



Stories used in *Being Your Best*

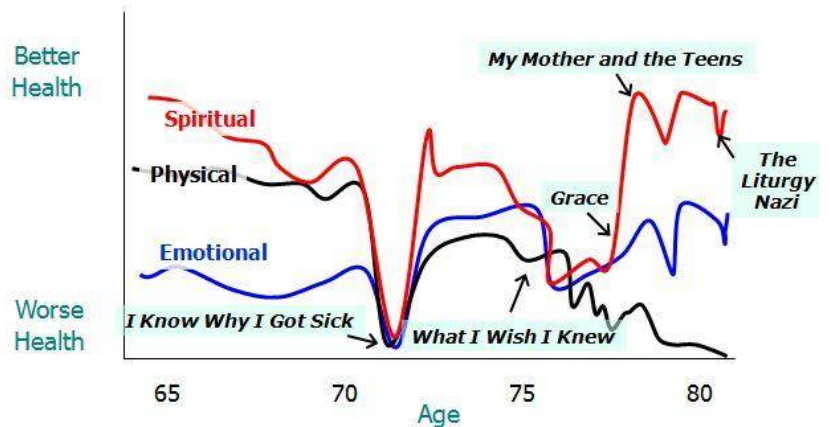
*STORIES USED IN THE *FOUR STEPS* ARE MARKED WITH A PAGE NUMBER.

My experience as a professional and a caregiver shaped *Being Your Best*.

True stories include:

- ***Like Getting Stoned*** (2) - about a teen who was my teacher at Children's Hospital
- ***I Know Why I Got Sick*** - why it took me three years and a picnic to learn that love is often the best medicine
- ***What I Wish I Knew*** (4) - why plunging from an overworked "expert" to an overwhelmed son motivated me to write *Being Your Best*
- ***Grace*** - a belated lesson in forgiveness from a dying friend at her last birthday party
- ***My Mother and the Teens*** (6) - how I learned that wellness is more than what medicine can measure
- ***The Liturgy Nazi*** - How guilt warped my judgment before my mother's funeral

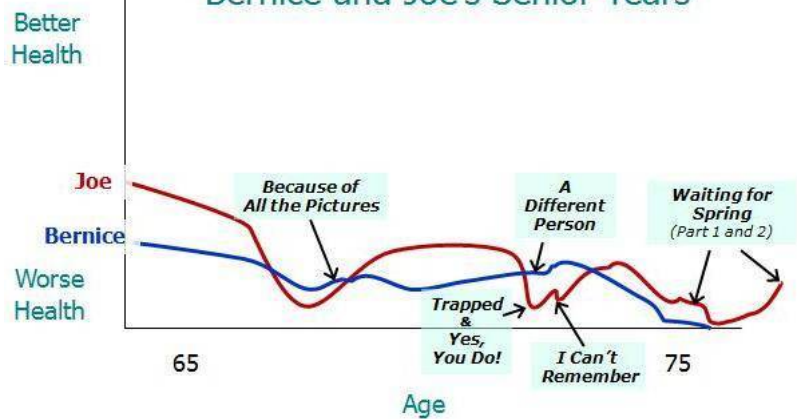
My Mother's Final Years



The stories about the Phelps family are imagined, but any of us might face their challenges.

- ***Because of All the Pictures*** - When a volunteer comes, Bernice wonders: "Why would a young man like you spend the middle of a busy day delivering meals to an old lady like me?"
- ***Trapped*** (7) - What do you do when you're screaming inside?
- ***Yes, You Do*** (9) - Cindy is caught in the middle of an argument between her parents in Joe's hospital room.
- ***Like a Different Person*** - Bernice worries and Cindy is tired of it.
- ***I Can't Remember*** (11) - Joe is in the emergency room and his blood pressure is dropping. But Bernice doesn't know what pills he's been taking.
- ***Waiting 'Till Spring - Part 1*** (13) Joe is angry about a question he must ask the hospice nurse.
- ***Waiting 'Till Spring - Part 2*** Joe is surprised by "little glimmers of love" he's starting to see
- ***I Don't Want to Talk About It!*** (16) - Cindy doesn't know what to do when her daughter is raped on a date.

