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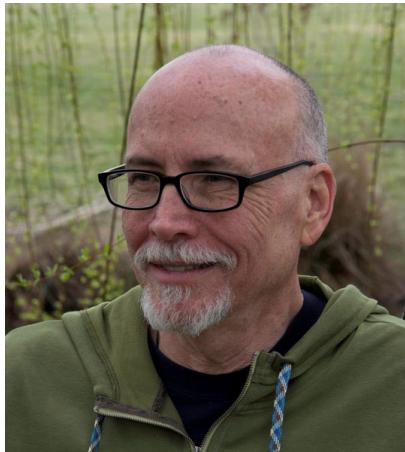
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Where Words Fail

By Fred Grewé

Board Certified Chaplain and Author
What the Dying Have Taught Me About Living



I was afraid of dying so I became a hospice chaplain. I figured if I hung around with Death, made friends with him (at a safe distance), I'd get used to him and he wouldn't be so scary. So, for the past nine years I have had the privilege to journey with over 1,000 folks who have gone on to the other side. I've seen first-hand how we all live in a world where no one escapes without experiencing pain, suffering and death. The thought that maybe, just maybe, suffering could be good for me wasn't even on my radar screen. But this was before the dying began to teach me about living.

Of all the lessons I've learned from the dying, none has been so valuable

as this: keep your mouth shut and your heart open.

Why? There are just some places along this life journey where words fail.

It has taken five years of intense training and another four of ongoing practice for me to learn this lesson. Having been a minister for most of my adult life I was under the delusion that I was supposed to be able to somehow miraculously fix things and eradicate suffering. A delusion I can only hope you do not harbor.

Since I can't eradicate all suffering, I've realized neither can everything I say. Words have their uses and their limits, and this goes to the very heart of what words are anyway. Words are simply agreed upon coded sounds (if spoken) or symbols (if written) that attempt to communicate a thought or feeling or experience from one animated soul to another. The route this coded sound makes from one soul to another goes through the mind and that's why sometimes words just don't work very well.

Words and minds require reason. What happens when you find

yourself in a place that is unreasonable? When the mind goes on the fritz words become useless. Minds are very fragile things that easily go on the fritz due to disease or suffering – two things part and parcel in providing healthcare.

I've also learned from the dying that the very nature of suffering is the fear of being isolated – the fear of one animated soul not being able to communicate with another animated soul. "No one understands!" "You don't know what this feels like!" These are statements uttered by sufferers. In such a place words are often useless. Worse, they can be harmful. Attempting to utilize sensible words in a sense-less place can be traumatizing. Words like "God won't give us more than we can handle," said to a patient upon learning they have pancreatic cancer can just be sadistic.

Now the good news for those of us who desire to help ameliorate suffering is this – words aren't the only way for one soul to communicate with another. There are other modes of communication. Things like tone of voice, facial expression, loving eye contact, body language, and appropriate gentle touch like holding hands all

can be excellent communicators to help break the painful isolation of suffering.

But of all the non-verbal modes of communicating with the suffering I have discovered, the most profound (paradoxically) may be silence. Sitting with a sufferer, not running away, not allowing my own fear to cause me to spurt out some pithy little aphorism, simply sitting there, maybe crying with, maybe holding hands with the other has incredible therapeutic value – for the sufferer and amazingly for me. This is communication at the deepest, rawest, most human level and words are nowhere near.

One of the great things about silence therapy is that it doesn't require a lot of time – but it does require being fully present. All healthcare providers experience the pressure for productivity, and this can present an obstacle for being fully present with a patient who is truly suffering. But I have learned that by simply taking a few extra moments with another human being, forgetting all of the other patients I have to see, forgetting the incessant charting that always needs to be completed, forgetting my infernal cell phone, or what I'll have for lunch – just sitting with a suffering soul, breathing with

them, reassuring them that they are not alone – is incredibly therapeutic. Some people call this compassion.

One of my most trusted spiritual guides, Henri Nouwen puts it this way,

Compassion is hard because it requires the inner disposition to go with others to the place where they are weak, vulnerable, lonely, and broken. But this is not our spontaneous response to suffering. What we desire most is to do away with suffering by fleeing from it or finding a quick cure for it ... Our ability to enter into solidarity with those who suffer [is our greatest gift].¹

While being compassionate is not always easy, and is often inconvenient, it does make me feel like a better human being. After such soul connecting encounters I do feel emotionally depleted. But in some strange way I also feel my own humanity has been nourished and this decreases my likelihood for burnout. Like so many spiritual truths, it's simply a paradox.

So here's some free advice (which is always worth the cost) from a hospice chaplain. The next

time you're with a patient who is suffering from something that cannot be alleviated immediately: don't just do or say something – sit there.

Fred Grewé is a Board Certified Chaplain (Association of Professional Chaplains) with a Master's Degree in Pastoral Care from the Aquinas School of theology in St. Louis and an ordained Congregationalist minister working for Providence Hospice in Medford, Oregon. His interest in working with the dying began in the early 1990's with the death of his best friend who succumbed to AIDS. Fred is currently working on a doctorate at Pacific School of Religion in Berkeley, CA on end-of-life care. Fred's book, "What the Dying Have Taught Me about Living" has recently been published by the Pilgrim Press / Open Waters Publishing and is available from Amazon http://www.amazon.com/What-Dying-Taught-about-Living/dp/0829820035/ref=la_B00LQ82O16_1?s=books&ie=UTF8&qid=1410722593&sr=1-1.

¹Henri J. M. Nouwen, *The Way of the Heart: Desert Spirituality and Contemporary Ministry* (New York: Ballantine Books, 2003), 24-5.

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