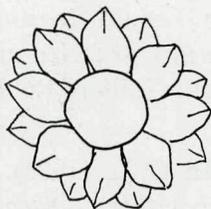


SPIRITUAL GROWTH THROUGH HOSPICE SOCIAL WORK

This essay reflects on my helping relationship with dying and grieving people through hospice work and shows how my experiences helped me to grow spiritually. I was born and raised in Japan and influenced by various Eastern religious philosophies and their practices. Yet through my experience with hospice, I found that spiritual issues can be addressed in a way that transcends religious and cultural differences. Thus, my clients and I benefit mutually. As I help my clients to prepare to die, I go deeper inside myself by asking questions of life and death through self-reflection.

by **Mitsuko Nakashima**

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INTRODUCTION

My work with hospice clients facilitated my personal and professional growth. I am required to bring personal growth issues to my practice to represent truthfully who I am to the client. The relationship of my own self with the client lays the foundation for the helping process. Through working with dying people and their families, I discovered that my ability to care for my soul directly relates to my capacity to nurture my clients as whole persons. Self-reflection and acceptance of

myself are essential for me to cultivate compassion and a non-judgmental attitude toward clients.

I have been working for hospice as a social worker for over two years. Hospice is a health care organization whose approach toward client care looks beyond merely relieving physical pain. In hospice, an interdisciplinary group of professionals, including social workers, strive to provide comfort for the physical, emotional, and spiritual pain of dying people and their loved ones. For me, helping patients and their loved ones in the dying and bereavement process has been a powerful source of learning, fulfillment, and transformation. It has uncovered many personal growth issues which were unexplored previously in my life. For the majority of hospice patients, the suffering of dying is more than physical pain. It often encompasses emotional, social, and spiritual distress caused by the changes and losses that accompany physical decline. In helping others deal with this distress, I am stimulated to work through my own related issues,

and to grow in a sense of spiritual integrity and wholeness.

In my perception, my whole being consists of different parts: physical, mental, emotional, and spiritual. A holistic view of human life integrates all aspects of human experiences. Yet, I have always believed that a key to learn who I am exists in the spiritual area of my life. My understanding of this spiritual realm is conveyed by a word in my native language, Japanese. The word, *tamashii*, can be translated as soul or spirit. It has two meanings: the essence of life of all living creatures that survives physical death and a life force that directs the actions of a person. In Japan, a person who is severely depressed or in a catatonic state from shock is often described as a person whose soul fell out of the body. Earlier this year I saw many of these people in newspaper pictures and on TV when the aftermath of the earthquake in Kobe was reported. This idea of the soul suggests that the spiritual part of me is the core of my being that integrates my body, mind, and heart. Confrontation with death in hospice

work challenges me to increase my spiritual awareness and integration of self.

MY PATH TO HOSPICE WORK

Many people talk about spirituality by referring to their own religious orientation. Some even think that religion and spirituality are synonymous. However, I have come to realize through my life experiences that spirituality includes religion but is not limited to it.

I was born and raised in Japan where I was exposed to various Eastern religions and philosophies including Buddhism, Shintoism and Confucianism. These different religions coexist harmoniously. My family practices different rituals from different religions and integrates them in our daily lives. For example, we annually go to a Shinto shrine on New Year's Day to pray for good luck in the coming year and typically choose a Shinto ceremony for weddings. A Shinto altar in the kitchen is greeted with a brief prayer in the morning to start the day. However, funerals are conducted in the Buddhist style, and we commemorate our ancestors periodically in a room with a Buddhist altar. My grandmothers were devout Buddhists and made it their regular practice to chant sutras (sacred texts) daily in the morning and evening. We find no contradiction between this and going to nearby Shinto shrines to make special wishes. In addition, my mother goes to see a local shaman to get advice

when the family faces a major financial decision. This general acceptance in society and my family to practice rituals of various religions imprinted in my mind the knowledge that religion reflects spirituality in its teachings and rituals, but religion itself is not spirituality. However, many different religious practices can support one's spiritual growth. My belief has been reaffirmed in hospice work. I have found that I can usually discuss spirituality with my clients without letting our different religious orientations become an obstacle.

