, embalming may actually increase the risk of spreading communicable diseases. A British report on the topic suggests that, “Opening cadavers

infected with tuberculosis is dangerous.” Hawaii and Ontario, Canada, even prohibit the embalming of bodies infected with half a dozen communicable diseases.

All of this does not even take into account the fact that many municipalities allow funeral directors to release their embalming effluent into the sewerage system, often untreated, according to “Grave Matters” as well as the Funeral Consumers Alliance. In other areas, though, this practice is regulated by the Environmental Protection Agency.

It is also worth noting that there is one GBC certified non-toxic embalming fluid, though the invasive process remains the same.

A funeral director’s stated mission is almost always to provide for the needs of the family, and most have learned through their industry that embalming is undeniably what a customer would want. It’s up to each individual to make a decision for themselves about what suits them or their loved one. It is good to know all the facts and to let your wishes be known.

### **23. What is toxic or cancer causing in the embalming fluids?**

The most toxic ingredient in embalming fluid is formaldehyde, which is a known carcinogen, according to The Occupation Safety and Health Administration (OSHA). A study by the National Cancer Institute released in late 2009 revealed that funeral directors have a much higher incidence of myeloid leukemia. And many other numerous studies found that embalmers and funeral directors exhibit a higher incidence of leukemia and cancers of the brain and colon, as well as severe skin irritations known as “embalmer’s eczema.”

The issue of embalming toxicity is largely one of workplace safety, as it mainly affects funeral directors themselves, but environmental concerns have also been raised. An embalmed body, once it starts to decompose, may leak formaldehyde and other toxic chemical ingredients into the cemetery’s groundwater, which could then run into the community’s drinking water. But there have been no large-scale conclusive studies on formaldehyde contamination yet. However, according to “Grave Matters,” a number of university lead studies have found arsenic, a primary ingredient in embalming fluid dating back to the American Civil War era, in the groundwater of historical cemeteries of that period.

The production and distribution of these chemicals also has a negative environmental impact. It should also be emphasized that the sanitation and preservation of a body can almost always take place without the use of chemicals, and is actually practised this way in most of the rest of the world.

## **24. Why are dental fillings and implants a problem with cremation but not so much with burial?**

Dental fillings often contain mercury, particularly for the baby boomer generation and older, and implants are made of synthetic and/or non-biodegradable materials. During a cremation, when these are burned at extremely high temperatures (up to 1270°F or 690°C), they convert into noxious gas and toxins, and are emitted through the crematorium's chimney, which pollutes the atmosphere. It is not ideal to bury these materials either, as they will not break down and return to the earth; however, it is preferable to burning them, because the material will remain relatively inert (depending on the material used in the implant), staying put with minimal leaching rather than being turned into liquid or gas, which will eventually contaminate the surrounding environment.

## **25. What is the history of conventional, “American-style” funeral practices?**

To some extent, many of us have lost the ability to care for our dead, though we used to do it all the time. During the American Civil War, when large numbers of people were dying far from home, the preserving effect of arsenic was exploited to allow for soldiers' bodies to make the voyage home to their families. The practice of embalming was further popularized when Lincoln himself was embalmed and brought around the US on tour for the whole nation to pay their respects. Around that time, the first mortuary schools (today still commonly owned by chemical companies) were founded, and an industry was born. Since then, the industrialization of funeral service began to grow.

## **26. What is the history of natural cemeteries in the US?**

During the mid-1800s, the US saw the creation of the first “garden cemeteries” or “rural cemeteries,” such as Mount Auburn Cemetery in Cambridge, MA and Green-Wood Cemetery in Brooklyn, NY. These now-historic cemeteries predate public green spaces like Central Park, and are credited as the inspiration for urban parks in the US. These and others like them remain spectacular, treasured sites, yet they vary in groundskeeping practices in the extent to which they practice natural burial.

The contemporary conception of a natural cemetery began to take shape in the US in the 1990s, with Kimberley and Dr. Billy Campbell creating the nation's first conservation burial ground, in South Carolina. Billy remarks in *A Will for the Woods*, “The best examples of tallgrass prairie left in places like Iowa were old cemeteries. And so that was part of the inspiration. If by accident a cemetery can save significant biodiversity elements, why couldn't you do it by design?”

**27. I'm curious about the similarities between green burial and some ancient religious burial traditions. Can you talk a bit about that?**

Muslim and Jewish traditions do not allow for embalming, and the body is usually laid to rest as immediately as possible for Muslim burial and within 24 hour for Jewish burial. Muslim burial traditionally uses only a shroud, while Jewish burial allows for a shroud or a plain, simple casket. Ancient Christian burials as well were mostly shroud based, as Jesus was buried in one. In Jewish and Muslim burial, the body has to be touching the earth so vaults are rarely used. Nowadays, it has started to become a practice of using inverted vaults in Jewish cemeteries where the bottom of the vault is removed so the body is still touching the earth. This use of inverted vaults is a modern practice and not at all tied to any Jewish tradition. In some ways, green burial is a simple return to ancient traditions and true “ashes to ashes, dust to dust, earth to earth” burial.

**28. Are there funeral traditions or practices other than green burial that are environmentally friendly?**

There are. Tibetan sky burial is a religious and spiritual funeral ritual where the deceased is returned to cycle of life not through burial, but through a recognition of the important role scavengers play in the food chain. Monks oversee the process of bringing the deceased's body to high ground on a mountain, where it is exposed to vultures and other animals.

Burial at sea is another tradition common to various cultures. The extent of the ecological benefits are not very certain, but it would seem to fall under the category of returning naturally to the earth. Experts conducting this practice must have a clear understanding of tidal flats and all forces at play so that the body will be brought out to sea and not back to shore. It is also worth noting that unlike a green burial, which can help conserve the land of the burial ground, there are currently no models to our knowledge for using burial at sea to offer legal protections to marine areas.

**29. Are there any other disposition methods?**

You may have heard of modern techniques such as “resomation,” “cryomation,” or “promession,” which use either organic or non-organic solvents to dissolve or freeze-dry a body, effectively functioning like cremation, but with less energy use. However, this process still consumes energy, and many green burial experts feel the lack of true ecological benefits means they can't really be considered “green”.

**30. Is the natural or green burial movement happening in other parts of the world?**

The movement to promote a return to more simple home funerals, as a reaction to the industrialization of the modern funeral industry, was initiated in the UK in 1992. Nicholas Aubrey founded the organization The Natural Death Centre there in order to build an

educational resource around this issue. In 1994, The Centre established the Association of Natural Burial Grounds (ANBG), which helps individuals establish new natural burial grounds and provides guidance to existing ones. It also requires members to comply with their code of conduct. According to ANBG, the UK now boasts over 270 natural burial sites. Even though most of these sites are small (less than 5 acres), which can limit conservation value, it is exciting to see such a robust interest for this option in the UK.

Aubrey's work was a part of the inspiration for Dr. Billy Campbell to open Ramsey Creek Preserve, the first conservation burial ground in the world, in 1998. The idea of a conservation burial ground is America's addition to this concept. (See definition for a conservation burial ground in question 15.)

The movement has also spread to Australia where the founder of the Green Burial Council (GBC), Joe Sehee, now resides, as well as Canada where there are at least five natural burial sites. In an attempt to initiate global environmental standards, the Green Burial Council is working on establishing a GBC International.

(Please see the resources section if you are looking for more info on the movement in these countries.)



## General Timeline for Post-death Care and Arrangements

**Please note:** Links in this PDF appear as underlined green text, just as on [CINDEA's](#) website. [In some cases, the name of a section of a webpage or a PDF appears in green but not underlined; these are not actual links.] If you are having difficulty making the links work, click on the Hand icon (which looks like a cartoon outline of a person's hand) in your PDF reader. The Hand icon can be found on the toolbar that begins with an yellow-orange file-folder icon at the top of your screen, just below the menu bar.

### Well in Advance of the Death

- Check if ***burials on family/private property*** are allowed in your county or region; and if so, ensure that all required permits and conditions are fulfilled. Where permitted, regulations usually require a burial to be at least 4.5 to 5 feet deep. In Canada, it is usually only in rural areas that private burial is permitted: and you will need to check with your local county/municipal-area office, your MLA or MPP, or a lawyer to find out if this is possible in your locale.
- The ***Notification of Expected Death in the Home*** form (which may be called something different in your province/territory) can often be completed by a physician. If this document exists, then it is not required that a medical person be immediately called into the home to formally pronounce death.
- Make sure that ***all personal documents and information*** are readily available, as these will be needed for the final arrangements, the Death Certificate, and dealing with the will/estate. These documents may include Advance Directives/Expressed Wishes, Representation/Health Proxy Agreements, Power of Attorney, Will (see our [Advance-Care Planning](#) page); and a clear list of information about the Death Journeyer's affairs, such as assets, pensions, next-of-kin, etc.
- Find out which Funeral Homes are willing to provide '***a la carte***' services, such as transportation of the body, if you think this might be needed. [see Resources in Canada Post-death page — [Post-death care information](#) (legal information and regulations re filing documents, etc.)]
- Check the ***width of the doorways and adjoining hallways*** in your home, to ensure that whatever coffin you get will fit through them.
- ***Arrange for a coffin or shroud*** — making sure that it is the right size for the Death Journeyer, and record its measurements (for checking ease of movement into and around the home). If you choose a cardboard/pressboard coffin and plan to decorate it, paint it with primer and/or the background colour in preparation for the decorating.
- Make initial ***arrangements for burial or cremation***, and funeral/memorial services. We advise that you visit the cemetery or crematorium, so that you have a visual memory of what is available before you make the final arrangements. [Note: many cemeteries and crematoriums have a chapel that can be used for the ceremony — sometimes for free — which you might wish to use for the service, especially if there would be more people attending than a private home would allow for.]
- It is wise to start ***writing an obituary*** before an expected death, so that you are able to give considered time to it, and so that the Death Journeyer can have input into it if they wish — although it will need to be finalized after the death (for date of death, date/place of funeral or memorial service, etc.).



### Just Before the Death

- A **Permit to Transport the Body** may be required to move the body from home to the cemetery or crematorium, or from the institution where the death took place to the home. A rented or family/friend's car is sufficient, as long as it is able to carry the body laid out flat (station wagon or van). If required in your province/territory, the permit will be available from your local Vital Statistics, or Business Practices and Consumer Protection Authority offices (check [CINDEA's Post-death care information](#) for links to offices in your province/territory).
- **Gather supplies** to care for the body post-death — including ensuring that you have a readily-available source for dry ice (see the [Post-Death Physical Care PDF](#) on our [Post-Death Care](#) page) Whether or not you are following a specific tradition in releasing the soul, it is wise to gather whatever readings, chants or other implements (candles, etc.) will be used in advance, so that they are readily available at the time of death.
- You might want to *rent a coffin* (possibly placing the to-be-decorated-later cardboard coffin in it) for ease of transporting the body (from hospital/hospice/residential facility, or around home) or the time of 'lying-in' at home. Check with your local Funeral Homes to see if this is possible.

### Immediately after Death

- **Do nothing but be present.** Say your 'final farewells', etc., or do any traditional ceremonies that guide the soul out of the body (selected readings, prayers, chants, etc.). [Note: in most religious or ethnic traditions, this period immediately after death is considered a sacred time.]
- **Do NOT phone 911, paramedics, or the physician** (for at least one hour) — unless something unexpected has happened (in which case a coroner may need to be involved).
- **Start cooling the body** by opening the windows, or setting up a fan. You can turn up air conditioning, but not too high — be aware both that it may become too cold for visitors, and that you will also speed up the time that rigor mortis sets in (which would interfere with washing/dressing the body).
- **Record the approximate time of death** for the Death Certificate and other records. Do not trust your memory here — because at this time of intense emotion, memory may not be as reliable as it usually is.
- Begin whatever post-death **vigil or soul care** is appropriate (with attention to the need to wash the body before rigor mortis sets in).

### Within the first few hours

- Arrange for a physician or registered nurse to complete the **Medical Certificate of Death** (this may be called something different in your province/territory), which will be required by Vital Statistics (for the formal Death Certificate) and for burial/cremation.
- If there is no *Notification of Expected Death in the Home* form, and the Death Journeyer is not registered with a hospice society, **call the physician or coroner** within about 2 hours — the details of what is required may be somewhat different in each province/territory (your local hospice society should be able to clarify what is required).
- In your province/territory, you may be required to complete a **Registration of Death** (may be called something else in your area) and file it with Vital Statistics. [Note: because our culture is used to having a funeral home formally deal with things — such as Registration of Death — you will need to clarify to your Vital Statistics office that you are not using one and ask for the forms that the funeral home would usually address. Ask for a supervisor at the Vital Statistics office, or someone who knows the law regarding not using the assistance of a funeral home.]



- If you are moving the body from a hospital, hospice or residential-care facility, you may be required to have a **Permit to Transport the Body** in hand. You will definitely need to have a **Permit for Burial or Cremation** available (free from your Vital Statistics office, once submitting a Registration of Death and/or request for Death Certificate).
- **Wash and dress the body** before rigor mortis sets in. [Note: some Death Journeymen may wish to return to the ground as they were born — if so, leave the body naked and cover it with a sheet.] See the [Post-Death Physical Care PDF](#), also on our [Post-Death Care](#) page. For further clarification, we recommend the webpage [Special Circumstances in Home Care of the Body](#).
- **Further cool the body** using dry ice. Treatment and placement of dry ice is clarified in the [Post-Death Physical Care](#) and [Using Dry Ice and Gel Packs](#) PDFs on our [Post-Death Care](#) page. [Note: because dry ice dissipates, you will not want to buy it until the death has actually occurred — although it is wise to ensure a source for it beforehand.]

### Within the first day or two

- Complete the **Registration/Statement of Death** (within 48 hours after death) — available from Vital Statistics.
- File both the **Medical Certificate of Death and Registration/Statement of Death** with your local Vital Statistics office — this may need to be done earlier if you are transferring the body from an institution (hospital, hospice unit/house, or residential care). [Note: not all provinces/territories have a formal Registration/Statement of Death form — you should be able to find information on how to register the death from your local Vital Statistics office.]
- Finalize an **obituary**. [Note: as obituaries are expensive, you might prefer to use an on-line memorial service. However, they do not serve exactly the same purpose as an obituary, as they are not accessible through the obituary section of the newspaper, where most people check for friends who have died. You can consider paying for a short obituary that includes the URL for an on-line memorial page. Many newspapers now offer an on-line guestbook — for free or a small extra charge — when an obituary is placed in their paper. However, there are also lots of non-newspaper-affiliated free ones available on the web. See a list of some at our Resources in Canada — Post-death page under [On-line Memorials](#).]
- Obtain a **Permit for Burial or Cremation** from your local Vital Statistics office (which is free in most provinces, after both the Medical Certificate of Death, and possibly a Registration of Death, are filed). [Note: cremation can only happen after a waiting period — usually 48 hours after the death.]
- Obtain a **Permit to Transport the Body** from your local Consumer Protection office, if one is required in your province/territory (it may be on-line on your province/territory's website — however, not all provinces require one).
- Send out a **notification of death** to all of the Death Journeyer's family and friends, and any communities/organizations that they were part of. This can usually be done through e-mail (and making use of the Death Journeyer's e-mail address book) — although many will hear about the death and any memorial service through the obituary. If an on-line memorial/guest book is being used, include its URL in the notification as well as in the obituary.
- Arrange for **visitation** (wake, lying-in) for family and close friends.
- Begin **customizing the coffin** — especially if a cardboard/pressboard coffin is used, it can be painted with meaningful symbols and sayings. [Note: if a Green Burial has been chosen, check with the cemetery as to which kind of paints and other decorations can be used — usually only biodegradable materials.]
- Make **final arrangements for the burial/cremation**, as well as any graveside or cremation-witnessing ceremony.