Bernice and Joe's Senior Years



All stories are written by Tom DeLoughry, Ed.D. © 2007-2011

GET ALL THE STORIES - AND MORE *FOUR STEPS* TIPS - BY PASSING THE *COACHING QUIZ* IN OUR ONLINE COURSE.

VISIT WWW.BYBHELPS.ORG/COURSES TO LEARN MORE.

Like Getting Stoned

The elevator was crowded with nurses trading gossip and silent parents holding stuffed toys. The knot in my stomach grew as we approached the fifth floor.

I thought: *Who would be waiting? Another teen too angry, or too afraid, to speak?*

As coordinator of adolescent services in Child Psychiatry at Buffalo Children's Hospital, part of my job was to evaluate patients who were admitted after a drug overdose. I had 45 minutes to see them, then 15 minutes to write recommendations. It was never enough time to understand why a life had been broken, and suggest some steps to fix it.



David was lying in bed, his long curly hair brushed over his cheeks to hide his pimples. A game show blared from the TV.

"Hi," I said. "I'm Tom. I hear you've been having a tough time." After my standard opening, everything else was unpredictable.

Sometimes it was just a wild teen who had partied way too heartily. Often it was a child so overwhelmed by life that death seemed the best choice from a menu of miserable alternatives.

David kind of fell in the middle - A tall, awkward kid who was so conflicted by an angry mother and a distant father that he didn't care what happened to him at school or on the streets.

Four months of counseling later, David was in my office telling me a story: "So, on Saturday night we're over at my friend's house and I tell them, 'Turn down the lights and lay on the floor.'

"Then, I start doing that thing that you do. You know, where your voice gets low and slow..ow," he went on in a deep voice, half-mocking me.

We both smiled as he continued to describe the relaxation exercise I had taught him.

"And we start going through all the muscles, tightening them and letting them go. And when we got done, one of the guys said, 'It's like getting stoned, man!'"

Yes!! David and his friends had learned relaxation could give you a "natural high."

I was amazed. Most of my clients would rather lie than tell friends they were in counseling. But David was *bragging* to friends about it. Even better, he was *teaching* what he had learned.

For the past year, I'd been running a self-help class, 'Improving Your Health,' once a week on the hospital's adolescent floor. Teens in wheelchairs would compete with others tethered to IV bottles to see who could relax the most. We kept score by using biofeedback to measure the tension in their forehead or shoulder muscles.

The kids with the lowest scores (i.e., the most relaxed muscles) would win gift certificates for music or the snack bar. The ones who could tense their muscles tighter than anyone else would get the booby prize – a hot water bottle.

I wanted to teach two skills: assertiveness and acceptance. So I'd always ask: "What's more important? ...to be able to relax and accept? ...or to be assertive? – like telling your parents and doctors what you think, want or feel?"

After a discussion, we would usually agree that *both* these skills were important. Some of the teens would practice questions they wanted to ask their doctor – or concerns to discuss with their parents. As the group ended, the kids would ham it up for a group photo with their prizes. They would leave with a cassette tape that had a relaxation exercise on one side. The other side had a *Music Workshop* – to illustrate the music was a "drug" they could use to change their mood or manage their stress.

The head nurse had been telling me that the teens who came to my group requested less pain medication than patients who didn't. And the patients with diabetes and other illnesses were having fewer complications.

Then, I met David.

I started to wonder: "Maybe I should just teach self-help skills? Then I could help families to prevent problems, instead of helping them solve another messy crisis. And maybe they could learn to coach or help each other..."

The next year, I changed careers from counseling to health education – and enrolled in a doctoral program to learn more.

Author's Note

I used to call acceptance and assertiveness, the "love skills," to get the teens' attention. We'd have long discussions about how both skills could improve their relationships with their boyfriends and girlfriends, as well as their parents and doctors. Later, I realized that two more skills (awareness and affirmations) were also important. Now, I call all four the "[Satisfaction Skills](#)."