I found myself being fascinated with the concept of death and dying in my late teens. My aunt died unexpectedly and soon afterward my grandmother suffered a fatal injury in a car accident. The idea of death, which had been a remote concept to me, rose up to face me. At that time, I already had a belief that a human soul survives the physical body and reincarnates. However, a big question arose: for what purpose do we reincarnate? Meanwhile, in high school I had an assignment to write a reflective paper in my Japanese literature class on an early modern novel titled *Sensei* (teacher) by Soseki Natsume. The novel depicts a process in which the main character struggled with his conscience about a sin that he believed he had committed; his remorse finally led him to commit suicide. This assignment, along with the family tragedies, gave me opportunities to think seriously about the meaning of life and death for the first time.

Once I was exposed to this critical question, there was no way of going back to my old self and pretending as if I had never faced these difficult existential questions.

I came to the United States to pursue graduate education. I chose to study gerontology shortly after I started a master's program in American Studies. Later, I continued this interest while completing an MSW degree at the University of Kansas. From my cross-cultural experiences and study in Japan and the United States, I saw that as people grew older and prepared themselves for death, they faced the same kind of challenges despite cultural differences. Many people died feeling that their lives were unfulfilled. In classes, I learned that coming to terms with one's life and attaining a sense of peace were developmental tasks in the later stage of life regardless of differences between people's life experiences.

Unfortunately, discussion of developmental theory in classes usually neglected the spiritual component of life. If there were any discussion, the role of religion was mentioned briefly, and then the class moved on. However, I felt strongly that the spiritual aspect of life experiences is essential to understand the later stages of human development because of my experience that spirituality is an essential component of a human being. Resolution of life issues requires a great deal of introspection in which an individual reviews life experiences and draws meanings from them.

The degree of acceptance of one's life determines how peaceful one can feel. Approaching human development solely through consideration of physical, emotional, and social aspects seemed incomplete to me. I believe that spirituality is a nucleus of human existence that directs our thoughts and actions to seek a sense of peace and power by connection to the supreme and holy source of existence, whatever it is called by individuals.

Fortunately, during the

last semester of social work graduate school, I took a class titled "Spiritual Aspects of Social Work Practice." In this class, the concept of integrating spirituality into understanding human experience was wholeheartedly embraced. Religion was discussed as institutionalized forms of belief and activity that can support clients' spirituality. The importance of addressing existential questions about the resolution of life and death issues to support personal

growth was reaffirmed. This class helped prepare me for hospice work by giving me an introduction to spiritually sensitive social work practice.

Hospice work interested me immediately when I learned about its existence. Because of its regard for the crucial role of spirituality in facilitating the well-being of a person, I intuitively felt that my quest for deepening spiritual self-knowledge could be enriched through hospice social work.



SPIRITUAL LESSONS FROM CLIENT CARE

Serving my clients has been an eye-opening experience as I have struggled along with them in facing life and death issues. I clearly remember the time that my first hospice client sat with me at her kitchen table on a cold winter day a week before her death. She was extremely weak and looked like a skeleton after suffering tremendous weight loss. As she sat and talked to me, her consciousness went in and out. She said, "I don't know what's there (after death). I never really thought about it." She closed her eyes and some moments passed. Her consciousness returned and she opened her eyes half way again and repeated, "I don't know." Another female client who had firmly believed that she was going to heaven and would experience reincarnation after death sobbed in her bed and said, "I don't know why I can't go now. Why do I have to suffer more? I am ready!" These clients' questions mirrored the questions that have occupied my mind since I was a young adult. Each client and situation have added insights from different angles to my understanding of life and death questions. They will probably revolve inside of me for as long as I live.

Looking into the mirror of my own fear and resistance

Even though I believe that I will be reincarnated after my death, I had strong feelings of uncertainty and dread regarding death and the dying process when I started hospice

work. I felt fear and sadness about separation from this life.