### Within 3 - 4 days (or just before the burial/cremation)

- Unless the body is to remain unclothed, you may want to ***dress your loved one*** with the final clothes that they will be buried or cremated in (i.e., after rigor mortis has passed). If the Death Journeyer chose a shroud, now is the time to shroud the body (see information on 'shrouding the body' in our [Post-Death Physical Care PDF](#) on the [Post-Death Care](#) page).
- ***Review your wishes*** with the cemetery or crematorium staff to ensure that there are no complications with your wishes for the graveside or cremation ceremony.
- Just before burial or cremation, you may wish to also hold a ***special farewell ceremony*** at home for close family and friends, with the body present (a home version of an open-coffin visitation or funeral).
- Set a date for a ***memorial service*** (if chosen), and perhaps include the date in the obituary. [Note: memorial services are usually held some time after the death — a week to several months, depending on the family's need. Family and friends may be travelling from a distance to attend. As well, the Death Journeyer's caregivers usually need time to process the death, take a break from the post-death care and burial/cremation service, and attend to estate issues — as well as their own lives.]

### Within the next week to 10 days

- Make sure that there are enough ***copies of the Death Certificate*** (formally certified or photocopies) for the Death Journeyer's executor to handle the estate. [Note: you will need a separate copy for each bank account, property holding, pension, etc. Check with Vital Statistics or your Pan-Death Provider as to which ones have to be formally certified, and which ones can be photocopies.]
- Begin ***preparing for the memorial service*** (location, notification, the ceremony itself, etc.).
- If the executor is not a paid professional, begin ***dealing with the will***, and any actions required by it — transfer or sale of house, distribution of personal items, etc.
- Consider ***grief counselling*** (though probably for a later date) — listings of individual practitioners or support groups are available through your local Hospice Society, any seniors' or family-care organizations, or on our listings for [Grief/Bereavement Counselling](#).

Please feel free to contact us at [contact@cindea.ca](mailto:contact@cindea.ca) if you have any questions,  
OR if you find out any relevant information (not already on our site)  
about your province/territory or municipality.

Notes:

# **Checklist for Planning A Home Funeral**



By Donna Belk and Sandy Booth

[www.homefuneral.info](http://www.homefuneral.info)

Austin, Texas



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## **Checklist for Planning A Home Funeral**

Family planned funerals (the body is present) or memorials (the body is not present) can be very small and intimate and take place at the deceased's or another's home. They can also be large and involve a whole community of people, and can take place in a church or civic center. More people are choosing family-planned funerals and memorials because they can be more meaningful and personal. Having a meaningful way to honor your deceased loved one helps with the healing from their loss.

Planning a large funeral or memorial can involve a lot of details. Handling the details can be too much stress for those most deeply grieved. It is helpful to have a person to coordinate the entire event and work with teams of people to get the job done. The checklist below is grouped with the idea of different people in teams working on different aspects of planning and coordinating the funeral or memorial. For those planning a small funeral or memorial you may need only a few items on the list below. Certainly not everything on this checklist needs to be done! It is simply a menu of items you might want to consider. Please feel free to pick and choose what is appropriate for your situation. And remember that you can't do it wrong. If you are honoring and loving that will come across.

### **How to begin**

Find a quiet, safe place to begin your planning. Give yourself permission to laugh, cry, remember, be angry, etc. Remember this is an event that will impact a lot of people within your circle of family and friends, so enlist the help of family and friends to help plan and coordinate the event. There are usually many friends available who would love to help if someone would only tell them what needed to be done. This gives the friends a way of feeling useful, instead of helpless.

Slow down, relax the breath, focus on what is important to you. Don't try to be brave or keep a stiff upper lip. This is the time to be soft and let other people help for it gives others something to do and makes them feel useful.

Put away all thoughts of "doing it right." There is no right way to plan a funeral. If it is meaningful and loving to you, then you can be assured that it is serving its purpose.

The family will need to discuss decisions related to the funeral or memorial. Find a balance between taking care of details and making sure family gets rest.

Some of the initial decisions to be made by the family are

- will the body be cremated, buried or bequeathed to medical science
- what type of funeral or memorial did the deceased want and what do the family members want, and where is the balance between the two
  - funeral service where the body is present
  - memorial service where the body is not present
  - a visitation or viewing
  - a graveside service
  - a combination such as a funeral service for the community and a graveside service just for the family
  - cremation with later commitment (burial of ashes)
- where will the funeral or memorial be held
- will there be a reception or gathering after the funeral
  - held in a home, park, church meeting room
  - provide a meal
- who will be the main person to coordinate the funeral or memorial arrangements
- what is the price range to spend on the entire funeral or memorial

### Service types

- A **memorial** service is when friends and family gather, but the body is not present
- In a **funeral** service, the body is present, and the casket may be open or closed
- A **tribute** can be held at the time someone dies, or years after their deaths. A tribute focuses more on the celebration of the person's life and the impact of their life on others.
- Instead of a funeral or memorial, consider a Celebration of Life, or Life Appreciation Ceremony
- **Committal** services are held at the gravesite before the body is buried, or held when cremated remains are being buried

## Goals

Define the goals you would like for this event. There is no right or wrong way to do it. It should simply fit the person who died and their family and friends. Honor the person who died and yourself without worrying about doing it right, or rules being broken.

Some sample goals you might want to consider are to

- honor deceased's life
- create closeness between family members
- ensure that the deceased's body is treated respectfully
- provide support to one another.

Ask yourself this question: When you leave the funeral or memorial, how do you want to feel? This will help guide you as plans are made.

## Main coordinator

- Decide who will do particular tasks. It is recommended that you write all the decisions down and actions taken.
- Contact the people who will help and organize into teams
  - help at time of the funeral or memorial
  - help in the home before, during and after the funeral or memorial
  - help at time after death with after-death care of the body
  - help with kids related to the deceased so they are not ignored
  - act as a bereavement person at the funeral or memorial



## The legal team

Obtain blank Certificate of Death and permit for final disposition and other forms as needed. These forms vary from state to state. This task alone may take two or three team members depending on if the family is handling the details of the burial or cremation, or using a funeral home.

- Information usually needed on Certificate of Death
  - full legal name
  - legal residence
  - length of time at current residence
  - date of birth
  - place of birth
  - mother's birth name and place
  - father's birth name and place
  - date of death
  - place of death
  - citizenship
  - social security number
  - occupation
  - employment or business history
  - marital history
  - spouse's full name
  - next of kin, addresses, relationship
  - executor's name and contact information
  - attorney's name and contact information
- gather any pre-planning documents with a funeral home or cemetery that might exist
- make arrangements with the cemetery or crematory for final disposition of the body
  - is there a title to burial plot
- it's a good idea to locate documents that may be needed in advance
  - will
  - birth certificate
  - marriage certificate
  - insurance policies
  - bank records
  - deeds to property

- vehicle ownership records
- military discharge papers
- citizenship papers
- tax returns

## **Team for after-death care of the body**

- take possession of the body if it is not at home
  - who will do this
  - who has a vehicle for transporting the body (van, SUV, pickup truck, station wagon), or would you prefer a hospital or funeral home to transport the body
  - where will the body be taken, what room will be used and how will it be set up
- will a coffin be used for moving the body, if so, who will purchase the coffin
- will the body be prepared for viewing
- For step-by-step instructions for preparing the body for viewing see resources at [www.HomeFuneralDirectory.com](http://www.HomeFuneralDirectory.com).

## Team for notifying people

- how will friends, family and the community at large be notified
  - phone call, email, note in the mail
  - all friends need not be notified the same way (For example if some people are going to be invited to the funeral they will need to be notified right away. Other people may not be invited to the funeral and they could be notified by mail.)
- keep a list of the people that have been notified.
- prepare to answer these questions when you call people
  - will there be a vigil or Lying in State (if so, when and where)
  - will there be a viewing (if so, when and where)
  - will there be a funeral or memorial (if so, when and where)
  - if there is a funeral or memorial will they be able to say a few words about the deceased and if so is there a time limit they'll be able to speak
  - are there things friends can do to help (they will probably ask)
  - will flowers be accepted, and, if so, where should they be sent
- does the family want an obituary
  - who is going to write it
  - what are the costs of an obituary as it can sometimes be cost prohibitive
  - will obituary go in a newspaper, or an online obituary
  - would a program at the memorial or funeral be more appropriate than a traditional newspaper obituary
  - is there a photo available of the deceased for the obit
  - information normally included in an obituary
    - schools attended
    - military record
    - special awards and accomplishments
    - accomplishments
    - children and family
    - photograph
    - family history
    - work or professional history
    - religious affiliations
    - civic groups

- hobbies
- charities or special requests

## The ceremony team

- see Appendix A at the end of this document for common progression of ceremony at a memorial or funeral, and different ideas for a memorials
- who will be invited to the funeral or memorial ceremony
- are children invited, will there be people available to help care for children
- will the body be viewed during the ceremony, if so, where will it be located
- will clergy or the church be involved
- speakers
  - who would like to speak
  - does the family want a eulogy
  - poems, readings, verses
  - will others be allowed to speak impromptu at the ceremony
- music
  - who will pick the music and songs
  - any favorite melodies of the deceased that should be included
  - will the music be live (if so, who will perform), or from CDs (if so, who will handle the electronics)
- ceremony program
  - will a program be distributed at the funeral or memorial ceremony
  - if so, who will prepare it, print it and distribute it (information gathered for the obituary can be used in the program)
- ushers or greeters
  - put signs on door to welcome people
  - direct traffic
  - show people where to put coats
  - assist people in finding seats
  - distribute program or memory cards
  - point out guest book, memorial table, etc.
  - take care of food if attendees bring some
- pall bearers (if needed)
- guest register
- memorial table
  - photos of deceased

- objects loved
- notes, letters, cards
- memory book for people to write their thoughts or memories in, small slips of paper can also be used
- photos during the funeral or memorial
  - is a photographer wanted
  - disposable cameras for family and friends to use
- floral arrangements or potted plants
- donations
- determine need for
  - hearse
  - clergy car
  - family limousine
  - pallbearer limousine
  - flower car
- funeral logistics
  - if the body is present at the ceremony, how will it be transported to cemetery or crematory
  - who has a car suitable for transporting the body (station wagon, SUV, pick-up, van)
- reception after the funeral or memorial
  - location, time
  - appoint someone to be with the widow or widower (or those most deeply grieved)
- gatekeeper
  - someone to help the person closest to the deceased who may be in the greatest amount of grief to help handle situations that may come up such as someone asking prying questions, or asking for possessions that belonged to the deceased

## Team for supporting the family

- home coordinator
  - person to ask where things go or what to do so the mourners are not asked to handle the small details
  - create list of things people can do to help such as pick up empty plates or silverware, empty trash, water plants, etc.
  - someone to remain at the home of the deceased if the funeral or memorial will be held at a location other than the home (sometimes people show up at the home instead of the memorial location)
  - household management
    - childcare
    - pet care
    - lawn care
    - house cleaning
    - any small repairs that need to be done (change light bulbs, etc.)
    - errands
      - bank
      - post office
      - grocery shopping
      - bill paying
      - pickup from cleaners
    - final clean up
      - assemble a team of people to clean up after the ceremony or reception
      - have plenty of plastic trash bags on hand
- telephone coordinator
  - taking messages
  - put a message on the answering machine
    - thank callers for their concern
    - announcement of time and location for funeral or memorial service
    - help needed, if any
  - telephone answerer should be prepared to answer questions (print out this information and put it by each telephone in the home)
    - start time of the funeral or memorial service, where it will be held



- can you give me directions how to get there
- where are hotels close by I can stay at
- can someone pick me up at the airport
- what can I bring or do to help
- what are we supposed to wear
- details about the death such as when they died, how they died, who was present, did they suffer (people will ask)
- be prepared to answer tough questions, for example, “Bob always said I could have his bicycle, should I pick that up while I’m there?” A good reply is, “Unfortunately, we cannot distribute any property before the opening of the estate (or “before Bob’s wishes are known”).”
- food coordinator
  - where to store food
  - write down list of people that bring food so thank you notes can be sent later
  - if guests bring food in a dish that is to be returned write their name on masking tape and tape it to the bottom of the dish
  - meal planning for the family before and after the funeral or memorial
  - know what food is on hand and what you may need
  - prepare for visitors (have paper plates, napkins, utensils and cups on hand if the family is expecting many guests)
  - have a backup plan for what to do if there is too much food for the family to handle (donate to meal kitchen, ask guests to take home)
- guest coordinator
  - greet out-of-town guests
  - help make hotel arrangements
  - pick up out of town guests from airports

## **The Follow-up Team**

After the funeral or memorial contact the following organizations as appropriate

- attorney for transferring assets and probating the will
- accountant, tax preparer, to determine which returns need to be filed
- banks and credit unions, to locate accounts and safe deposit boxes
- insurance agents, to obtain claim forms
- social services, to learn about benefits
- social security, to stop any monthly checks and learn about benefits
- veterans affairs, to stop monthly checks and learn about benefits
- guardian, conservator, and agent under a durable power of attorney, to notify of death and the end of their responsibility
- creditors, to take care of outstanding balances
- utility companies, to change or discontinue service
- employer, to notify of death and learn about benefits
- newspapers, magazines, to stop services
- postal service, to forward mail
- computer accounts, transfer or close internet accounts, on-line subscriptions,

## Appendix A

### **Sample Order of Funeral or Memorial Service**

- Celebrant or officiator's Opening
  - Announcements (turn off cell phone)
  - Welcome
- Song, Prayer or Reading (interspersed throughout ceremony)
- Eulogy by Celebrant
- Personal Eulogies from friends or family, if any
- Rituals such as Candle Lighting (can be placed anywhere in service)
- Closing Remarks by Celebrant (Benediction, Blessing or Prayer if Religious or Spiritual)
- Disposition of the Body
  - Graveside Interment Service (also called committal or burial)
  - Service for cremains (the ashes that remain after cremation of a corpse)

It is best when the family or friends can speak about the deceased themselves through personal eulogies. Often this is not possible for them due to grief and overwhelming emotion. If the Celebrant is delivering the only personal eulogy, then it should contain not just a chronological listing of facts, but personal anecdotes or stories told in the voices of those who told them to you.

### **OTHER RITUALS:**

In addition to the words spoken, suggest ideas for other types of remembrances.

- A candle lighting is the most used, often younger children can participate.
- Some families like to leave notes or mementos in the casket if it is an open casket ceremony.
- Grandchildren or young children could leave drawings.
- If people are uncomfortable leaving something in the casket, have a memory box into which guests can drop a card describing a favorite memory of the deceased.
- Placing flowers on a closed casket.
- Moments of reflection for deceased or ancestors.
- The family can set up, either at the funeral home or the reception, a table with photos and other mementos from the deceased's life. Include photos of other ancestors to show family heritage.