- To improve awareness and acceptance, try the *Relax Your Body and Focus Your Mind* videos. They're online in [Four Steps](#) (see: Step 3: Use Four Ways Stop Stress)

- What happens in a relationship when you use all four of the satisfaction skills? ...What happens when you don't?

- The nurse said that the teens who used skills to address their emotional issues had fewer physical problems. What about you? ...What issues affect your physical health?And what's your plan to deal with them?



What I Wish I Knew

As my parents aged, taking care of them was like riding a roller coaster. One of my clearest memories was the moment I took the plunge from being an overworked expert to becoming an overwhelmed son.

For ten years I had directed wellness and disease management programs for Independent Health, a large managed care organization. Our team had just received a national award for improving the quality of care for diabetes and hypertension. I had also authored the American Lung Association’s national program for emphysema and chronic bronchitis.

Those were the three illnesses my mother had: diabetes, hypertension and emphysema.

So, when my sister, Diane, and I started to explore additional services for her, I figured that with my background I could score big points in our ongoing game of “Who does Mom like best?” I planned to be subtle, but was looking for chances to show off by playing the "expert" card.

Diane and I sat across from the social worker who explained our options in a flurry of agencies, assessments and services. I was shocked that so much was totally new to me.

It quickly dawned on me that good health – especially for the elderly – involves much, much more than just good medical management. I avoided eye contact, kept quiet and tried to take good notes.

“If I’m overwhelmed,” I thought, “what is this like for someone with no health care background?”

That’s the moment I decided to write *Being Your Best* - to address what I wish I knew before my parents needed my help.



Author’s Note

I’ll never forget how embarrassed I was to realize that all my health care “expertise” was only a small part of what my parents needed. But my parents, plus many patients and caregivers, taught me that we need to address all of the needs (medical, emotional, social, spiritual, financial, educational) seen in the "Wellness Puzzle."

But how can you avoid being overwhelmed when a crisis strikes? ..whether it’s the hospitalization of a child? ...or an aging parent who can no longer live independently?



Life is often overwhelming, whether it's a crisis at home, work, school or the hospital.

The "Four Steps" were created so you can develop a solid plan for what needs immediate attention, while considering all the factors that affect your health and happiness.





The "four ways to stop stress" can also improve your communication – while helping you see through the "blindness" caused by stress.

If you explore how the Four Steps can help you manage stress, you'll be better prepared for any problem in your life.

These Four Steps are explained in more detail in:

- the Four Steps [summary](#)
- the interactive [Internet lesson](#)

Remember this poem for better health and more happiness

Step 1 Start solving your puzzle.

Is each piece of your wellness puzzle helping you?
...Which pieces need attention now? ...Which ones can wait?

Step 2 Start making your plan.

See how an *Action Plan* can help your reach your goals.
...You can do it, if you can remember another short poem.

Step 3 Use four ways to stop stress.

Learn how just four skills can reduce your stress, improve your relationships and enhance your peace of mind.

Step 4: Use help when you can.

Find trusted help in your community and on the Internet - then work with professionals to get the best outcomes from your *Action Plan*.

Menu from: *Four Steps to Better Health, More Happiness and Fewer Hospitalizations*
An interactive Internet program at www.BYBhelps.org

My Mother and the Teens

Bruises covered one skinny arm and her ankles were a swollen purple mess. Someone had helped her out of bed, but she barely made a dent in the little armchair that faced it.

The drone of her oxygen machine drowned some of her words. But I filled in the blanks from the warmth in her eyes and the smile on her lips near the cut that had just been stitched.

My mother was peaceful.

I couldn't connect her contentment with her typical crankiness, her frequent falls and last night's ambulance ride.

Yet, now there was a glow about my mother. It would grow for months, but I wouldn't understand it for years.

A few weeks later, my wife and I were walking along Lake Ontario. Ahead of us, two teen-age boys skipped from boulder to boulder, tanned muscles flexing in the sun.

As we approached, we realized that their shouts were curses - aimed at someone who wasn't there. The warm breeze carried their anger long after we passed.

I asked Kathy, "Who do you think is more well? ...my mother ...or those boys?" And neither of us knew how to answer.