Closely working with a dying person and being deeply involved with his or her life-death transition made me feel like I was going through a rehearsal of my own death. As each client shared with me how he or she was dealing with dying and mourning, I repeatedly scrutinized my own internal existential questions through different scenarios and life situations. This self-reflection forced me to seek meanings in my own life events, and to question the value and nature of my life. Although this self-reflection can lead to valuable insight, it is easy to become caught in preoccupation with my own personal issues, clouding my focus on the helping process and hindering it tremendously. So I learned that self-reflection should not become a distracting self-preoccupation.

Once I had a client with terminal cancer who was in her late 50's. She had a simple life style. She said that her life had been uneventful since she had always wished to live quietly and unnoticed. Although she was a person of few words, people around her could feel her warmth and kindness. She had a solid marriage for over 30 years. Her husband was a hard working man with a strong work ethic. But he was also very stoic and unable to attend much to her emotional needs. As she approached her death, their youngest daughter visited from out of town and attempted to talk to her father to prompt him to show tender feelings toward

her mother. Despite her repeated pleadings, this man never changed his stiff attitude before his wife died. During my involvement with this client and family, I was extremely frustrated with her husband and even felt anger toward him. Reflecting on the case later, I realized I had transferred my own personal issues into this family's dynamics.

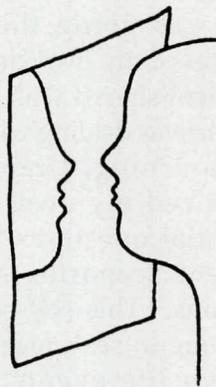


I imagined my parents acting out the same scenario with me as I, the youngest daughter, visited my home country after a long absence. Like this patient's daughter, I would try unsuccessfully to alter my parents' way of treating each other according to my ideal picture and wishes. It was intolerable and painful to think that my mother might die without loving closure or tender good-bye moments with my father. Being far away from them for many years, with only an occasional reunion every few years, I have missed seeing them together

and lack understanding of how their marriage developed in their later years, since they do not talk to me about their relationship. How I want them to be could be totally different from what they want and how they accept their relationship. By self-reflecting about my involvement with this client and her family, I witnessed the result of my failure to handle my own transference issues. Working with this situation helped me to be more conscious about my own family relationships and issues that I need to work to resolve.

Each client's situation is a mirror which often reflects my own fear and unresolved life issues. As I became aware of these mirrors, I quickly started paying more attention to my own feelings during hospice work. A red flag is raised as I talk to a client if I sense discomfort within myself. This is a sign that our conversation has touched me somewhere in which I don't feel comfortable; it suggests that I want to avoid something due to uncomfortable feelings. Sometimes, there is an issue that is totally unfamiliar to me and I do not feel confident dealing with it. Then, I must go beyond my intellectual understanding of psychological transactions by trusting my gut feeling as to how I should respond or where I should lead the conversation. At these times I feel a tightening sensation in my torso or throat. It is the same sensation that I experience when I am angry, upset, or frightened, but is not as strong. When I experience this unpleasant sensation, I make a point of

reflecting on it after the visit with the client. Many of the lessons I get from my clients come from examining my discomfort.



This introspective processing also happens simultaneously during conversations with my clients. As I concentrate on our conversation and try to take in every detail of the client's expression, both verbal and non-verbal, I feel as if I have two consciousness: one is a self who is a helper totally engaged in the dialogue with my client and another is a self who is observing the interaction from a little distance with some detachment. When I am able to maintain this witness stance, I am very calm. Discomfort and fear lose their power over me. I am less reactive even in emotionally charged situations and more effective in my work with clients. This combination of total engagement and calm witnessing helps me to identify my issues that are reflected in the client's suffering. This has become one of my most powerful ways to cultivate self-awareness. It empowers me to be attuned to the spirituality of both myself

and my clients.

NURTURING THE CLIENT'S SPIRITUALITY

It is a challenge to promote a sense of well-being for people during the very end of life. While experiencing physical deterioration and the loss of control over what one has achieved in the past, how can a dying person feel comfort and a sense of peacefulness? As a helper, how can I facilitate this process of spiritual healing?