### **SAMPLE FUNERAL ELEMENTS**

#### **Example of Traditional Opening Remarks:**

We have gathered here today to acknowledge the death of \_\_\_\_, whom we have all known and loved. When someone we care for dies, family and friends gather with sorrow in their hearts to grieve and give comfort to one another. We all grieve differently, but at times when death and loss come among us, often the presence of another person's company can bring understanding and support. Just being together, sharing our grief and our love, dissolves some of our loneliness and helps begin the process of releasing our sorrow.

Though we have gathered here today in grief and sorrow, we have also gathered here in celebration. \_\_\_\_ led a wonderful life here among and we are here to share our memories and give thanks for the time we had together. I'm sure each of you feels the ache of loneliness caused by her passing. But rejoice she touched you; that she was a part of your life, and her influence will survive in the unending consequences flowing from her character and deeds.

It may have been her goodness, her wisdom, and her energy. It may have been her devotion to family, her helping hand, and her courage. Or it may have been her loving smile and understanding. Remember these things and let them endure in your own acts and thoughts.

**Sample Candle lighting ceremony:**

This flame symbolizes the eternal light of spirit. This light is there before birth and continues beyond the death of the body. We light this candle in honor of \_\_\_\_\_, a beautiful person whose spirit lights the heavens as it always has on earth.

## Funeral Planning: Personal Information



*A form to help you record important personal information for use in planning a funeral, informing friends and relatives, and writing an obituary.*

### Important Personal Information For My Family

Personal Information	
Full Name:	
Address:	
City, State, Zip:	
Place of Birth:	Date of Birth:
Country of Citizenship:	Social Security Number:
Spouse's Name:	Maiden name:
Religious Affiliation:	Place of Worship:
Education	
High School:	Institution:
Undergraduate Degree:	Institution:
Graduate Degree:	Institution:
Career Information	
Employed as:	How long?
Employed as:	How long?
Employed as:	How long?

## Military Information

Serial Number:

Rank:

Branch of Service:

War Service?

*You may be entitled to full military honors in one of the national cemeteries. There is no charge for services of burial and your spouse may qualify as well. Check with the Veterans' Affairs Department Office, toll free at 800-827-1000. Please note that discharge papers are necessary to file for benefits.*

## Other Activities

Involvement in community or national organizations, clubs, affiliations, volunteering:

Favorite pastimes, hobbies:

## Parents

Father's name:

Place of Birth:

Mother's name:

Place of Birth:

## Children

Name:

Name:

Address:

Address:

Phone:

Phone:

Special Instructions:

Special Instructions:

Name:

Name:

Address:

Address:

Phone:

Phone:

Special Instructions:	Special Instructions:
<b>Siblings</b>	
Name:	Name:
Address:	Address:
Phone:	Phone:
Special Instructions:	Special Instructions:
Name:	Name:
Address:	Address:
Phone:	Phone:
Special Instructions:	Special Instructions:
<i>On a separate sheet of paper, make a list of all other relatives and friends to be notified at the time of death.</i>	

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For additional tools for caregiving or aging, visit [www.CaregiversLibrary.org](http://www.CaregiversLibrary.org)

# Funeral Planning Form



*As your loved one makes his or her funeral plans, use this form to record all of his or her wishes for final arrangements.*

**Final Arrangements for:** \_\_\_\_\_

## Memorial Services

Funeral home:

Funeral director:

Location of service:

To be officiated by:

Military/fraternal/social organization or lodge members to be present:

Pallbearers:

Veteran's flag: ☐ Folded ☐ Draped on casket

Music:

Reading or scripture selections:

Flowers: ☐ Yes ☐ No

Memorial donations: ☐ Yes ☐ No

Name of charitable organization:

Casket: ☐ Open ☐ Closed **OR** Cremated remains present? ☐ Yes ☐ No

Preparation and printing of the order of memorial services (*usually provided as part of service by funeral director with assistance from family*):

## Burial

Name, address, and phone of cemetery:



Cemetery documents located:	
Casket:	<input type="checkbox"/> Wood <input type="checkbox"/> Bronze <input type="checkbox"/> Copper <input type="checkbox"/> Steel
Burial Vault <i>(usually required by cemetery/may be purchased through funeral home or cemetery-check on pricing):</i>	
Property or crypt purchased?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Location:	
No. of spaces:	
Type of burial:	<input type="checkbox"/> Earth burial <input type="checkbox"/> Crypt <input type="checkbox"/> Mausoleum <input type="checkbox"/> Other:
Inscription to read:	
Other information or instructions:	
<b>Cremation</b>	
Name, address, and phone number of funeral home or cremation society:	
Urn:	<input type="checkbox"/> Bronze <input type="checkbox"/> Wooden <input type="checkbox"/> Marble <input type="checkbox"/> Other:
<b>Location of cremated remains:</b>	
Cemetery:	
Private estate:	
Final Disposition:	<input type="checkbox"/> Earth Burial <input type="checkbox"/> Mausoleum <input type="checkbox"/> Crypt <input type="checkbox"/> Columbarium <input type="checkbox"/> Other:
Alternative disposition:	
Type of memorial or monument:	
Inscription:	

## Preparing My Obituary

*On a separate sheet of paper, make a record of the following information.*

Name:

Spouse's name:

Date and place of death:

Children/cities where they reside:

Grandchildren/cities where they reside:

Siblings/cities where they reside:

Parents/cities where they reside (or resided, if deceased):

Date, time, and place of funeral or memorial service and burial:

Clergy/person officiating:

Address of funeral home:

Address of cemetery:

Memorial contributions may be made in lieu of flowers to: (optional)

Photo preferred:

Place and date of birth:

Education:

Wedding date:

Military service:

Employment:

Religious affiliation:
Other affiliations:
Significant achievements:

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# Death Expo

## Resource Book

### Track 4: Aging, Loss and Caregiver Support

#### Contents:

Options for Starting a Village in Your Community

Caregiving Guidelines

Self-Care Manual

## **Options for Starting a Village in Your Community**

This phase is a journey of discovery to understand if the Village model is right for your community and if there is a strong groundswell that can support the design and implementation.

First, you must assemble a group of interested people to act as a steering committee; people who will be members or volunteers and work to make your Village a reality. When putting together a Founding Steering committee you will want to ask yourself “What kind of people will help the Village to be successful?” Look for entrepreneurs, business people with backgrounds in marketing, fundraising, and human resources, but most of all you will need people who are passionate about the mission and will have time to create this critical opportunity for themselves and their neighbors. The mission of staying in your own homes, in your own communities with an enhanced and connected lifestyle is essential for everyone to agree upon from the start.

As you start out, there are certain questions you need to ask:

- Is there a need for the Village in our community?
- Is there a market of potential members in the community who can support the Village operations?
- Are there gaps in services that the Village can fill? What will the Village be “solving for”? (NOTE the answer to this question will help to define the types of services/programs the Village can offer and also can provide the basis for the development of a mission and vision)
- Are there people who are willing and able to put in the time and share their expertise to get the Village going?

### **A. First Steps**

1. Get together a group of people passionate about staying in their own homes and the Village concept: make sure they have expertise and time to share and that you will like working with them.

- a. Ask your talented friends if they are interested
  - b. Hold community meetings to find passionate, appropriate people
  - c. Gain volunteers for the steering committee and other committees
2. Call VtV Network to receive information on all the other Villages. [www.vtvnetwork.org](http://www.vtvnetwork.org)
  3. Get a “startup” mentor through the VtV Network once you are a member.
  4. Research Villages across the country. Look at their websites. Call the VtV network to get contacts in representative Villages.
  5. Assess your community: conduct survey and focus groups.
    - a. Research the demographic of your area from the [2010 census](#): Find the number of individuals aged sixty and over. Understand the age distribution. The sixty to seventy five year olds are more likely to become active members and volunteers. Those over seventy-five are more likely to need services. Also find out about the income levels to determine if your fees will be affordable.
    - b. Gather reports or studies on aging or livable communities released by local government or non-profit agencies,
    - c. Determine the resources in your community. Write an asset map. (Members should look at the Asset Map information in the [Exploratory Phase Resources](#)).
    - d. Talk with all your social service and local government agencies to educate them of your Village concept, get their feedback and “buy in.”
    - e. Develop and implement a community survey. (Members should look at the community survey information in the [Exploratory Phase Resources](#)).

- f. Develop and implement focus groups.
- g. Write market analysis to determine the interest and needs of your community in a Village
- h. Call resources to get pro-bono assistance for your market survey
  - Your local college or university
  - Your local planning department at local government
  - Your local Area Agency on Aging
6. Meet with the already existing agencies and get feedback on the idea and how to work together
7. Develop an asset-based plan.
8. Hold community meetings to engage other interested people to develop the Village Identify the geographic area: Whole city, one or more towns or one or more neighborhoods. Answer the questions: Is a Village in your area feasible? Do you and your neighbors want it?
9. Decide to go ahead and develop a Village.
10. Start to develop an initial mission statement
11. Begin to identify your programs and services: What will people get for their membership?
12. Begin to develop your first year budget and fundraising plan. (Members should look at the financial feasibility tools in the [Exploratory Phase Resources](#)).
13. Choose a name that does not restrict your future expansion
  - Search to ensure that your chosen name is available

- Reserve the name with your appropriate State agency
  - Finalize your Village name and create logo
  - Obtain the internet domain name: Find an internet service provider
14. Set up a website to let the public know of your mission and plans
  15. Create a preliminary database to keep track of potential volunteers, members and donors. Once the community has decided there is ample energy and need at the local level to start a Village, founders will need to determine the type of business and governance structure that makes the most sense based upon the findings in the exploratory phase.

## **B. Critical Decisions**

In order to start your Village you will need to talk to other Villages who have answered the following questions for themselves and then you will need to see what fits your community. Call Village to Village Network for Village examples and a mentor to help you through this process.

Here are some major decisions that you will have to make in order to move on. These decisions affect what you need to do to go forward in developing a Village.

1. Are you going to hire staff and be a volunteer/staff mix Village or be All-Volunteer Village?
2. Are you going to establish your own stand-alone Village, be a program of a sponsoring agency? Will you need a fiscal sponsor? This is an agency that will allow you to accept tax exempt donations until you can obtain your own 501(c)(3) status. (See [Definitions](#), below)



3. Can you identify any “strategic partners”?
4. Will you be part of a hub and spoke arrangement?
5. What member benefits will you offer: services, programs, and/or referrals?
6. How will you implement your service delivery? Will services be delivered by volunteers, the members themselves, paid providers or some combination?
7. What business and governance structure works best for you based upon the local landscape and partners?
8. Is the size of your service area conducive to facilitating ‘neighbor to neighbor’ connections easily or is the area spread out geographically?
9. Do you need an office?
10. Will you serve seniors or be “intergenerational”?

### **C. Definitions**

1. **Volunteers and members.** Members are the people who receive benefits such as services and programs. Members generally pay a fee. Volunteers are individuals who provide services without pay and also help run the Village. (Paid providers may also provide services.) Individuals are often both members and volunteers.
2. **Stand-alone (grassroots) Village.** A stand-alone Village is a legally incorporated non-profit organization, which generally will be a charity and tax-exempt.
3. **Fiscal Sponsor.** A fiscal sponsor is a tax-exempt, charitable corporation who will act as an agent to accept tax exempt donation on your behalf. While donations are technically made to the fiscal sponsor, they are kept in a separate account to be used by your Village. The sponsor generally provides financial oversight in order to ensure that its own tax-exempt status is not

jeopardized by your activities. (Members should look at the Fiscal Sponsorship section in the [Exploratory Phase Resources](#)). In addition look at this explanation of [Fiscal Sponsorship](#) from the National Council of Non-Profits

4. Time banking is a system of reciprocal service exchange that uses units of time as currency.

5. Village with Clusters: This generally is a larger geographic area like a City and the neighborhoods form into clusters for volunteering and doing local programs. They are all still members of the overall Village with access to everything that the Village offers. [www.wellesleyneighbors.org](http://www.wellesleyneighbors.org).

No matter how you structure the business model for your *Village*, you will have to decide how you will offer most of your services. Your Village can decide to be a “Volunteer First Village” and satisfy almost all of your member requests through volunteers [www.capitolhillvillage.org](http://www.capitolhillvillage.org) or satisfy your member’s requests through a mix of volunteers and vetted/discounted providers [www.beaconhillvillage.org](http://www.beaconhillvillage.org).

## Caregiving Guidelines

*Whatever the specifics of your situation, there are some important basic guidelines to remember when you provide care for a loved one:*

1. Preserve dignity
2. Involve your loved one
3. Promote independence
4. Ask for help
5. Be an advocate
6. Take care of yourself

**1. Preserve Dignity** Respect your loved one's right to make decisions about his or her life, and help him or her maintain a sense of control and privacy whenever possible.

Listen to what your loved one has to say, and pay attention to his or her worries and concerns.

Provide help on your loved one's terms, not yours. Tasks like dressing and bathing are personal and private.

Encourage your loved one to retain as much control over his or her life as possible.

Be understanding. Keep in mind that most people feel frustrated or unfairly burdened at some point.

**2. Involve Your Loved One** The ability to make decisions is a basic freedom, so provide choices whenever possible—from where to live to which cereals to eat at breakfast to what to wear. Choices enable us to express ourselves. As your loved one's options become more limited (through health losses, financial constraints, etc.), you may have to work harder to provide choices.

**3. Promote Independence** Caregivers often take over when they shouldn't. If your loved one is still capable of performing certain activities, such as paying bills or cooking meals, then encourage him or her to do so. Helping your loved one maintain a feeling of independence will make him or her feel better about being in a care-receiving situation.

Encourage any effort at independence, no matter how small.

Even if you can do something "quicker and easier" than your loved one, let him or her take care of it if possible.

Avoid treating your loved one like a child.

**4. Ask for Help** Many caregivers are so accustomed to providing help and seeing to another person's needs that they don't know how to ask for aid themselves. Take advantage of the help that's available.

Your family is your first resource. Spouses, brothers and sisters, children, and other relatives can do a lot to ease your caregiving burden. Let them

know what they can and should do.

Look to your church for aid and counsel. Make your minister or religious leader aware of your situation.

Turn to caregiving support groups, or support groups for specific illnesses like Alzheimer's or heart disease.

Encourage your loved one's friends and neighbors to provide what comfort they can.

**5. Be an Advocate** Keep in mind you are a member of your loved one's health care team, and that your role is as important, if not more important, than anyone else's. In many cases, you may be the only one equipped to speak out on your loved one's behalf or to ask difficult questions.

Chances are that none of the health professionals providing care for your loved one will know every aspect of his or her condition at the start. You may need to help with the exchange of information among physicians.

Prepare your loved one's Personal Health History and take it with you as you accompany the care recipient to appointments. Make sure your loved one's doctor is aware of what's on it.

**6. Take Care of Yourself** Providing care while holding down a job, running a household, or parenting can lead to exhaustion. If you do become exhausted or sick, you're more likely to make bad decisions or take out your frustrations in an unfair way.

Take advantage of opportunities for respite care.

Refresh yourself for the "long haul." Pay attention to what your body tells you.

Be prepared for many potential lifestyle changes (work schedules, social life, money and resources) and evaluate your readiness.

