

“My kids are coming to see me, as are their families.”

Knowing that they lived out of state and usually came several times a year at planned intervals; I wondered why his two daughters and their families were coming at the same, unexpected, time.

“I asked them to come,” he said, “so that I could tell them that I have entered hospice care, which I’ve arranged on my own.” “My wife knows, but the kids do not. I want to tell them myself.”

About a year earlier Dan and his wife, who has early Alzheimer’s, had entered Wicke Health Center, the nursing home facility at Wesley Village. Dan, aware of her disease and aware of his progressing Congestive Heart Failure and his cancer, had made those arrangements so that Annie would be cared for in a familiar setting when he died. He was always honest about life and death, facing all the vicissitudes of life along the way. He knew his treatment for both the congestive heart failure and for the cancer was not working. Rather than put his family through the wrenching decision making about how to respond to that fact, he made the decision independently. His decision to enter hospice care did not come as surprise.

What did come as a surprise were the people who suggested that he should not have been allowed to make that decision. They had different reasons, but the underlying theme was that at 94 years of age, someone else should be making his decisions. Fortunately the people saying this were not staff, but friends of his. There was a presumption that older adults cannot and should not be making their own decisions. I see and experience this attitude quite frequently as I visit with family members and friends of residents in our community. Too many of them see their aging loved one as a child to be parented, rather than as a mature adult. They often confuse physical limitations with mental, physical and spiritual limitations. Each and every time I feel this is the situation I am compelled to remind them that age is not a determining factor in making decisions! Competency, cognitive ability, mental and emotional health are *the* determining factors!

Dan was perfectly able to make the decision he made! There was nothing wrong with him cognitively, emotionally or spiritually – despite his physical ailments and limitations. I applaud his courage and honesty!

In doing ministry with and for older adults, pastors and lay people have a great deal of influence with other people. We need to spread the word in this regard. We need to encourage family members and friends of older people not to limit them more than they need to be. We need to respect them as whole people even if their bodies are failing them. To do less is to infantilize them and take an important piece of their self-worth from them, surely not a goal of ministry on any level.

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