During the initial phase of my hospice work, I suffered from the "savior complex." In an abstract way, I understood that I could not fix a client's life-long dysfunctional relationship problems or make a person give up resistance to relinquishment and accept the losses and changes about which he or she was grieving. I thought I knew that I could not expect clients to die the way that was ideal and acceptable to me. However, in order to develop truly empowering relationships with clients, it took me many lessons to learn to set my need "to save" them aside. In my effort to help clients maximize their sense of emotional and spiritual well-being, I needed to explore what it meant to be sensitive and non-judgmental toward clients' spiritual orientations and needs.

I had a female client in her mid 40's who was dying from cancer. She was partly Native American. When she was referred to our hospice, she was identified as Baptist on the admission record. However, as I got to know her, I realized that her spiritual beliefs were much

closer to traditional Native American spirituality. She cherished nature and outdoor activities. She considered her life a part of the greater whole of nature that surrounds us on earth. She found a close association between her own soul and nature. Due to her advanced cancer and heart disease, she was home bound. She had a difficult life and carried many worries. It was especially hard for her when she thought about leaving her elderly mother and teenage son behind. However, she revealed moments of serenity when she recalled outside activities that she used to enjoy or looked at nature portraits painted by Native American artists. I assumed that she must have had fear and doubt concerning what is beyond death, but she never appeared to be in despair. When her little nieces asked what would happen to her when she died, she explained that she would become an eagle and go back into nature. Her remains were spread out over the plains close to a Native American reservation.

The most meaningful time we spent together involved life review sessions in which she freely talked about her life-long association with nature. If I had not identified this client's spiritual orientation and source for hope in the face of imminent

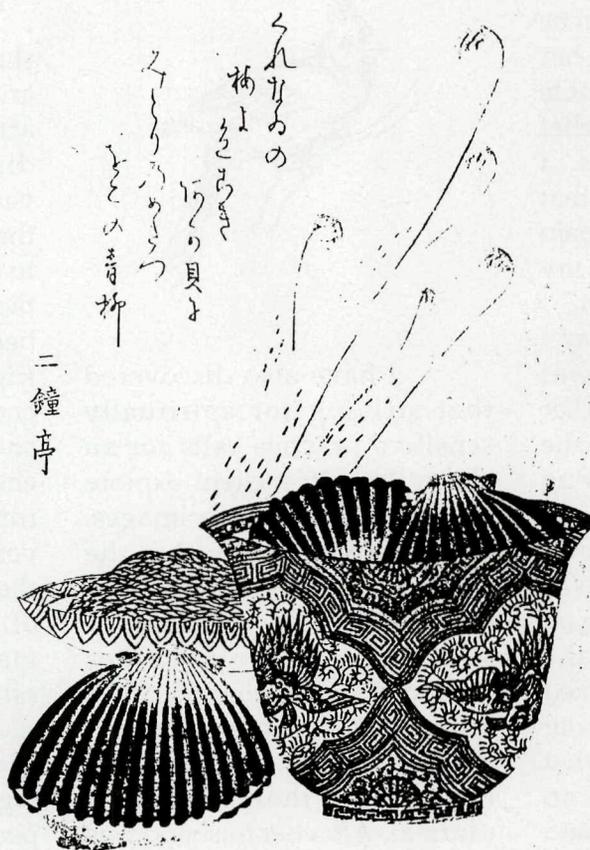
death, I doubt that I could have established an effective helping relationship with her. This experience proved to be extremely important to alert me to be more sensitive to the client's spiritual orientation, including ones that are unfamiliar to me.

Not all clients are willing to talk about their religion or

explicit or implicit. The challenge is to find a compassionate and nonintrusive way to identify the spiritual elements of his or her daily life and to understand how the client nurtures his or her soul.