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# Self-Care Manual:

*A guide for caring for  
yourself  
while you care for others*

by Karen M. Wyatt MD

# Self-Care Manual:

## *A guide for caring for yourself while you care for others*

A Note from Dr. Karen Wyatt:

This manual has been designed as a quick and easy resource for you to use whenever you need to do a better job of caring for yourself.

Often when we are in the position of providing care for others, we find it difficult to take time for ourselves and focus on our own needs. In those situations it is easy to “run dry” and have little or no compassion and energy left to give.

In the following pages you will find tips and suggestions for simple self-care practices that can keep you healthy and energized, even in the midst of stressful circumstances. Remember that you cannot give to others what you don't already have.

*“Caring for yourself is the best way to help others. ”*

These practices are divided into **Physical**, **Mental/Emotional**, and **Spiritual** categories, though anything positive you undertake in one aspect of life will benefit your entire being. Read through these simple suggestions and choose any that seem appropriate for you.

I wish you love and blessings as you care for yourself and others. May you find the balance and life energy you need to rise above any difficulty that faces you!

*Karen M. Wyatt M.D.*

# Self-Care Manual:

## *General Guidelines:*

1. **Be gentle with yourself.** Recognize that you are going through a stressful experience and lower your expectations. This is not a time to strive for perfection.
2. **Accept the unexpected.** Let go of your ideas about how everything should turn out and just accept how things are right now.
3. **Be prepared for change at all times.** Caregiving is an unpredictable task and circumstances might turn upside down at any time.
4. **Make time for yourself every day.** Set aside at least a few moments each and every day when you can be by yourself and in a quiet space.
5. **Spend time in nature when possible.** Go outside for a brief walk or simply step out on the deck and look up at the sky

# Self-Care Manual:

## Physical Self-Care Practices

- **Regular Exercise**
  - Walk 20 minutes per day
  - Stretch each day to maintain flexibility
  - Lift small weights 3 times per week for strengthening of muscles
- **Adequate Sleep - Tips:**
  - No TV or computer for 1 hour before bed
  - Limit alcohol, caffeine and nicotine
  - Try a small dairy and/or carbohydrate snack 1 hour before bedtime (e.g. cheese and crackers or cereal and milk)
  - Chamomile tea
  - Rub warm sesame oil on your feet before bed
- **Drink plenty of fluids each day - drink more than your thirst dictates to ensure that you are well-hydrated; focus on water, herbal tea or juice**
- **Healthy Diet**
  - More fruits and vegetables
  - Minimize processed foods and “fast” foods or snacks
  - Protein snacks for energy and balanced blood sugar (nuts, cheese, apple with almond butter)
  - Green Smoothies - loaded with vitamins, minerals and fiber; filling; help balance blood sugar; reduce cravings (see recipes on next page)



# Green Smoothie Recipes



## My Favorite Green Smoothie

- 2 cups of organic green veg - I like spinach and Romaine lettuce
- 1 large organic celery stalk
- 1/4 cup parsley
- 1/2 cucumber (peel if it's not organic or the peel is bitter)
- 1/2 avocado
- 1 banana
- 1 apple
- 2 cups of water
- 1 tsp. Spirulina (optional)

Blend it all up in a Vita-Mix or powerful blender

## Ginger Green Smoothie

- 3 -6 leaves of kale
- 1 cucumber (peel if it's not organic or the peel is bitter)
- 1 banana
- 1 apple or pear
- 1/2 inch fresh gingerroot
- 2 cups water

Blend Well

## Creamy Green Smoothie

- 1 avocado
- 1 large cucumber (peel if it's not organic or the peel is bitter)
- 2 cups spinach
- 2 large bok choy leaves
- 2 leaves of kale
- 1/2 cup pineapple
- 1.5 cups water

Blend well

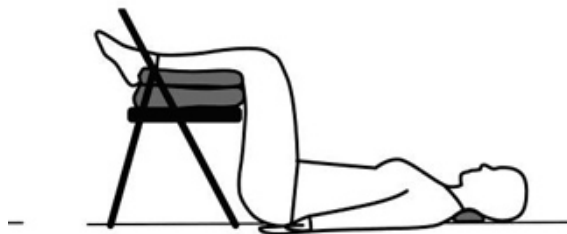
# Self-Care Manual:

## *Mental/Emotional Self-Care Practices*

(See additional tips for these practices on the pages that follow)

- Journal each day about your experiences and emotions
- Guided imagery: imagine yourself in a beautiful, safe, calm environment
- Deep breathing exercises
- Yoga for relaxation
  - Tip: try legs-on-chair pose for 10 minutes once a day

Diagram B



- Hand Acupressure
  - Press the thumb of one hand on each of these 3 points for 30 seconds to bring a sense of calmness and peace:
  - Center of palm
  - Outside center of palm on little-finger side of the hand
  - Center of the webspace between thumb and index finger
- Mindfulness Meditation – practice focusing on the present moment

# Tips for Journaling



1. Use an inexpensive spiral notebook or composition book as your journal. It's hard to scribble freely in a special or expensive book and you need to be free to write or draw anything. Save your beautiful leather-bound journal with handmade paper pages as a place to record your favorite poetry or quotations.
2. Keep a special pen with your journal or even a set of colored pens. You can use a color that matches your mood or switch colors to highlight a portion of your journal entry.
3. Have crayons or colored pencils on hand if you enjoy drawing. Some days it is nice to illustrate your journal entries or use a picture instead of words to convey your feelings.
4. Choose a regular time every day for journaling and try to stick with it. Some people like to get up a little early and journal in the morning to set their intention for the day. Others like to write before bedtime and reflect on issues and events that arose during the day. It doesn't matter when you journal, only that you do it consistently.
5. Start with a 90-day journaling challenge. Commit to journaling once a day – even if only a few sentences – for the next 90 days. Once you complete the challenge journaling will have become a habit and will be much easier to follow through with every day.
6. Even if you are very short on time, write at least a few sentences in your journal. The act of opening your journal, recording the date and scribbling a few lines will help you continue your practice.
7. Do a 4-spectrum check-in when you journal: How am I doing right now in Body, Mind, Spirit and Shadow?
8. List all the things you are grateful for in your life.
9. Document your ups and downs in life by recording all the positive things that have happened since your last entry and the things you wish had been different.
10. Set a goal for the coming day and write about how you intend to meet that goal.
11. Reflect on the day that has ended and write about what you have learned.
12. Record any dreams that you remember and write your analysis of the meaning.

13. Keep track of ongoing conflicts you have with other people and reflect on why you have issues with those people and what you might do to make things better. This can help you get in touch with your own Shadow.
14. Try writing in a free-flow style and just record anything that comes into your mind without judging it or trying to make the words sound good. Sometimes amazing insights can arise from this type of writing.
15. Make a list of your grandest goals for your life. What would you do if money and time were no object and anything was possible?
16. Use your journal as a place to ventilate your emotions. Since no one else will read it you can freely let out all your frustration and anger until you feel a release inside. After you exhaust your negative feelings it's a good idea to end the entry on a calmer note and try to come to a positive conclusion about the situation that has been upsetting you. Can you find anything good to say?
17. Draw a picture of your negative emotion: what color is it? What shape does it have? Where does it live in your body?
18. Make a list of the people who have influenced you the most in your life and record what you have learned from them.
19. Record all significant events of your life in your journal such as a wedding, new job, new relationship, loss of an old relationship, birth of a child, travel, illness, award or accomplishment. In the future you will appreciate being able to look back at an intimate record of these special times.
20. Write about the people in your life who have caused you the most frustration. What have you learned from them?
21. Write about what you have learned from failure and from success in your life. How have those lessons been similar and how have they differed?
22. Write about the "sentinel moment" of the preceding day. In what moment did you stop for a second and savor life, truly appreciating everything?
23. Use your journal as a place to track your progress when you are working toward a new goal, such as changing your lifestyle or learning a new skill.
24. Write a letter to yourself in the past. Comfort your child-self or explain how things will get better if there is an unhappy memory that still haunts you.
25. Write a letter to yourself in the future. Tell your future self what dreams you have and what you hope to accomplish or learn.

# Lake and Sky Meditation



This meditation is helpful for experiencing clarity and listening to your own deep guidance.

1. Sit comfortably, close your eyes, and take a few deep, relaxing breaths. Let go of your everyday thoughts and put your attention on your breath for a moment.
2. Imagine that you are floating on a small boat in a lake with rippling waves all around you. Drop an anchor from the boat that reaches all the way to the bottom of the lake, so you are safe and still in the middle of the lake.
3. Picture that above you the sky is covered with grey clouds that are floating overhead.
4. Take a few deep breaths and feel yourself becoming even more relaxed.
5. Now, as you breathe in, see the rippling waves of the lake around you begin to diminish and grow still.
6. And as you breathe out, see the clouds above you parting and floating away to reveal the radiant blue sky behind them.
7. Continue to breathe deeply until the lake beneath you becomes perfectly still and the sky above you is completely cloudless.
8. Notice that the water of the lake reflects the blue color of the sky and that you can no longer tell where the lake ends and the sky begins. You are surrounded with luminous, beautiful, blue stillness.
9. Imagine that this still light is present inside of you, as well as all around you.
10. Take a few deep breaths and feel this beautiful, calm, light energy filling and expanding your heart.
11. Now imagine that you are open to receiving any guidance that is coming to you today. Know that you will be able to see your next step when the time is right and you will have everything you need in order to take that step.
12. Gently bring your attention back to your body, wiggle your fingers and toes, and then slowly open your eyes.

# Deep Breathing



The simple practice of deep breathing has many health benefits for the body, mind and spirit. Some of these benefits include:

- reducing stress
- releasing endorphins to help relieve headaches, insomnia, back pain and other symptoms of stress
- helping to clear and focus the mind
- strengthening weak abdominal muscles
- decreasing blood pressure
- improving asthma symptoms

## Breathing Exercises

1. Begin by sitting or lying down in a comfortable position. Breathe in slowly through your nose for a count of six. Hold your breath for a count of six, then exhale slowly through your mouth for a count of eight. Repeat several times.
2. Again, begin by sitting or lying down in a comfortable position. Hold your left nostril closed while you breathe in long and slow through the right nostril only. Release the left nostril and breathe out slowly through both sides of the nose. Then, hold the right nostril closed while you breathe in long and slow through the left nostril. Release the right nostril and breathe out slowly through both sides of the nose. Repeat this alternate nostril breathing several times to enhance mental clarity and focus, as well as increase relaxation.

## Make it a Habit!

Once you perfect the practice of deep breathing while you are at rest, begin using this technique frequently throughout the day. You can practice anywhere, anytime and will soon begin to notice the benefits.

# Mindfulness Meditation



In his book “Wherever You Go, There You Are: Mindfulness Meditation in Everyday Life,” Jon Kabat-Zinn gives these recommendations for starting and maintaining a meditation practice through numerous essays about the ups and down of such a practice:

- **Make time each day for practice.** This goes without saying – if you set aside a regular time each day (like first thing in the morning or before you go to bed at night) you’ll be more successful at keeping up a consistent practice.
- **Keep it simple.** Don’t go to too much trouble or create a complicated ritual because you’ll be less likely to keep it up over time.
- **Stop and be present.** The most important step is stopping whatever else you have been doing for even a few minutes and notice the present moment. You can do this anywhere, at any time.
- **Pay attention to each moment.** No matter what you are feeling or thinking, this is what you should pay attention to. You don’t have to notice anything other than what is already happening right now in this moment.
- **Focus on the breath.** Watch yourself breathe in and out and follow each breath. This simple technique can help you anytime you get overwhelmed or distracted. Just keep returning to your breath.
- **Be patient.** Cultivating a practice such as meditation takes time so you have to have patience for the process.
- **Practice, practice, practice.** The consistency with which you practice will make all the difference, so keep it up whether you feel you are making progress or not.
- **Don’t judge.** Keep an open mind and let your practice unfold in its own way. There is no right or wrong way to meditate so stop trying to be perfect.

Remember that you will reap the benefits of a meditation practice no matter how long you practice or how “well” you do it. Just get started and see where it takes you.

# Self-Care Manual:

## *Spiritual Self-Care Practices*

(See additional tips for these practices on the pages that follow)

- **Find deeper meaning:** examine why you have been led to this type of work and how it fits with your life purpose
- **Prayer and Contemplation**
- **Lovingkindness Blessing:** repeat this blessing during the day to help you stay focused on compassion
- **Witnessing:** find a new perspective by taking the “Galaxy” view – look at the big picture
- **HeartMath Inner-Ease Technique:**
  - Place your hand on your heart area and imagine you are breathing in and out through your heart
  - Breathe slowly and gently until your breathing feels smooth and balanced, not forced
  - With each breath draw in a feeling of inner-ease, balance and self-love into your heart
- **Cultivate a State of G.R.A.C.E.;** when you are in a stressful situation remember these 5 steps:
  - **Gratitude** – I am grateful for all of life, including this current situation
  - **Release** – I release all my expectations for how things should have been and accept them as they are
  - **Awareness** – I focus my attention on this present moment
  - **Compassion** – I hold myself and all others in deep love
  - **Equanimity** – I seek the place of stillness and calm that exists within me



# How to Pray



The word “prayer” comes from a root word that means “to ask” and is also the root for the word “precarious.” So prayer, in a sense, means to ask for help in precarious times, which is precisely why it is an appropriate practice for today. Pray because it will help you connect with others in the world who are suffering; pray because it will help you tap into the energy of all of life for sustenance; pray because it is an intentional act of goodness that far exceeds doing nothing.

## How to pray:

- **Create a quiet space.** Try sitting, kneeling or even lying down in a comfortable place where you won’t be disturbed.
- **Calm yourself** by taking a few deep breaths.
- **Contemplate** the concerns you have and set your intention on holding them in your heart during this time. You may want to begin with concerns for yourself, then expand to others in your life, your community, nation, planet, etc.
- **Connect** with the flow of energy around you. Allow yourself to sense the pulse of life and creativity that infuses everything. For some this is called Spirit or God or the Divine, but you might simply perceive it as an energetic life force.
- **Communicate** either silently or aloud by naming your concern, then visualize sending your own love and compassion to that person or place.

Studies that have been done by Spindrift Research using prayer have shown that all forms of prayer can be effective, but that “non-directed” prayer can have the greatest impact. This means praying for the greatest good for all rather than asking for a specific outcome. In this way you acknowledge that there is greater wisdom in this Universe than your own and that you may not be able to see the best outcome for the situation, but you are still sending your own loving intention for the good to that person or place.

# Lovingkindness Blessing



The Lovingkindness Blessing is a traditional Buddhist prayer that can be spoken for oneself and for others. As a daily prayer, the blessing creates a sense of tranquility, acceptance and peace and calls for the attainment of one's highest potential in order to spread healing and love to the world.

This blessing is very effective during times of anxiety, fear and anger and can help foster a positive attitude and mindset when spoken for oneself.

As a prayer for others, the blessing generates compassion and understanding while encouraging others to be a source of healing for this world.

Memorize this simple prayer and you can use it every day to help you in various situations. The two forms of the blessing (first and second person) are presented here. This is the version I have learned, though there are several other variations of the blessing.