Author's Note

I knew that my mother had some sort of positive spiritual experience during that hospitalization, but I didn't learn why until years after her death. The mystery was solved when a dying friend made a chance remark at her final birthday party (as told in "Grace" - another Being Your Best story.).

- Who do you think was more well – my mother or the teens?
- Are some pieces of the wellness puzzle more important than others? ...Does this change as people age?
- Do you believe that "peace of mind can always grow?" ...And, if so, what steps might help you and your loved ones?
- If spirituality is important to you, explore the connection between the *Satisfaction Skills* and prayer in Step Three: [Four Ways to Stop Stress](#).



Trapped

He struggled, confused at being inside a cold iron tube. *Trapped.*

For years, he'd had flashes of that feeling. Confined at the back of a plane. Stuck in a crowd with no way out.

Now, as Joe awoke, he knew he was trapped for real.

The hospital room smelled bitter, sweet and foul. And he knew the foulness came from him.

His sheets, heavy with urine, were cold on his thighs. Stretching as far as he could, his hand strained to just inches from where the call button dangled. He waited, screaming inside.

"Hello?" he called. Softly, so he wouldn't wake his roommate. Yet hoping that someone in the hall might hear. That someone would stop the stench and something could free him. That, after being in the hospital for five days, he wouldn't fall again.

He repeated a phrase that gave him peace, over and over with each breath. Then he relaxed his mind by focusing on the air moving in and out of his lungs – imagining peace flowing in and tension flowing out with every breath.

"What if I can't take care of myself anymore?" Pictures of wheelchairs and bedpans surged through his mind. Each time his heart raced or stomach fluttered, he focused back on his breath and those thoughts of peace. The sky outside his window turned from black to gray.

Footsteps squeaked in the hall and he called out. The aide hesitated in the door, then approached, looking like she hadn't slept for two nights.

"I need some help," Joe said, then looked down at the sheets. "First time anybody's had to change me in seventy-five years."

He had a hard time understanding her accent. But her smile told him she would help. "You're very kind," he said. "But when you're done, I want to speak to the head nurse."

A few minutes later, after he was dry again, the head nurse appeared. "Your aide did a good job, but I've been helpless here for over an hour because the call button wasn't clipped to my bed," Joe said. "I'd like some assurances that this won't happen again to me or any other patients here." The nurse apologized and said she would see to it.

Afterwards, Joe rested, wondering if Bernice and Cindy would make it through the snow to visit today. He thought of a joke to tell them - then smiled a little, just before he fell asleep.



*Author's
Note*

My wife and I both teach the Satisfaction Skills. And we use them, because we learned how helpful they are - when our arguments started to get a lot shorter.

The content in Being Your Best is also based on dozens of [research studies](#), plus feedback from thousands of participants in hundreds of workshops.

It always amazes me that just four skills (awareness, affirmations, assertiveness and acceptance) can have so many benefits: like managing stress, improving relationships or finding peace of mindOr that so many problems can be created – or get worse - when you forget to use them.

- Which of the satisfaction skills did Joe use to deal with his emotions when he was trapped?

- Which of the satisfaction skills did he use to deal with the health care staff?

- Read the story, *Like Getting Stoned*, and note what the head nurse said about the teen patients who had used these skills.

- How might the satisfaction skills help Joe with this health problems? ...or help you with yours?



- [Assess Yourself](#) to see how often you're using the Satisfaction Skills
 - Which skills are your strengths?
 - Which ones do you need to practice?

Yes, You Do!

"I *do* want to go home!" Joe said as he struggled from his hospital bed to a chair. "But, Bernice, you can't even take care of yourself, let alone a husband with a broken hip, diabetes and the flu!"



"Are you telling me what I can't do?" Bernice said with a hard look in her eye. "What gives you the right to lecture me? What about that flu shot you never got?"

"Never mind about that, Bernice. It's just too much!" he insisted, his voice rising. "All the medical bills. Two sick people in a house that..."

Cindy felt her head pound harder as she listened to her parents argue.