As a client tells the story of his or her life, the client naturally reveals what he or she values and holds dear as a life philosophy. One might talk about childhood, relationships, hobbies, work, suffering of illness, or losses of loved ones. As I listen, I seek to learn what life enhancing beliefs or strengths the client possesses. My belief is that one's life force is deeply connected with his or her faith, by which I mean the set of ideas that is held to sustain life in a positive way. This seems to me to be the core of our spirituality. Facilitating a client's emotional healing starts from nurturing this source of empowerment and life affirmation.

Once I encountered a client whose religious beliefs and spiritual orientations were drastically different from my own. I found her beliefs not merely different, but odd and bizarre. During a period of brief but intensive service, I learned how I could be supportive of this client without letting the difference between our beliefs stand in our way. She was a woman who firmly believed that her cancer related pain was a

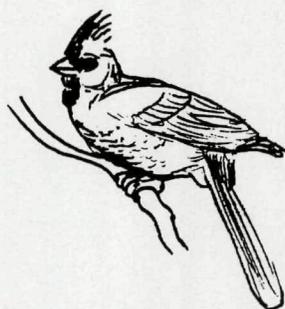


spiritual perspective. Some never may have considered themselves religious or spiritual and thereby do not find it necessary or desirable to bring such an issue to my attention. Yet, from my point of view, each client that I work with has a spiritual aspect, whether it is

punishment from God and that she deserved the pain. I was shocked to discover that she chose to stay in pain. She declined suggestions from the hospice staff to alleviate her discomfort. She did not want to use a hospital-style bed, take medicine, or use other remedial actions. This client eventually died with much discomfort. The hospice chaplain, nurse, and I visited with her frequently to explore what measures might be acceptable to her to remove her pain, but not one of us was able to draw a response. Her belief appeared very foreign to us. I myself do not share the idea that God gives a person physical pain for punishment. During my repeated visits with her, I recognized that the only way I could be supportive for her was to non-judgmentally listen to her spiritual pain as well as the physical and emotional suffering she underwent. When I was with her, I tried to be a supportive listener who was merely another human being on the same path, sharing many questions and emotions mixed with fear, doubt, and hope about death. Who am I to judge what is right and wrong? In an attempt to embrace both life and death, I walk with my clients side by side asking the same existential questions.

One dies in much the same way as one has lived life previously. The dying process is a part of living; it is a continuation of the life pattern that one has already established. If this client lived through 50 years of believing that pain is somehow a vehicle to come to

peace with God, then working to strip that belief from her in the last stage of her life would be both impossible and cruel. I realized that this client's self-determination must be respected and honored. This experience taught me that I should and could be a meaningful presence for someone beyond the barrier of a radical difference in beliefs.



I have also discovered that striving for spiritually sensitive practice calls for an ability to help a client explore symbolism related to images, visions and dreams that the client experiences in connection with his or her religious or spiritual perspectives. For example, a participant in a recent bereavement support group shared a series of experiences that featured a cardinal. After her husband was diagnosed with a brain tumor, she started noticing that the red bird frequently appeared in her sight on significant occasions. When she reflected on the incidents, she came to realize that the cardinal appeared to alert her or to assure her that her trouble was being taken care of. She talked about her interpretation of each incident as the other group members listened

sincerely and encouraged her to share the story. Her interpretation was that her husband started communicating with her through the cardinal after he lost an ability to speak in a comprehensive manner due to his brain tumor. She later shared with me that finding meaning in the red cardinal was a significant factor providing comfort, encouragement, and reconciliation during her grief process.

Many of my clients have shared with me unusual visions and dreams that drew their attention. Their reasons for disclosing these experiences vary. Some want validation of the meaning they have attached to them. Others want to process these images through discussion because they feel puzzled or frightened. As a result of these encounters, I no longer dismiss so-called supernatural experiences as imaginary. I am not interested in gauging the veracity of claims; I wish to help the client explore the meaning of these experiences. Once a meaningful association is established in the interpretation of a certain symbol or event, a client often can derive a sense of significance, harmony, and peace.

