

From acceptance to closure

Plan well to leave well

Writing a beautiful final chapter



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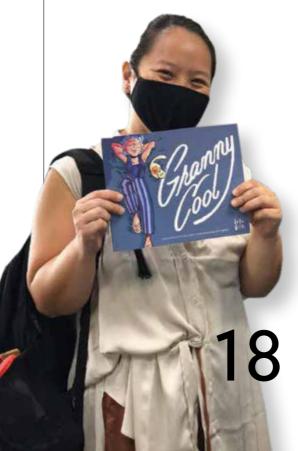
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e was diagnosed with Stage 4 lymphoma end of October with a prognosis of three months. He was 81 then and decided to decline chemotherapy. For about two weeks, he was troubled with the usual questions of "Why me?". But his usual stoic self soon took over. He wanted a family dinner for his 60th wedding anniversary and reminded me to get photographs taken. He gave instructions on final rites, appointed his undertaker, selected his favourite photograph for his hearse and vetted his obituary. He made sure the family was not burdened with not knowing what he wanted. He passed on in February the following year surrounded by his loved ones. When confronted with a life-limiting illness, I wonder if I could do the same.

Everyone wants a good death, but only 53% of those surveyed in the SMU-SHC 2019 Survey on Death Attitudes were comfortable talking about their own death. Even fewer — one in three were comfortable discussing death with someone with a life-threatening illness. It is never too early to plan how we want our journey in life to end or how we want to be remembered. We hope this issue of Hospice Link will inspire and encourage you to start the most important conversation of your life, like the conversations I had with my father over the last three months of his wonderful life.

Sim Bee Hia **Executive Director** Singapore Hospice Council



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Planning ahead

When it comes to end-of-life planning, we know it is essential to plan ahead of time. Medical Social Worker Chew Li Sien from Dover Park Hospice shares how you can start planning with an End-of-Life Planning Checklist.

complex topic, and conversations about end-of-life planning remain a taboo. However, planning is essential as it allows you to decide how you wish to be honoured at the end of your life.

eath can be a

PERSONAL DATA AND DOCUMENTS

Compile login information such as user IDs and passwords to your devices and communication accounts, such as:

- Smartphones
- Tablets
- Computers
- Emails
- · Social media accounts

You may also want to think about what you would like to do with your social media accounts, and how you might want to be represented after your passing.

Besides passwords to devices and communication accounts, it is advisable to document bank account information, such as:

- · PIN numbers
- · Internet banking user IDs and passwords
- · Safe-deposit box locations, if applicable

Also consider compiling a list of all insurance policies and related beneficiaries, information on funeral plans, pre-paid burial plot or niche, if applicable. You may also want to use

password management software such as LastPass to facilitate transfer of information to a trusted family member or friend.

POSSESSIONS

You may want to identify the location of any cash that is stored for emergencies and provide instructions on how you may want to allocate or use the money. Creating a "Where to Find" list to document the location of essential things could allow your trusted family member or friend to easily access important information or items, which could include:

- Deed to the house
- Car keys
- · Credit and ATM cards

Completing this checklist would provide peace of mind for you and your loved ones, and eliminate the need for your trusted family or friend to hunt for your information, allowing them more ease in executing

your final wishes.

If you have designated significant items to give away to specific individuals, do consider doing so as soon as possible instead of detailing them in your will. For sensitive items that you do not wish others to find, you may want to consider discarding them or provide instructions on how to dispose of them. An example could be getting a trusted personal friend to discard your journals.

HEALTHCARE PLANNING AND DIRECTIVES

Creating an Advance Care Plan (ACP) is essential as it allows you to communicate your care preferences and goals through a series of voluntary, non-legally binding conversations with your loved ones and a qualified ACP facilitator. The ACP serves as a guide for your loved ones and healthcare team so that they can make decisions according to your wishes in the event that you are no longer able to make your own decision due to loss of mental capacity.