"Dad!" Cindy interrupted. "It *is* a lot. But, as you always say: 'It's the hand we've been dealt, so let's play it!'"

"What you need is a plan," Cindy continued.

"What do you mean?" asked Joe.

"There's a little poem I learned that is supposed to help you plan for any problem," Cindy said. "It goes: 'Remember your goals and check your signs. Then, take some steps and learn each time.'"

Cindy looked out the window, remembering the battles with her teen age daughter. "That little poem kept Susan and I from killing each other last year, because - after her counselor got us started - we started to work on solving our problems together.

"It can help with your health, Dad," she concluded.

For a minute the room was quiet.

"You know, I think we've got two issues going here," said Bernice. "There are the medical problems. God knows we've each got enough of those. And then - ever since we both got sick - there's been all this bickering."

She paused, meeting his eye.

"Joe, we never used to be like this."

"So then you need two plans?" Cindy said, looking hopefully at her mother. "One to keep Dad out of the hospital? And another to keep your love going?"

"I don't know," said Joe.

"Yes, you do," said Bernice, reaching for his hand.

Author's
Note

There were two problems that concerned me during the ten years I directed wellness and disease management programs for a large managed care organization

1) **Most health education programs only teach what to do with one specific problem** (e.g., diabetes, stress, high blood pressure, stress). What you learned to solve one problem would rarely help you with a different problem.

2) **Most programs were designed for a particular age group** (e.g., seniors, working adults, teens). Thus, grandparents weren't encouraged to coach their children or grandchildren; and teens weren't helped to support their parents or grandparents.

Being Your Best is different in that the core skills (i.e. the Four Steps; **the Action Plan** [illustrated at right]; and the Satisfaction Skills) can help you deal with any medical or emotional issue at any age – while finding the help you need in your community. Thus, the same core skills can be used to help:

- Joe work closely with his doctor to control diabetes
- Joe and Bernice improve their relationship
- Cindy and her teen daughter, Susan, to deal with mother-daughter communication, like after the rape in "I Don't Want to Talk About It!"

Remember, though, there is great value in the disease-specific and age-specific information! What BYB offers is a way to integrate the "signs" and "steps" you learned for a particular issue into an Action Plan that can help you to continuously improve your overall wellness.

- Print [Step One: "Start Solving Your Puzzle"](#) and [Step Two, "Start Making Your Plan"](#) from the *Four Steps* lesson.
 - If you were Cindy, how would you use these steps to help your parents:
 - work more closely with their doctors?
 - keep their love alive?

....And – as importantly – help yourself to deal with the stress of being a caregiver?

- How could you use an *Action Plan* to reach your goals?

Choose Your Goals



LOVE · PEACE OF MIND · HEALTH
INDEPENDENCE · HAPPINESS

...and Check Your Signs.



STRESS · SATISFACTION · DEPRESSION
BLOOD PRESSURE · WEIGHT · CHOLESTEROL
ABILITIES FOR ACTIVITIES · DRUG OR ALCOHOL USE

Take Some Steps



MEDICATION · THERAPY · SELF-HELP
EXERCISE · EAT WELL · GET SUPPORT
USE THE "SATISFACTION SKILLS":
BE AWARE · AFFIRM · ASSERT · ACCEPT

...and Learn Each Time.



RE-CHECK YOUR "SIGNS" TO LEARN WHAT WORKS FOR YOU

I Can't Remember

“Cindy, it’s Mom. I’m at the hospital with Dad, but I need your help.”

“The hospital? But he was just discharged last week! What’s wrong?”
Cindy said, her voice rising in alarm.

“He got dizzy and passed out.” Bernice said, taking a breath. “The doctors think it might be a reaction between two of his medicines, but I can’t remember what he’s taking,” she said as her lower lip began to tremble.

“Cindy, could you go to our house, get his pills and bring them to the emergency room at General as soon as possible?” she asked.

“OK, Mom. I’ll get them.” Cindy replied. “Is there anything else I can do?”

“No, honey. Just come quickly,” Bernice said, giving the phone back to the nurse.