Moment by Moment Awareness

My effort to tune into other people's spirituality and nurture it have helped me become a more self-loving person. Caring for others increases my sense of self-worth. It also challenges me to find ways to replenish my energy so

that I have enough to give to others. I came to realize that the only way I could continue to work at hospice, given the stresses of dealing with death and grieving, was to nurture my own soul and be more sensitive to my physical, emotional, and spiritual needs. Self-criticism and self-doubt had to be gradually released if I wanted to be more caring toward myself. To the degree to which I can be nonjudgmental and accepting of myself, I can treat others in the same way. One of the best ways I can do so is by keeping my awareness centered in the present, moment by moment.

I prepare for home visits by mentally running through a care plan and topics that I intend to discuss with a client. However, it is not unusual to find myself caught in an unexpected emotionally difficult or awkward situation at a client's home. In a home with a dying person, outbursts of emotion or the prevalence of chronic anxiety are common. It took me a long time to learn to trust myself completely "to go with the situation during visits with clients. Through long hours of training as a social worker, I was taught that I had to start each session by determining where each client stands regarding the most urgent needs or important issues for his or her time with me. However, perceiving each moment without trying to take control of the interaction has a totally different meaning from starting where the client is. Not taking control does not mean that one is a completely passive listener going along with

whatever the other says. It takes a great deal of concentration and alertness to let the process unfold naturally. Surrendering to the natural progression of interaction with a client can be unnerving. But, it often leads me to an unexpected positive outcome. And by relaxing into this process, my own stress is relieved.

Recently, I visited an elderly female client who had cancer. She also suffered from major depression with psychotic episodes. When I arrived at her home, she was sitting up on her bed. With a stiff expression on her face, she groaned and swayed her body. She did not respond to any of my questions. Her husband said that she had been very agitated. According to him, her pain-control and psychotropic medicines had been increased dramatically during the previous several days without reducing her moaning and groaning. He was not certain if physical or emotional pain were causing her occasional emotional outbursts and constant groaning and moaning. Even the reason she was not speaking was unclear. I decided to sit with her. She looked at me with a blank stare.

The only reasonable way I could communicate with her seemed to be by gentle touching. When I touched her back, it felt very stiff. I gave her a back massage. I commented on the tightness of her body and suggested to her that we work on body relaxation exercises together. She laid back on the bed, and we worked to relax her muscles from her toes to her

head gradually. Her groaning did not stop. To the contrary, it became louder and louder. Feeling a little nervous, I nevertheless continued the exercises as she did not resist or indicate that she wanted me to stop. I decided to surrender myself completely to the unfolding moment. After the exercise was over, she continued to moan. But her moaning gradually changed to singing. At first, the words were blurred. They increased in clarity. I could hear the phrase she was repeating. It sounded like chanting. She repeatedly sang, "Jesus, help me, Jesus help me." She sang for about ten minutes. When she stopped, her body was much more relaxed and her groaning stopped.

This is an example of how the process of spontaneous interaction has healing potential which can be activated if I am well tuned to it. I have to be fully present with the client in the moment of silence and then respond to an inner intuition about what to do. The client and the spontaneity of our relationship drive the process completely. My trust in what is happening each moment seems to be vital to this process. I need to accept openly what will happen in each moment with a spirit of adventure. If my presence can help the client, I feel immense gratification. At the same time, I cannot push the client or hasten the process. Accordingly, I have had to learn not to impose the interaction on the client.

Pursuing the right action moment by moment requires

100% awareness and great concentration. However, I do not mean that one should tense up the body and mind. To the contrary, I find that it is more helpful if I can find a way to relax myself. In order to relax, I find a comfortable physical position and let the busy chattering in my head cease. In dialogue with clients, and especially when helping them to work through difficult feelings and thoughts, the degree of my attentiveness rather than what I say determines the depth of our interaction. To be fully present with my client, I need not always engage in a conversation. Sometimes, it may be better to only hold the client's hand or to sit down together to look at birds through the window. I believe that it is a sense of togetherness in sharing the same space and time at the right moment which nurtures the healing process. Feeling connected to someone in a meaningful way alleviates some of the sense of isolation and fear that dying and grieving people frequently experience.