Through the conversations, you will be guided to understand, reflect upon and discuss your goals, values and beliefs regarding future healthcare treatments and care options. Once the ACP is completed, copies should be made and passed to healthcare providers and your trusted loved ones. On the other hand, if you have made an Advance Medical Directive (AMD), it is advisable to keep your trusted loved ones informed as well. This

legal document serves to inform the healthcare team that you do not want to be on any form of life-sustaining treatment for the purpose of artificially prolonging your life when death is imminent.

Both ACP and AMD can be done at the same time.

PLANNING YOUR LEGACY

This part involves putting down instructions for final disposition, such as:

- Writing your obituary
- Planning your funeral or remembrance ceremony
- Leaving a message for loved ones

As a start, you could consider writing your obituary, as it will allow you to decide how you wish to be remembered. It could include noting down your instructions for final disposition, such as your preference to be buried or cremated, and your preferred resting place.

In addition, you could consider planning how you wish to conduct your funeral or remembrance ceremony, for example who you would like to speak or give the eulogy at your funeral, and what music or decorations you would like to have. It is good to pen your thoughts and share your preferences with your trusted family or friend.

Lastly, if you have any messages for your loved ones, you can consider doing so through letter, video or other ways which will be meaningful to the recipient.

Once you have planned and compiled the necessary information, you may want to print a copy for safekeeping with vital records in an accessible location.

Completing this checklist would provide peace of mind for you and your loved ones, and eliminate the need for your trusted family or friend to hunt for your information, allowing

them more ease in executing your final wishes.

From acceptance to closure

When patients in palliative wards bring up their imminent passing, they are often propelled not by fear of death but a wish to be informed so that they can plan for the remaining days and seek closures till life ends.

ealthcare workers in the palliative wards sometimes find themselves being asked by their patients: "Am I approaching the end of life?" Emily Ng, Nurse Manager of St Luke's Hospital palliative ward, highlights the importance of palliative knowledge and empowerment through this case study.

When Madam W was admitted to St Luke's Hospital for end-of-life care, her care team wanted to know how aware she was of her own condition. They asked her whether she knew the reason for being admitted to a different hospital. Her response was that her children told her it was "for a change of environment". Madam W shared that she did not probe further as she knew they had her interests at heart. She knew they were worried about her and did not want to worry them further. Despite the frequent comforting reassurance her children gave her, she could feel her body deteriorating and knew that her final days were near.

There was a note of regret in her voice. When Madam W knew her care team better, she told her medical social worker that she did not fear death "as everyone has to leave the world one day". What she worried about most was having to go through pain and suffering. She also expressed concern about not having the opportunity to discuss her wish for her last rites, and the worries she had for her children.

Understanding her wishes and concerns, her care team called for a family conference the very next day to convey them to her family. With the family's consent, the care team implemented comfort mitigations to alleviate her symptoms.



Madam W's son though was less comfortable being the messenger of bad news — that she was at the end of life and any medication is futile. He preferred that the doctor helped break the news to his mother, which the doctor did in his presence. Madam W took the announcement calmly, much to her son's surprise.

This revelation created an opportunity to initiate important conversations of how she would prefer her last rites to be conducted, final wishes for the family and her desire to meet her grandchildren and siblings who were living overseas.

As physical visits were restricted during the pandemic, the family managed by arranging for video calls with the people on her list, enabling her to say her final goodbyes.

Over her stay, her multidisciplinary team, including nurses, therapists, medical social workers and a chaplain, continued to ensure Madam W's wishes and needs were addressed and that she achieved her end goal of a peaceful death.

NEVER TOO EARLY

At St Luke's Hospital, the multidisciplinary team always seeks to arrange a family conference, preferably on the day of admission, or the next day. This meeting will help the team to understand the patient and family dynamics better and seek alignment on the administration of palliative care.