Tears blurred her view of the emergency room entrance. But, nearly an hour later, Bernice recognized Cindy’s coat as she hurried through the door.

“Here they are, Mom,” she said, holding up a wrinkled bag. “These are the ones from the kitchen and the bedroom. I also took all the pills that were in the bathroom.” Cindy said, lifting a second bag for her mother to see.

A few minutes later, Cindy and Bernice stood in front of the nurses’ desk.

“Now let me see if I have this straight,” the nurse said. “These five are the ones he’s taking now - which might be true because they were all refilled within the last month - and these four are medications he used to take?”

“Well, the doctor just changed one of Joe’s medicines, so he stopped taking one of those five,” Bernice explained, “but I’m not sure which one. And sometimes he takes one of the pills from the medicine cabinet when his back bothers him ...but I don’t know about the others.”

The nurse sighed, as she stood up.

“Will my Dad be OK?” Cindy asked.

“We’ll do our best,” the nurse as she hurried away, fumbling with five medicine bottles in one hand and four in the other.



What do you think?

- Does the nurse have enough information to help Joe?
- What could Joe, Bernice or Cindy have done to avoid this hospitalization?
- If you or a loved one has a medical emergency, what's your plan to tell the doctors what medications you are taking?

*Author's
Note*

Unfortunately, stories like "I Can't Remember" happen thousands of times each day. Every year more than a million and a half patients in the United States are harmed by medication errors, according to the [Institute of Medicine](#).

Often, it's not the doctor's fault. Typically, when you see a new doctor, only about half of the doctors have access to your medical records – unless you bring the records yourself.*

To avoid this problem, you need to take steps to connect your own care, as explained in the Four Steps: [Plan to Reduce Hospitalizations](#).

*Bodenheimer, T. "Coordinating Care—A Perilous Journey through the Health Care System" New England Journal of Medicine 358:10 1064-71 March 6, 2008

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Waiting 'Till Spring – Part I

“It’s so lonely here in winter. Maybe she could wait until the spring?”

I hated myself for asking, and hated God for making me ask. But the nurse kept talking about “letting go”, and I didn’t know what else to say.

She’s still young, at least to me. Other women her age are taking trips to Florida, babysitting for the grandchildren - even taking tap dance lessons. But Bernice gets exhausted just crossing the room.

Heart problems slowed her down, but it’s the emphysema that’s stopping her.

I remember her walking towards me in the dining room on our one and only cruise. Her dress was a dark, silky blue that showed off her shoulders and her breasts. So what if she wore an old mother-of-the-bridal dress for a fancy, formal night? She was prettier than anyone else in the room, and when she smiled... wow.

I’d only known her for a few weeks when I got a chance to really stare at her. Boy, we were young. She was a second grade teacher. I don’t know why I was there, but I was sitting off to the side of her classroom, watching her teach. I could actually see the love pouring from her to the children – almost like it was something real. She was so gentle and her eyes were so soft.

I remember thinking, “Boy, I’d like to get in front of that!” And, I did. For more than forty years she’s been my best friend and my wife. Now she’s dying, and she wants to let go.

That nurse couldn’t even look me in the eye. She said, “Bernice is very sick, and she’s very tired. The two of you need to talk.”

Talk! All we do is talk. At least, all Bernice does is talk. It amazes me that a woman confined to the house can have so much to say.

Most people seem bored by my stories, even before I start rushing and tripping over my words. I’m better at listening, I think.

I used to like hearing Bernice describe our trips to her lady friends on the phone. The grass was always greener, the mountains a bit bigger and the food a lot better than I remembered it. But she wasn’t bragging. That’s how she saw things.

She was fun to travel with. “Look, cows!” she’d say, delighted, as if she had never seen one before. Or, she’d marvel that we were in a restaurant that actually served brewed decaf coffee.

I always worried less than her. I guess it helps to have a short attention span.

“What do you mean, talk?” I asked the nurse. “I know she’s dying. I know what kind of funeral she wants. I hate talking about this..., this...” ‘Crap’ was the most decent word that came to mind, but I didn’t think I should say that in front of a hospice nurse.