*May I be at peace.  
May my heart remain open.  
May I realize the beauty of my own true nature.  
May I be healed.  
May I be a source of healing for this world.*

*May you be at peace.  
May your heart remain open.  
May you realize the beauty of your own true nature.  
May you be healed.  
May you be a source of healing for this world.*

# Witnessing: Taking the Galaxy View



This practice will help you find a new perspective on the difficulties and trials of life. Use it when you are contemplating your situation and need to see your circumstances from a different point of view. Or use it when you are experiencing a negative emotion and need to get some control.

1. Sit in a comfortable position, close your eyes and take two deep breaths to help you begin to relax.
2. In your mind's eye, see your current difficulty sitting in front of you – see it as a shape or a figure or even an animal – as if it were a tangible and visible object. See your current emotion as being enclosed inside this object.
3. Imagine that you are taking a step back from this object you see in front of you and then see yourself growing larger and rising up above this object so that you can look down upon it while the object is growing smaller and smaller.
4. Take a few more deep breaths as you continue to watch the object growing smaller. Stay completely calm and neutral in your own attitude.
5. As you study the event or situation that is contained within the object, and now appears very small, see it with curiosity and fascination. Say to yourself “Isn’t it interesting that this has happened?”
6. Recognize that the situation that previously seemed to be large and overwhelming is actually small and rather interesting when you look at it from a bigger view.
7. When you are ready, open your eyes but retain the calmness you felt during the exercise.

From Dr. Wyatt:

I hope you will utilize this manual to find creative ways to care for yourself, even while you are working hard to care for others.

Remember these thoughts:

*"It's not selfish to love yourself, take care of yourself, and to make your happiness a priority. It's necessary."  
- Mandy Hale*

*"Sometimes the most important thing in a whole day is the rest we take between two deep breaths."  
- Etty Hillesum*

*"To experience peace does not mean that your life is always blissful. It means that you are capable of tapping into a blissful state of mind amidst the normal chaos of a hectic life."  
- Jill Bolte Taylor*

For more inspiration you might enjoy my book "What Really Matters: 7 Lessons for Living from the Stories of the Dying" available at Amazon.com or sign up for my Home Study Course "The 7 Lessons Wisdom Path" at [www.karenwyattmd.com](http://www.karenwyattmd.com)

May you find peace and joy on your journey!

Blessings,

*Karen M. Wyatt M.D.*

# Death Expo

## Resource Book

### Track 5: Grief and the Afterlife

#### Contents:

Are You Grieving

Coping With Grief

Loss and Grief Survival Guide

Departing or Death Bed Visions

## Are You Grieving?

*A checklist of the physical, mental, and behavioral symptoms of grief.*

Are you grieving? Put a check in the box next to any of the physical, behavioral, or emotional that you have been having below. If you check more than a few boxes, you are most likely experiencing grief. Remember that grief is normal and that there are ways to “work through grief,” as well as grief support systems that you can turn to.

### Physical Sensations

- ☐ A dry mouth
- ☐ A tight throat or a lump in your throat
- ☐ Shortness of breath
- ☐ A tight chest
- ☐ A “hollow” or “empty” feeling
- ☐ Appetite changes
- ☐ Digestion disturbances including: Nausea, Diarrhea, or Indigestion
- ☐ A general lack of energy that persists even after sleeping
- ☐ A “weak” or “faint” feeling
- ☐ Weak muscles
- ☐ A general achiness
- ☐ Headaches
- ☐ Being overly sensitive to noise

### Behavioral Characteristics

- ☐ Inability to maintain normal daily activity
- ☐ Inability to make decisions
- ☐ Lack of motivation
- ☐ Feeling restless or unable to focus
- ☐ Forgetfulness
- ☐ Insomnia or over-sleeping
- ☐ Urge to cry or sob unexpectedly or an inability to stop crying
- ☐ Talking to or visualizing the person who has died
- ☐ Isolating yourself from others

### Emotional Feelings

- ☐ Guilt
- ☐ Shock, numbness, and/or disbelief
- ☐ Anxiety or panic
- ☐ Intense sadness
- ☐ Helplessness or powerlessness
- ☐ Detached or indifferent

- ☐ Anger
- ☐ Envy of others who have not had to cope
- ☐ Relief
- ☐ Loneliness

### **Thought Patterns**

- ☐ Denial
- ☐ Disorganization
- ☐ Dreams about the death
- ☐ Inability to concentrate
- ☐ Repeating the circumstances of the death over and over
- ☐ Yearning for the "good times"

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For additional tools for caregiving or aging, visit [www.CaregiversLibrary.org](http://www.CaregiversLibrary.org)

## **Coping With Grief**

*Some suggestions to help you cope with the loss of a loved one.*

How can you, as a caregiver help yourself to cope with loss? First, you must recognize the four steps to coping as a normal pattern that everyone who grieves goes through. In addition, remember that you are not alone. Because death is a part of everyday life, everyone grieves and copes in his or her own way. Generally, there are a few things that you can do to help yourself in this process.

1. Do not hurry yourself and do not let others hurry you. Regardless of what others advise, you are not going to “just get over it.”
2. Learn to ask for and use the support of others. Recognize that other individuals can't read your mind and learn to ask them directly for a specific type of support. One of the most important types of support that you should look for is someone who can listen in a nonjudgmental manner.
3. If you need professional help, do not hesitate to get some. Help can be obtained from psychologists, psychiatrists, clergy, social workers, counselors, and grief therapists.
4. Understand that it will be hard at times. Specifically, holidays, a certain time of day, or a normal activity may remind you of your loss. Plan ahead for these experiences.
5. Do not bottle up your feelings. Instead, recognize that it is okay to be having such feelings and express them. Expressing your feelings often involves talking about them, although if this makes you too uncomfortable, try something physical like hitting a pillow or something thoughtful like keeping a journal.
6. Take care of yourself physically by eating well, sleeping, getting regular exercise, and continuing to visit the doctor.
7. Avoid depending on any kind of drug such as alcohol, mild sedatives, or tranquilizers. While the latter two may provide you with relief initially, dependence on such drugs will only cause you to grieve for a longer amount of time.
8. Do not forget about your own daily routine, activities that are meaningful to you, or about doing things for others. Feelings of self -worth and control stem from these things and these feelings are important when you are coping with a loss.
9. Do not make major decisions during the grieving period. The emotions you experience during this period may influence your decisions in ways you will later regret.

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# Loss & Grief

## Survival Guide

### Part I: Coping with Acute Loss

Karen M. Wyatt, MD

This “Survival Guide” will help you manage the stages of grief,  
heal in a healthy manner and grow through suffering

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*Please share this free e-book with friends and family members who might  
also find it beneficial.*

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## Loss & Grief Survival Guide

### **The Author:**

Karen M. Wyatt, MD

Dr. Karen Wyatt is a Family Physician who has spent much of her 25-year medical career working with hospice patients and the medically underserved. She is interested in Mind-Body Health, as well as Spirituality and Medicine. To learn more about Dr. Wyatt and her Creative Healing Initiative, visit her website at:

[www.karenwyattmd.com](http://www.karenwyattmd.com)

Additional free copies may be obtained at  
[www.youpublish.com](http://www.youpublish.com)

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## **Loss & Grief Survival Guide**

### **Have You Suffered a Loss?**

Are you dealing with the pain of unhealed grief from a loss or trauma? Are you struggling to get through each day without being overwhelmed by your emotions? Do you wonder how you will survive this time of your life?

### **Is Someone Close to You Suffering with Grief?**

Are you a caregiver for someone who is currently struggling with a recent loss or grief? Are you unsure how to help or what to do?

**If these questions describe your experience or that of a loved one, the Loss & Grief Survival Guide has the answers you need.**

### **Day-to-Day Survival**

This guide will show you the steps you should take now to keep going through the initial difficult days of grief. You will be given the reminders you need to hold on and continue to care for yourself while dealing with this severe stress.

Moreover, recognizing that you are not alone in your current struggle will give you hope and inspiration to not only survive tragedy, but to find a way to heal from it and become a stronger, healthier and more compassionate person.

### **Actively Healing Grief**

Once the emergent, acute stage of grief has passed, suggestions will be made for working toward resolution and healing of grief over time. Tools will be offered to provide support for this process.

## The Purpose of This Guide

Loss is one of the universal experiences that each of us shares with all of mankind, no matter our age, where we live or what we do. Yet, when a serious loss occurs in our lives, most of us are left adrift, with no idea how to manage our painful emotions and continue to function in our day-to-day lives.

In many cases, if we are unable to heal our grief in a healthy manner, it becomes buried inside where it fosters resentment, bitterness and anger. In turn, we are unable to proceed with our lives in a joyful, open and well-balanced manner. Some studies have shown that over half of the people receiving outpatient psychiatric services are dealing with some sort of unhealed grief or loss issues.<sup>1</sup> Clearly, this is an important topic for consideration by everyone.

This guide provides a practical and healthy approach to the acute stages of grief, in order to maximize future health and wellbeing. It is intended, as well, to provide a sense of hope and support for the bereaved, recognizing that each of us will one day walk down this road.

## Caregivers

For those acting as caregivers to a loved one dealing with grief, the guide offers welcome suggestions for providing help and showing support. Often, those who seek to aid others during times of grief or loss feel uncertain about how to proceed or what to say. Hopefully this guide will become a useful tool for those difficult times, offering strategies and priorities for the healing of grief. A special **Note to caregivers** will appear in each section.

## Healthcare Practitioners

If you are a provider of care, feel free to use this guide for your patients in any way that suits their needs. You may add or delete information as you deem appropriate. Additional copies may be downloaded and printed from my website at <http://www.karenwyattmd.com/>

**Additional suggestions** for reading or listening will also be noted after each section. For electronic readers, direct links to the internet will be provided, as well.

## Organization

This guide is organized, for practical purposes, into three different stages of the grief process. Each stage presents unique challenges and requires a different approach to support your survival and healing.

After a description of the stage, suggestions will be listed for navigating your way through that particular period of time and bringing about a resolution to your pain.

## How to Use the Guide

Based on the following information, you may choose to begin with Stage 1 and follow the entire guide, or you may skip ahead to the stage that best represents your current situation.

### Part I

The **Stage 1** healing process is best suited for individuals suffering the symptoms of acute loss; those who are still struggling to function each day. Basic survival techniques are presented here, to deal with the urgent symptoms of traumatic grief.

**Stage 2** represents those for whom at least two months have passed since the loss occurred and who are returning to normal life though still experiencing daily grief. The strategies offered here are focused on beginning the healing process, managing grief symptoms to allow for “normal” day-to-day functioning and remaining open to emotions.

### Part II

**Stage 3** includes individuals whose loss occurred more than one year in the past, and who suffer from unresolved guilt, anger or resentment. Here the focus is on delving deeper into the loss and grief, looking at hidden negative emotions, and finding a new healthy perspective. Because individuals at this stage are dealing with more chronic symptoms, rather than acute, this information is provided under a separate cover and may be used alone for those working on healing past grief. However, some who are looking back at the history of their loss and grief may find it helpful to review Part I of this guide to serve as a reminder of the ways in which healthy healing occurred for them in the past and where the process went awry.

## Stage 1: Acute Grief

### Time Frame:

Stage 1 grief can last up to two months after the occurrence of a loss, however, this can vary from one person to the next. Losses involving severe trauma or those that cause survivors to feel guilt, shame or blame are likely to have a more prolonged first stage of grief.

### Description:

Individuals experiencing acute loss are often described as being “in shock.” This is because, as a means of self-protection, the brain actually shuts down some functions immediately after the occurrence of trauma.

Those who have suffered a very recent loss may exhibit lapses of memory, detachment, confusion, and, at times, an absence of emotion. These episodes often alternate with periods of intense grief: crying, uncontrollable emotional outbursts, and deep despair. In some cases, traumatic grief can cause one to seem inappropriately giddy or manic in thought and speech.

Sometimes, the victim of a traumatic loss cannot believe or accept that the loss has actually occurred and may cling to desperate hope that the situation is not real; only to be crushed with pain again as reality returns to awareness.

On a physical level, it is common for individuals in Stage 1 grief to be unable to sleep or eat as every moment is consumed with the agony of the loss. Other symptoms might include nausea, headaches, shakiness, dizziness, chest pain, shortness of breath or hyperventilation.

### Primary Survival Task:

#### Finding a Lifeline

The primary task of this stage, from a spiritual perspective, is to find a “lifeline,” something that represents hope and the prospect of healing and peace in the future. For some, the lifeline might be a Bible verse, song lyric, object from nature, or the closeness offered by a friend or family member.

In the poem, “Griefwork,” lifelines are compared to threads that are being used to sew together patches of grief, as in a “griefwork” quilt. The lifelines mentioned are: “seeing the sunrise, a hug from my children, or a certain verse in song on the radio.”

Each person living through Stage 1 grief should spend a little time each day identifying a lifeline for that day – something to hold onto that gives a tiny spark of hope.

The conclusion of “Griefwork” states: “Now my life, shattered by your death, has come down to this: finding enough thread every day for the mending.” The healing of grief is a process that moves forward one day at a time. Hold on to your lifeline: you will survive; your broken heart will heal; and, one day, joy and peace will return to your life.

### **Stage 1: Acute Loss Survival Strategies**

- 1. Breathe: Take 3 deep breaths every 20-30 minutes. Allow 5-8 seconds for each inhalation and 5-8 seconds for each exhalation.**

The stress of acute grief causes the chest to tighten and shortens the breath. It is important to consciously force longer, deeper breaths in order to decrease anxiety and create a sense of stability. This practice will also increase oxygen flow to the brain and help improve functioning. Set a timer or an alarm to help remind you to keep practicing deep breathing.

- 2. Exercise: Walk for 15 minutes each day.**

Exercise helps alleviate stress and increase a sense of wellbeing, along with improving circulation. It is important to keep the body moving during times of great emotional stress to avoid physical complications. Exercise also allows a small amount of control during a situation where everything feels out of control.

- 3. Nourish the body: Eat frequent small meals and snacks containing protein, fat and carbohydrates.**

Although the appetite is decreased during times of acute grief, it is important to continue to provide the body with fuel. Focus on frequent, small portions that offer a high nutritional benefit. Eat foods that are your favorites or comforting to you, as long as you can tolerate them.

**Suggestions for snacks:**

- crackers or toast with peanut butter
- cheese, yogurt or cottage cheese
- fresh fruit or veggies
- nuts
- raisins or other dried fruit
- protein shake
- soup or broth

**4. Drink water: Consume at least 6-8 glasses per day of water or other liquids (e.g. tea or juice).**

While in the state of acute grief, the sense of thirst, like many other bodily functions, will often be decreased. So, it is important to focus some attention on taking in adequate fluids. One suggestion is to fill a one-quart bottle with water and carry it with you, taking small sips throughout the day.

**5. Sleep: Take naps throughout the day whenever possible. Talk to your doctor about medication if necessary.**

It is common to experience insomnia during the acute stage of grief, which can result in even greater suffering for those going through this process. Try to sleep whenever sleep comes to you, even in the middle of the day. It may be necessary to request from your doctor a prescription for a mild sedative to help you get the rest you need. However, it is not recommended to take a sleep medication for more than two weeks.

**6. Avoid alcohol.**

Alcohol acts as a depressant and can increase mood swings, sleep disturbances and unhealthy coping behaviors. Even though the pain of acute grief is intense, resist numbing it with alcohol, which will only create additional problems to be dealt with in the future.

