

Head Librarian Lois Chambliss is also angry. So angry that she was a moving

"No amount of discipline at a high school is going to dissuade students from doing

absent from school that day." (The District Attorney, however, contends that five of

listed as truant. The Mercury article also referred to "numerous in-

They're high school students" she said. Soquel's student body

group of Soquel High School students and not a group of local teen-agers or Scotts

# Hospice: where the dying are comforted

By BILL AKERS

To talk of death and dying is not easy. We avoid doing so until a situation arises in which we must face up to it: our own illness — or that of a husband, wife, child, parent, brother or sister — which is probably terminal. Then, too often, it seems there is nobody one can comfortably turn to, so we direct our fears and grief inward so as not to grieve those we seek to comfort.

It is these people the volunteers in the Hospice of Santa Cruz would like to reach, if invited to do so, to let them know there is someone they can talk to, that they are not alone.

Hospice volunteers have taken on an awesome task — to comfort those who may be dying by listening, doing errands, finding a needed service, or sometimes, just by being there. The concern is not only for the patient, but for the other family members as well, and it extends through the period of bereavement which follows the death of a family member.

It is a service which calls for a special kind of dedication. It can be emotionally demanding, but it is also "incredibly rewarding," according to Mrs. Julie Pitts, an organizer and now president of the Hospice of Santa Cruz County.

This hospice is a young group, having been incorporated as a non-profit service organization in April and in operation since June. In that time they have worked with 53 patients and their families. It is one of a growing number of hospices in the United States. "Every state has a hospice working or forming," Mrs. Pitts states. "There are 40 or 50 in California — the figures change daily."

As evidence of the growing interest in hospices, Mrs. Pitts

tells about the 1,000 people who attended a national meeting of hospice administrators and volunteers in Washington, D.C. earlier this month. "They were expecting three or four hundred."

The word "hospice" comes to us from the Middle Ages, when society was not geared to take care of its destitute, dispossessed and dying. During the Crusades, the Knights Hospitalers established way stations at which pilgrims could find food and shelter. In the 18th century, a group of nuns in Belfast, Ireland, established a hospice as a place for people to die who could not die at home. Although they exist in a variety of forms in this country, that is what the modern hospice has become. The model for the program is St. Christopher's in London, where the dying are not only given emotional comforting, but are assured they will have pain-free final days.

Some hospice groups have extensive home care programs in which teams of doctors, nurses, psychologists, psychiatrists, social workers and clergy work with the patient and his family.

Some hospitals allocate

## Change clocks

Daylight Savings Time ends at 2 a.m. tomorrow, which means you should set your clocks back one hour. You can do so before you go to bed tonight or, if you want to go by the book, you can get up at 2 a.m. to do the chore. Either way, the net effect is that you'll gain back that hour's sleep you lost when DST went into effect back in April.

space for hospice beds which are served by such "inter-disciplinary teams."

Some hospice groups have, or are working towards having, their own buildings in which a limited number of patients, who could not otherwise die at home, would be cared for.

"What we do is different," Mrs. Pitts explains. "We provide psycho-social support for those who are in a life-threatening situation. We haven't gotten into the medical care aspects, as have some others."

Psycho-social support means, simply, doing those things which need to be done, other than medical treatment, and which are not being done by other service agencies. It might mean putting a patient in touch with one of those agencies — Visiting Nurse Association, Home Kare — "or finding a sheepskin for the bed so the patient won't get bed sores." It might mean being on hand so that a man or woman caring for a dying spouse "can get out of the house to take a walk around the block."

Mrs. Pitts explains why this group chose to limit itself to "psycho-social support." When a small group met in her home in Rio del Mar last November to discuss organizing a hospice, "we had to figure out what it was that we could do that would let us begin to work right away. We decided that would be to provide the psycho-social support and work with the existing agencies who provide the home care. We feel that for our community, that is best."

Another factor in the decision was the experience of other groups — particularly the Monterey Peninsula Hospice in Carmel — in trying to get state licensing so they may provide the full range of

care and run their own hospice facilities. The Carmel group, she says, has been working for the two years of its existence to get licensing from the state. "We felt we do not have the personnel and do not want to invest the time to get licensing so we could provide the medical care." The licensing procedure may become easier, she said, because the state Department of Health is developing licensing procedures especially for hospices.

Mrs. Pitts prefers to talk about people who are in a "life-threatening" situation instead of being "terminally ill."

"I do not use the word 'terminal'," she says. "It does not convey the sense of the fullness of life. 'Terminally ill' means that is the end, and how many people have you heard of that were told they were terminally ill, and then recovered? 'Life threatening' is not a euphemistic exchange, and I know it creates a very different feeling in people." The American Medical Association, she points out, has deleted the word 'terminal' from its publications.

The heart of the Santa Cruz County Hospice is the crew of 40 volunteers. Their ages range from 21 to 70 years and they represent every religious preference. They are the product of intensive, eight-week training sessions totalling 110 hours. There are seven weekly sessions of three hours each, and two weekend sessions which last from 9 a.m. Saturday to 8 p.m. Sunday.

During these training sessions the volunteers learn about the community agencies which can be called upon to keep the patients and their families.

Representatives from the Catholic, Jewish and Protestant faiths are called upon to counsel the volunteers



**JULIE PITTS: It fills a need within me**

on what the religious requirements of a dying patient might be.

Doctors take part in the training of the volunteers by explaining all the aspects of cancer, for instance, "and explaining to them that people don't always look pretty when they are dying."

There are patients, also, who talk to the volunteers "to share their experiences with them. Volunteers who have been working with the program for awhile are used to help train the new ones."

The selection of volunteers

is a very careful process, Mrs. Pitts says. First, the applicant fills out a written form "which asks a lot of questions about his background."

After the written applications are screened, the applicants are interviewed. "We look for people who are open and willing to learn; who are aware of themselves and who realize they are doing this work for themselves," she explains. "We want people who have the emotional strength to do this kind of work." She concedes the final

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