“This is very difficult,” I said as calmly as possible. “Are her medications okay?”

Lena pulled records from a big tote bag. She sighed while turning the pages, still not able to look at me.

It was getting dark, but I could still see the snow outside on the trees. There'd be more by morning.

"Joe, the medicine she needs is love," Lena said. "She's ready to let go."

Let go. Damn it. The nurse was repeating herself, but I refused to. I couldn't face the winter without Bernice. Hell, I could barely pay the bills without her, let alone run the house.

"I've got to get supper ready. When will you be back?" I said rising from my chair.

Lena's headlights cut white tubes through the snow as she pulled away. I used to think our house had a warm glow that could melt the coldest winter. Now our little speck is full of sickness and suffering.

There were still a couple of clean plates, so I figured I'd just microwave something and let the kitchen go.

In my normal state, I live like an animal. Well, maybe that's not fair to animals. Maybe a pig, but I'd read once that pigs would keep themselves clean if they were given half a chance. Not me. Whenever Bernice went to Ohio to see her sister, I'd live in squalor until the day before she got back. She hated coming home to a messy kitchen.

Bernice doesn't make it to the kitchen much these days. Has it been a week or two weeks since she sat there and had a cup of coffee? So, why bother cleaning, unless Cindy and her kids are stopping by? But the last time Cindy didn't call first, and now she says she's worried about me, too.

Worried, hell. I have enough to worry about without worrying that Cindy might worry.

Still, it's nice that she calls every day. Bernice especially likes talking to the grandkids. Allen, the oldest, is so smart it's scary. He's tells Bernice whenever the International Space Station is passing overhead - as if she could get out of bed and see it.

Bernice still favors Lean Cuisine when she has an appetite, not that she ever really had a weight problem. I guess she doesn't want to look fat in her coffin. Tonight, she pushed the food away after a few bites.

"Lena says you're getting very tired," I said.

Her eyes filled with love and she opened her arms to me.

"Remember how we always said we'd go together?" I could hardly speak because my chin was trembling. "If you die, I'll miss you so much!"

I knew it was the exact wrong thing to say. I should be brave and loving and say she should go to God or whatever, but I didn't want her with God, I wanted her with me. I wanted her to be with me!!!

I hugged her too tight and neither of us could stop crying. Our bodies jerked back and forth as we sobbed.

All of a sudden it struck me: "I think this is the best workout we've given this mattress in years."

We laughed, more than we had in months.

Then, like babies, we cried ourselves to sleep.

Author's Note

The idea for "Waiting 'Till Spring" came from an end-of-life training program** in which we were told about a difficult hospice case in rural Minnesota. The wife was dying and ready to let go, but the husband asked: "Couldn't she wait until spring? It's so lonely here in winter."

For years I wondered about the mix of love and neediness that might prompt that question. Then, to explore those feelings, I wrote this story.

Will Your Wishes Be Respected?

When death approaches, it's important that your wishes be respected if you're not able to speak. ...But, who can you count on to carry out your wishes?

For example, if Bernice decided that she didn't want treatment in an intensive care unit, could she count on Joe to tell her doctors? He certainly loves her and, perhaps, is closer to her than anyone in the world. But, would he be the best person to speak for Bernice, if she were unable to speak for herself?

What care do you want at the end of your life?

Advance directives provide instructions for your future health care, in the event you are unable to speak or make decisions for yourself. It's a process of thinking and talking, supported by the completion of forms which include:

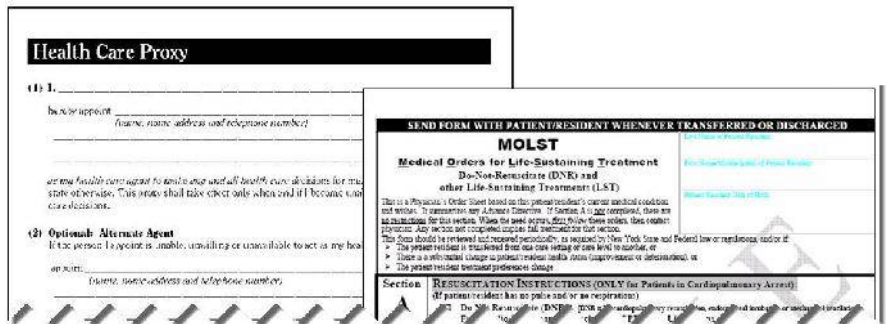
Health Care Proxy --This form, sometimes referred to as a "durable power of attorney" allows you to pick someone to speak for you about medical decisions when you are no longer able to do so for yourself. In New York, in most states, it is a legally recognized form that can be completed without an attorney.