**7. Avoid caffeine.**

Caffeine can interfere with sleep and cause increased anxiety so it is best to be avoided during times of acute grief. However, if you are accustomed to consuming caffeine on a regular basis, you should continue your usual



pattern, in order to avoid a withdrawal headache. Just don't increase the amount of caffeine you use each day.

**8. Seek support: Ask friends and family to help you get through this difficult time.**

During the stage of acute grief you are likely to need support from others for at least a few days to help you function and carry out day-to-day tasks. Call on your friends, family, neighbors and church or club members to be available for you. Everyone is willing to lend a hand during these times of suffering because they know they will need assistance themselves some day. Show this guide to your caregivers and ask them to help you accomplish some of these strategies.

**9. Pray or meditate: Make time for some type of spiritual practice each day.**

Having a spiritual belief system can provide great comfort to you during this process of grief. Even if you have never participated in any type of spiritual practice before, you can set aside a few moments every day, perhaps at the beginning or the end of the day, to spend time in silent reflection. You can meditate by focusing on emptying the mind of thought or you can repeat to yourself a saying or affirmation that you find comforting. You can also listen to music you enjoy and reflect on lyrics to songs that are special to you. Below are listed some sayings and lyrics you might find helpful.

“Blessed are those who mourn. They will be comforted.” Matthew 5:4

“So do not fear, for I am with you; do not be dismayed, for I am your God. I will strengthen you and help you; I will uphold you with my righteous right hand.” Isaiah 41:10

“Come to me all you are tired from carrying heavy loads, and I will give you rest.” Matthew 11:28

“Yea, though I walk through the valley of the shadow of death, I will fear no evil; for thou art with me.” Psalms 23: 4

“Be of good courage and He shall strengthen your heart, all ye that hope in the Lord.” Psalms 31:24

“Thy word is a lamp unto my feet, and a light unto my path.”  
Psalms 119:105

“I consider our present suffering insignificant compared to the glory that will  
soon be revealed to us.” Romans 8:18

“The Lord is close to the broken-hearted;  
He rescues those who are crushed in spirit.” Psalms 34:18

“There is a time for everything, and a season for every activity under heaven  
a time to be born and a time to die ... a time to weep and a time to laugh,  
a time to mourn ... a time to tear, a time to mend, a time to be silent,  
a time to speak, a time to love ... and a time for peace.”  
Ecclesiastes 3:1

“When your day is long  
and the night is yours alone,  
and you’re sure you’ve had  
enough of this life,  
hang on.  
Don’t let yourself go,  
Cause everybody cries  
And everybody hurts, sometimes.”  
REM from “Everybody Hurts”

“When I find myself in times of trouble,  
Mother Mary comes to me,  
Speaking words of wisdom:  
Let it be ...”  
The Beatles from “Let it Be”

When you’re weary, feeling small;  
When tears are in your eyes,  
I will dry them all.  
I’m on your side, when times get rough  
And friends just can’t be found.  
Like a bridge over troubled water,  
I will lay me down.  
Simon & Garfunkel from  
“Bridge Over Troubled Water”

“In the arms of an angel, fly away from here,  
From this dark, cold hotel room  
And the endlessness that you fear.  
You are pulled from the wreckage  
of your silent reverie,  
You’re in the arms of the angel,  
May you find some comfort there.”  
Sarah McLachlan from “Angel”

“When you’re down and troubled  
and you need a helping hand,  
and nothing is going right;  
Close your eyes and think of me and  
soon I will be there,  
to brighten up even your darkest nights.  
You just call out my name  
And you know wherever you are  
I’ll come running,  
To see you again.”  
Carole King from “You’ve Got a Friend”

“Calling all angels,  
We’re tryin’ and we’re hopin’  
But we’re not sure how.  
And every day you gaze upon the sunset  
With such love and intensity  
It’s almost ... it’s almost as if  
If you could only crack the code  
Then you’d finally understand what this all means.  
But, if you could ... do you think you would  
Trade in all the pain and suffering?  
Ah, but then you’d miss  
The beauty of the light upon this earth  
And the sweetness of the leaving.  
Calling all angels.  
Calling all angels.  
Walk me through this one, don’t leave me alone.”  
Jane Siberry from “Calling All Angels”

**Note for caregivers:**

It is a difficult challenge to provide day-to-day support for a person suffering acute grief. Remember that your presence matters more than anything you might do or say. Sometimes sitting silently with a friend is the most loving thing you can do, along with being a willing listener.

**Additional suggestions:**

**LISTEN** to the songs listed above :

<http://www.karenwyattmd.com/music.htm>

**READ** the poem “Griefwork”:

<http://www.karenwyattmd.com/griefwork.htm>

**Stage 2: Active Grief****Time Frame:**

Stage 2 grief, which begins as soon as the acute trauma of loss has subsided, can last up to one or two years after the event. Occasionally, this phase can extend for many years and, if so, is labeled “pathologic” grief and may require professional treatment.

**Description:**

During this phase, there is a gradual resolution of the severe symptoms of Stage 1, such as confusion, erratic crying and disbelief. A chronic sadness sets in, punctuated at times with sharply painful moments, as memories return and the traumatic event is relived.

Daily life will appear more normal on the outside as sleep and appetite begin to recover, though, internally, nothing will feel the same as before the tragedy. Often, emotions will be flat during this stage: the pain is blunted, but so is the ability to feel joy and pleasure, a self-protective mechanism.

Because outward appearances seem normal, friends and family may forget that grieving is still taking place. It may be uncomfortable to talk to others now about the pain because of a fear of burdening them or that the feelings are abnormal.

This is the stage when grief can become buried and stifled, since it seems easier to ignore it than to continue working through the pain. But, that choice can lead to more severe suffering in the future. It is important to face all of the issues and discomfort as they arise in order to heal completely and in a healthy manner.

### **Primary Survival Task:**

#### **Breaking Through**

The most important task of Stage 2 Grief, from a spiritual perspective is “breaking through.” This means, finding a way to break through the numbness and disconnection caused by a withdrawal into the protective covering of grief.

For many, the catalyst for a breakthrough comes from some seemingly insignificant occurrence. A smile from a stranger, the sight of rays of sunlight slanting through dark clouds, a bird singing, or the soft touch of a flower petal.

In the story “Stick and Rock,” a breakthrough occurs when the minute, yet beautiful, features of a rock and a stick are recognized in the human face, as well.

At the moment of a breakthrough, the heart opens, emotions rush in, and a new capacity for awareness awakens. When this happens, the second stage of grief starts to draw to a close. Now, the real work of healing can begin.

### **Stage 2: Active Grief Survival Strategies**

- 1. Breathe: Continue the deep breathing exercises you began in Stage 1, but you may space them out to just 3 or 4 times a day.**

Hopefully, deep breathing has become a habit by now and you are finding that it helps you feel less anxious. This is an excellent tool to use throughout your life to calm your emotions and your mind. You can read more about the benefits of deep breathing at:

<http://karenwyattmd.com/deepbreathing.htm>

2. **Exercise:** Continue daily exercise of at least 15-20 minutes. Walking is very beneficial, but you can do any exercise.

The advantages of exercise for everyone are well-known, but those who are dealing with grief may benefit even more than usual from a daily routine that includes some form of physical exertion. Improved physical endurance and strength can be very helpful during times of stress to improve coping ability, fortify the immune system, and build up a sense of control and confidence.

3. **Nourish the body:** It is important to eat healthy meals each day, focusing on fruits and vegetables, grains, protein and healthy fats.

Make an effort to improve your diet and follow general recommendations for healthy eating. Don't neglect your own nutrition during times of stress because proper "fuel" for the body and brain is important for your overall health and will help you better withstand the challenges of healing your grief.

4. **Sleep:** If you are still having problems with sleep you may need to talk to your doctor.

Sleep is of vital importance while you are trying to heal. Make sure you go to bed at approximately the same hour each night, avoid over-stimulation in the evening, and avoid caffeine. It helps to have a bedtime ritual, such as writing in a journal, saying a prayer, meditating or doing relaxation exercises. Sometimes, awakening in the middle of the night with anxiety or distressing thoughts is a sign that you are not doing enough to process your emotions during the day. See suggestion number 5 for more information.

5. **Make time for grieving:** Create a place in your home where you can sit and contemplate your grief each day.

Setting aside a special time and place each day to work on your grief can help you heal in a more comfortable and organized manner. Your ritual might be as simple as lighting a candle for a few moments, reading an inspirational verse, and allowing your grief to come to the surface. Planning a time for grief prevents unexpected outbursts of pent-up emotions when you are in other situations. Also, when distressing thoughts and feelings arise,

you can remind yourself that you will deal with those during your daily grief time and this may help you get control again over your emotions. Initially, you will need to have grief-time at least once a day (possibly more frequently) but, over time, you will find that you need these breaks less often.

**6. Spend time in nature: Try to go outside for at least a few moments every day, even during bad weather.**

For many who are actively working on healing grief, a breakthrough moment arises from an experience in nature. Connecting with the natural world is vital to our human souls, so seek opportunities to interact with the outdoors. And, don't just walk aimlessly, try to focus on everything you are seeing. Study the bark of a tree, notice a tiny flower peeking up through thick grasses, observe the movement of trees in the wind, or watch a line of ants carrying food back to their colony. When you learn about the workings of the natural world, you will recognize that the cycle of life and death is normal and vital to the balance that exists there. As part of that world, we humans have a role to play in the balance. If only we could accept our losses as part of our natural role. Try to study the stars in the night sky, as well. Observing the vastness of the universe, we are reminded that our troubles, though overwhelming to us, are small and transient compared to the entirety of existence. Let nature teach you about life and death and use these lessons to help you process your grief.

**7. Practice gratitude: Each day, perhaps as part of your grief ritual, remind yourself of things for which you are grateful.**

Even in the midst of sorrow and pain, there are joys, blessings and wonders. Take time to think about the positive things that exist in your life. You might even want to write them down in a small journal. On the difficult days, when you seem to be falling apart, take out your list and remember everything that has not been lost.

**8. Keep a journal.**

It might be difficult to write down your thoughts and emotions during the early days of Stage 2 grief, but eventually you may find it helpful. Writing is an excellent way to let out pent-up emotion and cope with stress. It also provides an opportunity for insights and creativity to arise, which might

eventually lead to your breakthrough. Though the words are painful now, they may help you someday down the road to look back at this time and learn even more about yourself and your process of healing. It is sometimes helpful to write whatever comes to you, just a free-flow of ideas and thoughts. But if this seems difficult, addressing a specific topic might help you get started. Below are a few sample questions.

### **Suggested topics for journaling:**

How have you changed since your loss occurred?  
 In what ways are you still the same?  
 What things have helped you as you have gone through this process?  
 Where are you feeling the most pain now?  
 What things are going well for you right now?  
 What is your view of God at this time?  
 How has that view changed since your loss occurred?  
 In what areas do you feel hopeful?  
 In what areas do you feel most discouraged?

### **Affirmations:**

Some people are helped by using affirmations: positive statements that remind them to think of the good aspects of every situation. It is best to create your own affirmations, but here are some to get you started. Pick out the ones that resonate with you or help you feel more positive about your life. You can say them to yourself or write them in your journal.

I have everything I need to help me heal.  
 I will heal completely from my grief.  
 I will become an even better person after I complete my grief process.  
 I am not afraid to look at my feelings, even though they are painful.  
 I have the courage and strength to heal in a healthy way.  
 I will take the time I need to heal completely.  
 I deserve to find joy and peace when my grief is healed.  
 I will survive this difficult time.  
 I am growing stronger every day.  
 I will ask for more help if I need it.  
 Help will arrive the moment I ask for it.



**Note for caregivers:**

Your friend or loved-one who is suffering grief will still need someone to talk to from time to time, even though things seem normal on the surface. It may help if you offer to listen or ask how things are going. Rather than avoiding the subject of loss so that the other person can avoid the pain, it is important to keep up an ongoing dialogue about the subject. Openness and release of emotions are very helpful during this stage; yet, hiding feelings and denial of pain can be toxic and cause further damage as time goes on. Your willingness to continue to sit and listen might make the difference between healthy healing and pathological non-healing. You deserve tremendous gratitude for helping another person through this difficult passage. May you be helped, as well, by your unselfish efforts.

**Additional suggestions:**

You may enjoy reading or listening to stories that deal with loss and grief, such as “Stick and Rock”, mentioned above. Go to my website to find this and other stories:

<http://www.karenwyattmd.com/library.htm>

**About Part II:**

If you are dealing with grief from a loss that occurred more than one year ago, you may be ready for the second part of this series. You will find this free guide on my website at the same address above.

**Final Thoughts**

I was inspired to create this guide because I desperately needed this type of help when my father committed suicide many years ago. Of course, even without this guide, I healed from my grief. But, the process took many years and I suffered (and inflicted on others) a great deal of pain during that time. It is my hope that these words I have written, the stories I have told, and the resources I have gathered on my website will be helpful to others who are in need of support.

If you are now suffering from loss and grief, the greatest message I can give to you is: *hold on*. Things will get better, I promise you. And, though you

cannot imagine or believe it right now, this experience will actually have a positive effect on your life if you resolve it in a healthy way.

Loss can be a gateway to spiritual growth and often functions to awaken the soul to higher wisdom. With proper guidance and support, you can survive and even thrive in the future as a result of the pain you are experiencing now. You are surrounded by love and healing energy to help you through these days. May you realize this and be healed—that is my prayer for you.

Karen M. Wyatt, MD

\* \* \* \* \*

DARK NIGHT (Song Lyric)  
By Karen Wyatt

It takes a lonely night, when love is far away  
And you're left empty  
To reach you, to teach you, to keep you honest.  
The tears you cry alone, feed you when you're strong  
They stretch your bounds – so you can  
Love deeper, love closer, love freer.

CHORUS: I share the pain that you're carrying now.  
That's the way I've learned to feel.  
Pain is a sign of life in the heart of man.  
It lets us know that we are real.

If you can reach inside your pain, pull out the meaning  
And hold it close, for  
It can save you, it can raise you, it can make you see.  
You cannot lose what is you unless you turn away,  
Deny the truth ... oh, see that  
You can bleed, taste the tears, but know yourself  
And they're not wasted.

\* \* \* \* \*

**Footnote:**

<sup>1</sup> Piper, William E., Ogrodniczuk, John S., Azim, Hassan F., Weideman, Rene

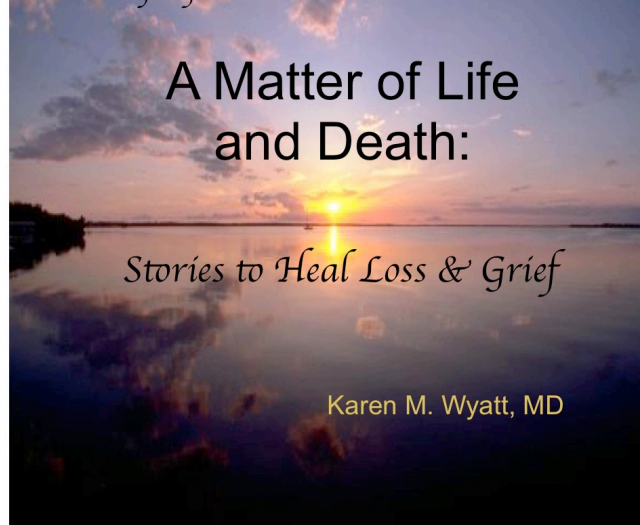
**Prevalence of Loss and Complicated Grief Among Psychiatric Outpatients**

Psychiatr Serv 2001 52: 1069-1074

<http://psychservices.psychiatryonline.org/cgi/content/full/52/8/1069>

**Loss & Grief Survival Guide: Part I**

This publication has been written in its entirety by Karen M. Wyatt, MD. It is being provided as a downloadable pdf document at no charge for the use of any party who finds it helpful. It may be copied or reproduced for distribution but, at no time may another party charge any fee whatsoever for the contents of this guide.