This way of relating with hospice clients is consistent with one of the major teachings of my spiritual tradition of Zen Buddhism: To be fully alive in the present moment (Hanh, 1992). One's grasp of this concept must go beyond intellectual understanding. It has to be practiced and experienced to make it a natural habit. For me, although moment to moment awareness is natural, maintaining it is not always easy. In my busy schedule, I often feel impatient and hurried, moving from one task to the next. But,

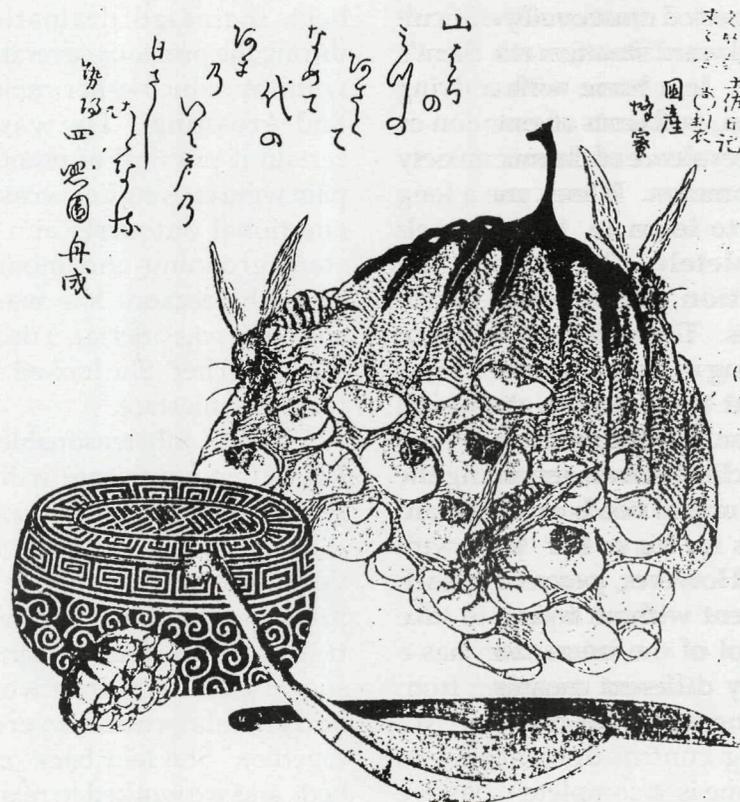
being with my clients in a difficult situation forces me to focus and practice this principle. When I successfully live in the present moment, I feel more centered, grounded, and peaceful. Time itself seems to slow down.

GROWTH AND HEALING THROUGH DEALING WITH LOSS

The dying and grieving process is extremely painful emotionally for the majority of people. Facing imminent death or experiencing the loss of a significant other can present a spiritual crisis that challenges the foundation of the meaning which supports one's life. These experiences often force a person

into intense soul searching. Under those circumstances, one strives to hold an elusive peace and stability, and to ward off feelings of hopelessness and powerlessness. My clients have often described this sensation as an emotional roller coaster; they go through many ups and downs, heart wrenching and stomach twisting.

Yet, I have witnessed people who use this crisis as an opportunity for spiritual growth and life-enhancement. For example, I once encountered a client who liked to discuss life and death issues and the meaning of human existence. However, she never wanted to talk about her daughters, who stayed away from her due to some unresolved problems. She



was angry with her daughters and considered them uncaring. Despite the fact that the client tried to present herself to the hospice staff as a person who had come to terms with life and was ready to die at any moment, she had frequent episodes of panic attack. With encouragement from the staff, the client opened up more to her daughters to discuss honestly what kept them away from having a satisfactory relationship. Initially, the client's daughters were reluctant to talk to her due to bitter memories of the past. But gradually they responded in a positive manner to their mother's sincere approach. After some reconciliation, the client's panic attacks ceased, and it was apparent to the hospice staff that she was more peaceful and serene.