Here's some good advice about completing a health care proxy form from the [Sharing Your Wishes](#) project:

1. Think about what is important to you and how you want to receive your care
2. Select an agent to speak for you if you are unable to speak for yourself
3. Talk about your health care wishes with your agent, doctor and family members
4. Put your choices in writing, using a Health Care Proxy form

Medical Orders for Life Sustaining Treatment (MOLST) MOLST has been adopted by New York state to translate people's preferences about end of life care into medical orders. In some states it is call POLST (Physician's Orders for Life Sustaining Treatment).

Use the Satisfaction Skills



The skills of awareness, affirmations, assertiveness and acceptance can guide you through discussions about life's last chapter. Explore the impact the [Satisfaction Skills](#) can have on your communication, stress level and peace of mind.

[Read this summary](#) for additional detail, including a description of Hospice services, or watch this [brief video](#).

**I am grateful for a three year "Sharing Your Wishes" grant from The Community Health Foundation of Western and Central New York. Also, I'm thankful for mentoring provided by Pat Bomba, MD, Executive Vice President for Geriatrics of Excellus Blue Cross/Blue Shield – and her excellent resource for professionals and patients at www.CompassionAndSupport.org

I Don't Want to Talk About It!

“It’s none of your business and I don’t want to talk about it!” Susan yelled as she slammed the bedroom door.

Cindy stood alone outside her daughter’s room. She reached for the knob, her stomach churning as she heard the muffled sobs.

“Honey, I’m sorry,” Cindy called through the door, pausing for a response that didn’t come. “It’s just that you were so upset when you got home, I thought maybe I could help.”

Earlier that evening, Susan had spent extra time getting ready for a date with a new boy. Usually, Cindy was reading in bed when Susan got home. But tonight, she was halfway through a bowl of ice cream when Susan burst through the back door.

In the glare of the kitchen light, Susan’s eyes brimmed with tears, with mascara running down her cheek. Her blouse stretched awkwardly from a button fastened to the wrong hole.

Startled at seeing her mother, she turned away to the sink.

“What are you doing up so late?” Susan asked as she got a drink and stared out the darkened window.

“I was hungry,” Cindy replied. “What’s wrong, honey?”

“Nothing I can’t handle,” Susan said. “Good night, Mom,” her voice faltering as she went up to her bedroom.

A minute later, Cindy started climbing the stairs through waves of fear and anger. What could she do without making a bad situation worse?

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Author’s Note

Early in my career as a counselor, a neighbor asked if I would serve on a community task-force against rape, as they needed someone who understood mental health services. I was shocked to learn the extent of abuse, and how the system - or even loved ones - often made a bad situation worse.

But I saw that even horrible hurts could begin to heal when people became aware of abuse, affirmed the strengths of the victim and asserted their right to justice and a fear-free life. I also learned that forgiving an abuser should never mean that justice is ignored, or abuse will ever be accepted again.

- The Satisfaction Skills can help with many problems. How might Susan have reacted if her mother had said:
 - “I told you not to dress like that!”
 - *OR...* “Honey, I know whatever happened must be awful for you. You’re a wonderful girl and I know that you usually make good decisions. Here are some phone numbers and web sites where you can explore your options confidentially. I love you and I’m available anytime if you want to talk.”
- Review “[Eliminate Abuse](#)” to learn how **abuse thrives on fear and silence**, and steps you can take to address any type of abuse (sexual, domestic, elder, child). Steps include:
 - 1) support victims and don’t blame them; 2) speak up; and 3) get help.