**“A Matter of Life and Death:  
Stories to Heal Loss & Grief”**

**Available as Audio CD: <http://www.karenwyattmd.com>**

**Available as eBook: <http://www.youpublish.com/karenwyatt>**

**Coming soon: Softcover Print Edition; (check the website for updated information)**

## **Departing Or Death Bed Visions: (FAQ)**

What is a departing vision (often called a death bed vision)? Most Hospice workers are very familiar with departing or deathbed visions, but sometimes these experiences are difficult to put into words.

A death bed vision or DBV is a powerful, comforting experience the dying and their family members often encounter just before death occurs. The dying will report visions of angels, deceased loved ones, or religious figures, moments, hours, days or even weeks, before actual death takes place. These visions typically lessen the fear of dying and make passing an easier transition for all concerned.

Family members at the death bed of a loved one who are not familiar with the death bed vision phenomenon will often ask healthcare workers and Hospice caretakers, "Couldn't these 'visions' just be the by product of a dying brain?"

In the 1920s, 1960s and 70s, several researchers asked these exact questions. These researchers decided to put this phenomenon to the test. What they discovered was astounding. The visions of the dying most often were those of deceased relatives. During the vision, deceased relatives would appear to the dying person to offer support, guidance and assistance as death drew near. Interestingly, in some death bed vision accounts, the dying individual received visitations from relatives s/he did not know were already deceased. While scientifically investigating this phenomenon they also discovered that these departing visions have been reported by the dying for centuries. Even President Abraham Lincoln had a death bed vision, just before his own assassination.

When DBVs are reported, Hospice workers and healthcare providers are often confronted with a number of questions from confused family members, such as "What about wishful thinking, related to a fear of death? Maybe my loved one is imagining all of this."

The above would be a simple explanation, but the DBV phenomenon isn't that cut and dry. One researcher compared the DBVs of dying Americans with those in India. Thousands of nurses and doctors were interviewed and asked what they had witnessed as death drew near. DBVs were often reported. Except for a few religious differences, the DBVs of both cultures were incredibly similar. The consistency of the experiences between those dying in America and those in India has guided me to believe there is more to the DBV experience than wishful thinking.

Hospice workers and healthcare providers are also often asked, "How about medication? Medications can certainly induce hallucinations."

Many of the individuals who have reported these visions were not on medications and were, up to the moment of death, very coherent. Those who are on medications have also shared visions similar to those who are not on medications. Finally, well, alert, sober family members and friends of the dying have had DBVs. Along with this, Hospice workers and healthcare providers have also reported DBV experiences.

Are the DBVs of family members, friends and healthcare professionals similar to those of the dying?

Interestingly yes! These individuals can also receive visitations from deceased relatives (in some cases they too were not aware the dying person was actually preparing to pass) angels or religious figures. Like the dying, dreams of "heaven" or communication with other worldly figures have been reported by those attending the dying. In many situations, loved ones of the dying will have a visitation from the person who is passing at the moment of death. In other words, a loved one at home, may be awakened from a deep sleep by a feeling, knowing that passing has occurred or even by a vision of the dying person (who is at the hospital or in another location). Many of these individuals then receive a phone call minutes later confirming death.

As a Licensed Marriage and Family Therapist, has understanding DBVs helped you assist those who are in grief?

In many cases, bereaved individuals will come to me and say, "I had a rather strange experience just before Uncle Joe passed," or "While Mom was dying, she started talking to all of the dead relatives as if they were right there, in the room with her!" For those who have had such experiences, my own personal and professional involvement with DBVs validates their encounters. My sharing of my experiences and of those I have collected, allows these individuals to feel "normal" about their experiences. These individuals usually walk away from my office feeling very relieved to have found someone who understands.

For those who are dying, DBV information offers them comfort, validates any visions they might have had or may have in the future, and it lessens the fear of death. With individuals seeking answers to questions about death, DBV information often times propels them into resolving their own issues around dying.

Why did you decide to write? One Last Hug Before I Go: The Mystery And Meaning Of Deathbed Visions?

This is my 8th and most important book to date because it is so personal. My son experienced a DBV when his grandfather died. I too had a DBV when my own mother passed. Over the last 20 years I have heard countless accounts of DBVs from not only the dying, but from those who love them. Sadly, I have often been the first person they ever discuss these blessed events with. Fear of societal judgment keeps many of us silent and a lack of validation often creates confusions.

My job as a healthcare provider has been to validate DBVs for those patients of mine who report them, and to then use them for processing grief and developing a sense of spiritual wellness. It is the lack of public awareness about the DBV phenomenon that convinced me to write this book. DBVs are a neglected source of peace and comfort to all

those involved. This must change. Today, I have no absolute answers regarding life after death, but I do strongly believe the DBV experience must not continue to be ignored.

Carla Wills-Brandon, Ph.D.

Michael Brandon, Ph.D.

<http://www.carla.wills.brandon.net>

<http://www.care-givers.com/DBArticles/pages/viewarticle.php?id=138>

# Death Expo

## Resource Book

### Track 6: Death in Film and Theatre

#### Contents:

Death Café: Guide to Running Your Own Death Cafe

Event Planning Guide for Hospices – Plan an Event to Educate Your Community



# DEATH CAFE

## Guide to running your own Death Cafe

### Introduction

This guide is for those who are looking to host Death Cafés or conversations about death. However, you are welcome to read this whoever you are. We recommend you read the page on [What is Death Cafe](#) before reading this guide.

This is a copy of version 2.1 of our guide. The master version, with links, is kept on our website at <http://deathcafe.com/how>.

It has been written by Jon Underwood with input from a number of others. In particular, thanks goes to [Sue Barsky Reid](#) who developed our core model.

This document is open to discussion, edit and improvement. Please post constructive suggestions or queries on the [Death Cafe practitioners page](#).

Thank you for your interest in Death Cafe!

### 1. Working with us

1.1 Death Cafe operates a free affiliate scheme. This means people who sign up to our principles are authorised to do certain things, i.e.:

- Use the name Death Cafe for their events.
- Post events to our website.
- Talk to the press and others as an affiliate of Death Cafe.

1.2. Our principles are that Death Cafes are always offered:

- With no intention of leading participants to any conclusion, product or course of action.
- As an open, respectful and confidential space where people can express their views safely.
- On a not for profit basis.
- Alongside refreshing drinks and nourishing food – and cake!

1.3 It's also worth stating here what Death Cafes is not:

- Death Cafe is not a bereavement support or grief counselling setting. Death Cafe doesn't work for people who, for whatever reason, aren't able to discuss death

comfortably and openly. There are many projects better set up for this.

- Death Cafes aren't an opportunity to give people information about death and dying - regardless of how good or important it is. Rather we create time to discuss death without expectations. For this reason having guest speakers and information materials available is actively discouraged
- Death Cafe doesn't work as a method of community engagement, research or consultation. It shouldn't be used for these purposes.

We have established this structure to keep Death Cafe positive. This is also to prevent the use of this concept by those with an interest in leading people to conclusions, products or a specific course of action.

1.4 When you post your Death Cafes on our site you'll be asked to sign up to our 'Working with us' document which contains all our terms and conditions. To see this [click here](#).

## 2. What do I need to hold a Death Cafe?

2.1 The things needed to hold a Death Cafe are:

- A host and facilitator.
- A venue with refreshments booked for a certain time and date.
- People who want to talk about death.

That's it! The Death Cafe format is flexible, lightweight and straightforward. What makes it special is the discussion about death, there is no need for bells and whistles.

The sections below give more detail the things you'll need to hold a Death Cafe.

## 3. Hosting a Death Cafe

A Death Cafe host is the person or people who make the Death Cafe happen. Being a Death Cafe host tends to be an enlightening and pleasant way of working with death in the community, and investing in your personal growth.

3.1 The main qualities of a host are enthusiasm for talking about death and dying and high ethical standards. It also helps to have good organisational skills, the ability to build relationships, good networks and patience! Ideally you'll have attended a Death Cafe before organising your own but we recognise this is sometimes not possible.

3.2 The activities of a Death Cafe host are likely to include:

- Recruiting and co-ordinating the other people involved in the Death Cafe.
- Arranging the venue and refreshments for the Death Cafe (see section on Venues, refreshments and timings.)
- Letting people know about the Death Cafe (see section on Publicising your Death Cafe.)

- Ensuring the quality and safety of the event.
- Dealing with RSVPs if you decide to have them.

3.3 The steps involved in hosting a Death Cafe begin with a thorough read of this guide. After that, they roughly consist of:

- Agreeing who will do what.
- Finding the venue and setting the date.
- Letting people know.
- Holding and enjoying your Death Cafe.
- Writeup / debrief and evaluation.

3.4 As a host you're responsible for the safety of your Death Cafes. Death Cafes tend to be very safe and positive events and we have had very little incident in our 200 Death Cafes to date. Having said that, to ensure the safety of your Death Cafe please:

- Check all facilitators meet the criteria in the section below.
- Have a minimum of 2 Death Cafe people at the event, especially if the Death Cafe is in a domestic setting.
- Ensure you know where and how to refer people who need more support.
- Refuse to admit anyone who comes to a Death Cafe intoxicated.
- Ensure people know that Death Cafe is not a bereavement / grief support resource.

3.5 We're now fortunate to have a number of experienced Death Cafe facilitators in our community. If you've questions please post them to the [Death Cafe practitioners page](#). Some hosts are open to mentoring others in their Death Cafe work. Please feel free to get in touch with them via their profile pages.

## 4. Being a Death Cafe facilitator

Facilitation is essential to Death Cafe. This role can be summarised as making people feel safe to talk about death. Death Cafes tend to be very nice to facilitate - everyone there wants to talk about death and most have a lot to say. Facilitators can be the same person as the host or different but unlike hosts, a facilitator only performs her/his role during the Death Cafe session.

4.1 In general the facilitator's role consists of:

- Welcoming people to the Death Cafe and introducing the session.
- Ensuring, during the discussion, that our guidelines are respected especially regarding tolerance for others' views.
- Bringing people into the discussion if you think they want to say something.
- Moving the discussion on if things get stuck.
- Managing any difficult situations. Fortunately these instances are very rare.
- Closing the session and asking for evaluation.

4.2 We don't insist that facilitators have a formal qualification in, or specific level of experience with, death and dying - we believe that death belongs to everybody.

However, all Death Cafe facilitators should:

- Be able to listen to and discuss all aspects of death and dying with equanimity.
- Have good group facilitation skills.
- Be able to handle any issues or problematic situations at or arising from the Death Cafe.

Along with the skills above, the main qualities of a facilitator are enthusiasm for talking about death and dying, empathy, clear boundaries, flexibility and a friendly manner.

4.3 In the Death Cafe there are no hierarchies. We all meet simply as people who are going to die. As such any facilitators who work around death and dying should be willing to leave their professional identity at the door.

4.4 In general facilitators leave a Death Cafe feeling uplifted, but this doesn't always happen. It is not unusual to feel concerned or even downcast. If you'd like to discuss any aspect of what you've heard please post to the [Death Cafe practitioners page](#) or [contact us](#).

## 5. Venues, refreshments and timings

### Venues

A good venue is important as a pleasant environment helps people relax and talk about death. Death Cafe is very flexible and has been run successfully in a variety of setting including people's homes, cafes and restaurants, community spaces, festivals halls, tents and parks.

5.1 The following questions might help you find the right venue for your Death Cafe:

- Where will you feel most comfortable and relaxed?
- Where will you get free, or if not inexpensive, room rental? Houses and cafes mostly tick this box.
- Where is it easy to obtain refreshments? Cafes are good in respect of this as people can just buy their own refreshments.
- Where is a convenient location within the community?
- What might be an interesting and different venue and so catch people's attention?

5.2 Experience shows that once you decide on a venue and set the time and date, everything tends to fall into place. We would recommend you confirm your date a minimum of 1 month before the Death Cafe to allow time to let people know.

### Refreshments

5.3 As you'll have seen, it is one of our principles to have refreshments at a Death Cafe. The linking of death, food and drink comes from Bernard Crettaz's Café Mortels concept. Mr. Crettaz said that 'nothing marks to community of the living like sharing food and drink'.

5.4 Death Cafe likes to talk about cake a lot, and cake is certainly popular. However any sort of food and drink is ok so this can be geared to your community. We have a preference for vegetarian food and it is good to have vegan options. Occasionally alcohol (in moderation) has been drunk at Death Cafes with no observable ill effects.

5.5 There are a range of options for providing food and drink and it is worth making reference your choice when you publicise your Death Cafe. Some options are less expensive and time consuming than others. These include:

- Hosting a potluck where attendees contribute food to share.
- If you're holding your Death Cafe somewhere that sells refreshments, asking people to buy their own. This might persuade venue owners to give you the space.
- Making your own food and drink for the Death Cafe.
- Asking someone else to provide the food and drink, either voluntarily or (if there's no alternative) professionally.

5.6 If you decide to have home prepared food or potluck, please have regard to food preparation and handling guidelines and regulation. These vary greatly from area to area, and from community to community. It is the host's responsibility to ensure that any food and drink provided is safe.

### Timings

5.5 People often ask how regularly they should organise a Death Cafe. The answer is that there are no recommended timescales - hosts organise them whenever feels right. A minority of Death Cafes take place monthly but most are on an as-and-when basis. Sometimes people organise a run of 4 or so Death Cafes and then take a break.

5.6 The average time to a Death Cafe is around 2 hours. It is possible to have longer and it is also possible to have a meaningful Death Cafe in an hour. When considering your timings please remember that people often arrive late and take time to settle.

5.7 There is no particular day of the week or time that works particularly well for Death Cafe. In general weekday evenings and weekend afternoons have been most popular. It's worth considering what works well for you and is accessible for those who want to come.

5.8 One final thing to say in relation to Death Cafe timings - don't rush! Taking the time to plan delivers a better event.

## 6. The Death Cafe session

6.1 **Please note:** The Death Cafe model doesn't include having specific topics, set questions and (in particular) guest speakers. We ask you not to have these at your Death Cafes. Our view is that, when it comes to death, people have enough to discuss already.

To elaborate, giving extra input or setting too much of an agenda risks being presumptuous, restrictive and/or disempowering. As such we favour offering a

group directed session offering participants time to reflect on and share what they think is important. In our experience this yields the best results.

6.2 This refers to the Death Cafe session itself, which is always straightforward and open discussion about death. It is ok to situate your Death Cafe in a wider programme of events and this has happened a number of times at large events focused on death. Death Cafes could also happen in other settings too, such as art shows, film screenings, political debates, training sessions and days of spiritual practice. However the Death Cafe should always be separate from these, and observe our principles. Only the Death Cafe part of such events will be advertised on this website.