When I examine closely the source of turmoil and chaotic feelings my clients describe, I find that their unresolved issues concerning personal relationships often play a big part in the determination of their worth and the meaning of life. Regrets, unresolved issues, and strained relationships often become magnified during the crisis of the dying process. Resolving these difficult feelings requires the person to reflect and take action. It takes courage and commitment to restore harmony to a relationship long entrenched in conflict.

When one chooses to make efforts to confront and work on relationship problems in a sincere and honest manner, the healing brought about at the emotional level seems to have a

powerful effect in promoting spiritual integrity. Emotional and spiritual dimensions of life seem to be very closely related.

Recognition of death heightens the sense of human mortality. One becomes keenly aware that this living moment will cease and not return. This sense of urgency can sometimes activate dormant power for healing and reconciliation that has never realized one possesses. We once received a referral from a local nursing home. An elderly man dying of cancer moved into the nursing home with his wife who had Alzheimer's disease. They used to live in their home in a rural area of Kansas, but their daughter arranged for them to move to Topeka where she lived. This daughter was the only child and was feeling the heaviness of caregiving responsibilities. Nursing home placement became the only solution for her to provide adequate care for her parents. However, she suffered from agoraphobia. It was tormenting to her that she had to go to a crowded nursing home to see her parents. Due to this circumstance, her anxiety was extremely high and she could not go into the nursing home by herself. Initially, to cope with this, she visited her parents accompanied by her husband or hospice staff. But, it was a great inconvenience to her because she had to visit according to other people's convenience. Because of this, she started testing herself to see how far she could push herself to go alone into the nursing home. With the support of her family,

the nursing home and hospice staff, and members of a support group for people with agoraphobia, the daughter was finally able to go to see her parents by herself when she wished.

Whether mending a relationship or developing a new ability to cope with crisis, a key to reaching a positive outcome seems to be in an individual's courage to face his or her own fear. Commitment, love, and mutual support can be a source of power to boost courage and activate change. A Japanese word, *kiki*, provides insight into this. *Kiki* means danger or risk. It consists of two Chinese characters that mean danger and opportunity. I believe that danger and opportunity are different sides of the same coin. A life risking situation, or the final stages of dying, bring both danger and opportunity. In general, people at first relate to the dying process with a negative response because it is so threatening and unknown. However, if we look at the other side of the coin, and strive to draw opportunity out of the risky situation, even the tragic experience of dying or losing a loved one can contain possibilities to enhance life and facilitate personal growth.

CONCLUSION

A notable activist in the field of spiritual support for the dying, Stephen Levine, said, "In a sense, we are not preparing people to die. We are learning to die ourselves." (Levine, 1980). As a person who has worked with dying people and their

loved ones, I experience the truth of his statement. Through hospice work, I am not only helping clients. I am also preparing myself to die the death that will come someday. The major difference that I observe in myself now, compared to when I began this work two years ago, is that my fear of death is reduced and the dying process presents me with some elements of hope.

My spiritual growth was made possible by addressing the meaning of life and death with hospice clients. I still don't know why suffering is inherent in human living. But my understanding of human suffering has more depth. I am grateful to those clients who provided me with this opportunity for growth by allowing me to participate in their efforts to raise themselves through struggle. When I see my own reflection in my clients and in their emotional and spiritual pain, I feel humble in knowing that we are walking on the same path of spiritual growth.

I also learned through hospice work that I will never be able to die a good death if I am not fully alive in my daily life. There is a question of how to find peace while our modern lives are so busy, since we seem to be perpetually fighting against time and being chased by the dreaded "to do" list. I have pledged myself to live in the present moment, but how easy it is to forget the present moment and to slip into the future and past! Going into clients' homes and visiting with them repeatedly reminds me to embrace the

precariousness of living in this very moment.

At hospice, my awareness of spirituality is continually rekindled by the teaching of my clients. Through preparation for my own death, I have come to live more consciously. The lessons I have learned from them have reinforced my conviction that spirituality is a crucial dimension of human life that needs to be perceived and treated in a sacred manner. □

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