6.3 In general Death Cafes are open to, and respectful of, people of all communities and belief systems. However it is fine, and can be very good, to have Death Cafes for specific communities and belief systems. For example we have had a number of Death Cafes specifically for the **LGBT** community. In the same way it is possible to have Death Cafes for other communities / groups e.g. Muslims, young people, older people, homeless people etc. Wherever possible these should be facilitated by people who are from that community.

6.2 There are 2 basic ways to hold a Death Cafe and it's best to decide which you'll use in advance:

- Cafe model. This is when there is facilitator with the group throughout the discussion. In this case, the ideal group size is between 6 and 12 people. Generally 3 would be a minimum group size and 20 a maximum.
- Salon model. This is when the groups are self facilitating. Generally the facilitator/s would give an introduction and then float between groups when needed. This works better for large Death Cafes. In this case the group size would generally be between 4 and 8 people.

6.3 Generally Death Cafes are for adults. However occasionally people have asked to bring children / young adults, or just shown up with them. When they have been admitted the session has been fine for them and their parents, but sometimes other group members have felt inhibited. If you decide to admit young people please ensure you're adequately set up for this to be safe, and ask the consent of other group members.

Like life, a Death Cafe has a start, middle and an end:

### **Start**

6.4 At the start of your Death Cafe it is good to set out some things:

- What Death Cafe is and where it has come from (see [here](#)) and our principles (above).
- Whether you're asking for donations and, if so, what these are for (see Death Cafe and money below).
- Some basic ground rules: listening when people are talking, respect for others'

views and confidentiality.

- What you're going to do in the session.
- Ask if there are any questions before continuing.

6.5 In terms of confidentiality we generally say that we share feedback for publication on the Death Café website, but no information is linked to any particular person. It's also good to ask whether people are comfortable with photos being taken if you plan to do so. If there are any journalists present it is appropriate that they identify themselves to the group. If the Death Cafe is to be filmed or recorded then attendees should be notified before the event.

### **Middle**

6.6 As we've said, a core model is a group-directed discussion without specific topics, questions or speakers. Basically there is no agenda. As such the session tends to run as follows:

- The facilitator asks the group to introduce themselves and say why they've come to Death Cafe. This gives an opportunity for people to say whatever they want to say. Everyone takes a turn apart from people who don't want to speak. People volunteer some amazing things! If the facilitator is with the group, she/he takes a turn to speak too. This part of the Death Cafe can take some time - up to an hour in a group of 10.
- After that the facilitator asks if anything came up for the group whilst people were speaking - thoughts, questions or reflections. This may feel challenging or risky for the facilitator but attendees tend to take over the discussion and the time flies by.
- If, after trying the group-directed approach, you think your attendees would prefer a more structured session then it is ok to introduce a couple of specific questions. It is good to have these in mind anyway in case they would help the discussion. It is good to keep any questions very open. Please don't ask more than 3 - the Death Cafe tends to fly by and it doesn't work to try to do too much. It is always possible to have more Death Cafes!

### **End**

6.7 After the allotted time, or if it feels like you've finished, bring the Death Cafe session to a close. It's good to give people between 5 and 20 minutes notice so they have a chance to share anything they want before the end.

6.7 Please thank everybody for attending and ask them to evaluate the session. In due course people will be able to submit their evaluations on this site. In the meantime we have a form which you can download **here**.

6.8 It's good to stay around after the session has ended to talk to anyone who wants to talk. It's also good to debrief with the other hosts and facilitators sometime after the event.

## **7. Publicising your Death Cafe**

The objective of Death Café is to ‘increase awareness of death with a view to helping people make the most of their (finite) lives’. Publicising your Death Cafe is a great way to do this. You'll be talking to people about death whether they're coming to your Death Cafe or not.

7.1 As soon as you're ready, please post your Death Cafe to this site. You can do this [here](#). You can also give updates about your Death Cafe (e.g. 'we're full!') that will appear on the main news pages.

7.2 It's also worth thinking about how you will publicise your Death Café locally. The Death Cafe website reaches a number of people but reaching out yourself is really effective. Ways that you can do this include:

- Reaching out to your personal networks. Let your friends, family and social circles know you're doing this (if you want to).
- Contact the local press and also others working in media whom you know. The media are often interested in Death Cafe and of course they need things to write about - what better than death! The traditional way to do this is send a press release and follow up with a phone call.
- Post on social websites such as Facebook, Twitter and Meetup. To avoid confusion we ask people not to start blogs or twitter accounts with Death Café in the title. It is fine to start Death Café facebook pages for your Death Café but please be willing to let others in your area post their Death Cafes there too.
- Identify communities of interest locally (e.g. students, artists, philosophy groups) and connect with them.

7.3 Some hosts prefer to request RSVPs from potential attendees. This enables them to control numbers and communicate prior to the session. The only disadvantage of requesting RSVPs is the increased admin. RSVPs are only essential if the Death Cafe is in a private location and many hosts prefer to do without. When you post your Death Cafe on the site there is an option to add a booking form to your Death Cafe page. If people fill this in we will send you an email. Your email address is never displayed on this site.

7.4 Some people like to create their own Death Cafe posters to post on line and / or put up locally. This is fun but printing and design can be time consuming and expensive.

7.5 When talking to the media as an affiliate of Death Cafe here we ask you to:

- Wherever possible convey our principles i.e. not for profit, with not intention of leading people... etc.
- Credit Jon Underwood with founding Death Café based on the work of Bernard Crettaz.
- If you're in the United States please add that Lizzy Miles was the first person to offer Death Café in the US.
- Please ask them to give a link to [deathcafe.com](http://deathcafe.com).

7.6 Once people find out that you're offering a Death Cafe, be prepared for some



interesting conversations. However these can be extremely valuable and in themselves meet the objectives of Death Café. Sue Barsky-Reid says 'There is something a bit eccentric about doing a Death Café. However, if you're anything like me, you'll like being thought of as an eccentric!'

## 8. Death Cafe, money and sponsorship

8.1 We request hosts to help make Death Cafe sustainable by minimising the costs of your event. It really isn't necessary to have very expensive cakes, or order a Death Cafe stamp or pay for a posh room. What makes a Death Cafe special is the conversation about death. However we do recognise that Death Cafes sometimes cost money to organise.

8.2 There are 3 ways to organise your Death Cafe in terms of money:

- Offer it for free. This is the most straightforward way. Please acknowledge those who have contributed to the Death Cafe being free in your publicity.
- Ask for a non-specific donation e.g. by saying something like 'donations welcome' on your publicity. The amount received from donations is variable and rarely very much. People need to be reminded to donate at the start and end of the session.
- Request a specific donation e.g. \$4 per person. If you do this please clearly set out what the donation is going to be used for so people can see that it accords with our not-for-profit ethos. A specific donation is different from a ticket price in that people shouldn't be excluded who aren't able or willing to pay it.

8.3 Death Cafes never have a ticket price or exclude those who can't afford to donate.

### **Sponsorship**

8.4 We also accept contributions towards our Death Cafe. Organisations or people who contribute are called sponsors. Their contributions can take a number of forms such as:

- Money for expenses.
- Donation of a room.
- Provision of drinks and refreshments.
- Access to networks.
- Allowing employees to organise the Death Cafe during work time.

8.5 Our current policy is to acknowledge sponsors in the text about the Death Cafe. We don't include the names of organisations in the title of the Death Cafe. However this is under review as some in our community believe that sponsorship contravenes our principle of not leading people to any conclusion, product and course of action.

8.6 There are some types of organisations we never accept sponsorship from or associate with:

- Large private sector organisations in the death and dying sector.
- Political organisations.

- Campaign groups whose remit includes contentious issues involving death such as right to die, abortion or vivisection.

8.7 We reserve the right to reject sponsorship at our discretion. If the amount of sponsorship is larger than that needed for the Death Cafe or to discuss our policy please [contact us](#).

## 9. Death Cafe quick start guide

9.1 Here's a rough checklist of what you need to do to organise a Death Cafe:

- Read this guide from cover to cover.
- Decide who is going to do what regarding refreshments, publicity, facilitation etc. and how this will be done.
- Decide on your venue and set the date and time.
- Post the Death Cafe the Death Cafe website.
- Let others know - friends and family, media, networks.
- Enjoy your Death Cafe!
- Evaluate, writeup and debrief.

9.2 If you have any questions about any of this please post them to the [Death Cafe practitioners page](#)

## Final remarks

This guide is likely to change as time goes by. Please get in [contact](#) if you'd like to play a role in maintaining it, or have specific suggestions for improvement. In time I would like to establish a wiki for this document.

If you have any questions please post them on the [Death Cafe practitioners page](#).

In the meantime thanks for your interest in holding a Death Cafe and good luck with your events!

Death Cafe is provided by [Impermanence](#)

## Event Planning Guide

The following will help your organization, agency or coalition to plan a successful event using the PowerPoint presentations and other resources in this outreach guide. A detailed checklist is located at the end of this document to help you organize your event. The checklist can be revised according to your planning process by deleting our examples and typing in your own information.

Before you begin to plan the details of your event, review the following suggestions and strategies:

1. **Create a vision of success** - Before you begin any planning, have everyone in your organization or coalition be committed to the idea of a successful community event and believe you can make it happen!
  - Brainstorm together:
    - ⇒ What would a successful event look like?
    - ⇒ What audiences in community would you like to reach?
    - ⇒ What will the audience gain by attending the event?
    - ⇒ What will your organization or coalition gain by sponsoring the event?
2. **Develop goals and objectives** - Taking the time and energy to do this upfront will help establish a clear direction to plan and evaluate your event.
  - Goals state what will happen as a result of the event.
    - ⇒ Example: (List pediatric, faith community, or other target audience here) will have an increased awareness about the need to improve end-of-life care so that people will take action for themselves, their loved ones and others in our community.
  - Objectives state how and when the event will happen. Include the specific topic(s) to be addressed, target audience, measurable outcome(s) and timeframe.
    - ⇒ Example: (Organization or coalition name) will conduct (list specific number here) of seminars using NHPCO's Outreach Guide materials for congregational members at three churches or synagogues by December 1, 2009.
3. **Distribute the workload** – Establish an event planning committee, and assign tasks and responsibilities (that are based on your goals and objectives) among everyone participating in your organization or coalition. Then set regular meeting dates to keep everyone on track with their assignments.

4. **Start planning in advance** – Allow plenty of time to attend to all the details of planning and promotion. Use the event checklist below to develop an action plan for documenting tasks, person/s responsible and deadline dates. Also, remember that great speakers are often booked in advance, so contact your potential speaker/s early.
5. **Identify existing resources for donations** -
  - a. Make a list of resources that each internal member of the organization or coalition will contribute - for example, print handouts and flyers, provide audiovisual equipment, etc.
  - b. Make a list of external relationships you already have established in the community to ask for donations to support your event – for example, venues for food, publicity, media coverage, event location, etc.
6. **Plan the details** – (Refer to event checklist at the end of this document that you can adapt and modify.)
  - **Budget** – Make a list of all items that need some type of funding support. Funding can be acquired through in-kind support, monetary donations, or other donations.
  - **Location** - Make sure that topics and titles are enhanced by the location you choose. If the topic you choose is attractive to your audience but the location is unfamiliar or difficult to access, people are less likely to attend. Also, keep in mind that the location you choose can also communicate an affiliation with a group or belief system.
  - **Speakers** – If you are looking for speakers outside your organization or coalition, start with identifying existing relationships - you will be surprised by the speakers you have access to! Be sure to thoroughly brief all speakers regarding your goals, objectives, audiences and key messages.
  - **Program agenda** – Remember to allow time for the audience to participate in the event, and to socialize with one another and members of your organization or coalition. This can lead to meaningful conversations that can leave a lasting impression. Also, prepare:
    - ⇒ Written instructions for any facilitators, moderators, or greeters
    - ⇒ Sign in sheets for participants
  - **Refreshments** - Always include some type of food and beverage that your audience would enjoy (and that you can get donated for free if possible).
  - **Participant handouts** – Collate a participant information packet to distribute at the event that would include information about your organization or coalition, and information that would interest your primary audience. See Caring Connections' resource list for ideas.

7. **Promote and publicize** - Invest in one well-done promotional flyer for the event that can be used in multiple ways – mailings, posters, etc. Some ideas include:
- Focus marketing efforts to targeted groups, not individuals - you get more “bang for your buck.”
  - Hold every member of partnership accountable for marketing to specific groups of people – for example, require every member of organization or coalition to be responsible for bringing three people to the event.
  - Faith community/church bulletins, supermarkets, little league games, community bulletin boards, book clubs, libraries, and hair salons are all potential distribution channels for your materials.
  - Use connections with professional or academic venues
    - ⇒ Offer continuing education through an approved school or agency
    - ⇒ Connect with local professional associations
    - ⇒ Go to the teachers in local schools – law, medicine, high-school, nursing, community colleges, legal assistant, theological seminaries – and encourage them to bring the class to the event.
8. **Evaluate your outcomes** – Refer to the Faith Outreach Guide Appendix; use or adapt the participant feedback form, to learn how to track and document your activities. Other suggestions include:
- Have a suggestion or comment box available – it is a great way to ensure that participants have an opportunity to give anonymous feedback.
  - If a participant shares a personal story, ask if you could write it up or share it anonymously at future events or in your materials. Personal stories about the need to improve end-of-life care and services often have the greatest impact.
9. **Follow-up** - Collect participant names and contact information on a sign-in sheet at your event. People who attend have demonstrated an interest in your cause so find ways to keep them involved! You can also use your list to promote future events. In addition,
- Write a story to print in your organization or coalition’s newsletter summarizing the event.
10. **Celebrate!** – Plan a celebration with your organization or coalition after completing your event to acknowledge the successes achieved. This will serve to build team spirit and motivate your group to plan future events.

## Event Planning Checklist

Event Task Assignments	Timeline	Person/s Responsible
Select focus of event	3-6 months	
Identify target audience/s to promote event	3-6 months	
Contact potential sponsors	3-6 months	
Contact outside continuing education providers	3-6 months	
Draft budget	3-6 months	
Select dates/reserve rooms	3-6 months	
Contact & confirm speakers	3-6 months	
Flyer/Poster copied or printed	3-4 months	
Contact refreshment venues	3-4 months	
Obtain outside mailing lists and other marketing	3-4 months	
Recruit volunteers to assist with publicity	2-4 months	
Mail flyers, distribute flyers/posters in community	2 months	
Mail speaker packets w/ brochure	2 months	
Set up registration database	2 months	
Finalize refreshments	2 months	
Send confirmations to participants with map	1 month & ongoing	
Recruit volunteers to assist with event if need	2 months	
Rent tables, chairs and other items if need	1 month	
Draft room layout	1 month	
Draft detailed agenda	1 month	
Make signs	1 month	
Finalize volunteer schedule	1 month	
Review AV needs, order equipment if needed	3-4 weeks	
Print handouts, final program, participant feedback/evaluation forms	2-3 weeks	
Confirm final count for refreshments	1 week	
Put together folders	1 week	
Print badges	1 week	
Print CEU certificates	1 week	
Print rosters	1 day	
Set up conference rooms	1 day	
Put up signs, set up registration, etc	1 day	

This document was adapted from the *Checklist for Hosting Successful Community Events* written by The Hospice of the Florida Suncoast - located at [www.caringinfo.org](http://www.caringinfo.org).