Our team believes communicating end-oflife plans is a show of respect for patients' autonomy in decision-making and goalsetting. Documentation of such decisions helps to ensure patients' wishes are adhered to, especially if the decision touches on more sensitive issues such as organ donation and asset distribution.

It is never too early to start planning for one's end of life. In fact, it is encouraged to start the conversation as early as possible, while one is still lucid and mentally capable. Nonetheless, such conversations do not come easy to everyone.

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Seize the opportunity

Here are some opportunities you may take advantage of, to kickstart an end-of-life and Advance Care Plan discussion:

- 1. When watching a scene of someone passing on in a television programme
- 2. When reading news on a sudden death
- 3. When a friend or relative had passed on or was diagnosed with an illness
- 4. When doing an activity together such as cooking, propose to start a legacy project, perhaps a recipe book for the family to keep
- 5. When revisiting old photographs and reminiscing about old times



WORDS **EMILY NG, NURSE MANAGER, ST LUKE'S HOSPITAL** PHOTOS **ST LUKE'S HOSPITAL, UNSPLASH,COM**

Caring to the end

Advance Care Planning discussions ensured that the healthcare team fulfils the personal care goals of palliative patients.

t has been three days since Madam
C's funeral ended and Medical Social
Worker (MSW) Goei Wen Yang
wondered how her faithful husband
was coping with his loss. He could still recall
the love they have shown during her stay in
the hospital.

When Madam C was admitted to the palliative ward at Outram Community Hospital (OCH), the care team saw the undying love between two souls and helped them on their journey with Advance Care Planning (ACP). These discussions allowed Madam C, her husband who is her sole caregiver, and the care team to have a smoother and better understanding of the care desired by the patient. If started early, ACP enables patients to discuss their personal beliefs, values and goals of care with their loved ones and healthcare providers in order to plan for future healthcare options.

Wen Yang has been a part of Madam C's care team since her admission, and was the point of contact for her caregiver husband. He was extremely touched by their love for each other — it reminded him of the wedding vow "to be together in sickness and in health". He also remembers vividly the card made by Madam C for her husband. The colourfully decorated card was her last gift to him and in it, she had written the most beautiful words of appreciation and seeking of forgiveness.

HER LEGACY

Madam C was suffering from a condition that caused her to develop a lot of phlegm and left her breathless even with the lightest activity. Because of this, she was constantly having oxygen therapy and was too breathless sometimes to even get out of bed. Despite her symptoms, she



FABE Classic



We are glad that we could communicate with Madam C and her family at an initial stage to understand their care preference."

Left: MSW Goei Wen Yang (fourth from right) and Madam C's care team; Below: The simple materials used by Madam C to make her beautiful card

remained cheerful to the people around her, especially to the healthcare staff and her family members.

Madam C enjoyed a close relationship with her husband, who visited her daily without fail.

They would engage in meaningful conversations interspersed with peals of laughter, and people around them would wonder why they never ran out of things to say to each other.

And sometimes, they would just enjoy each other's company, without any words.

But like any other relationship, there would be times of misunderstanding between the two of them, or when Madam C became temperamental due to her condition. Despite this, her husband remained calm and stayed by her side throughout. It was a test of dedication that he passed with flying colours.

Their daily routine went on for a while until Madam C expressed her wish to pass away at home. This caused her husband to worry about the potential difficulties in coping with her care and symptoms as the sole caregiver. He was also uncertain of which equipment was needed to support her when she returned home.

"Although Madam C's husband was apprehensive, he saw this as fulfilling her last wish and decided to undergo caregiver training to help him be more competent," shared Wen Yang.

The care team then planned and conducted caregiver training with Madam C's husband to equip him with the necessary skills to care for her at home, such as bathing and administering medication. The team also made referrals to the home hospice services to support Madam C and her husband while they were at home.

To capture their last memories together, the care team also organised a photoshoot for the couple and the photographs were used for the card that Madam C made for her husband with the help of the therapist. It was her way of showing her appreciation towards him for his patience and care. On 16 July 2021, she was brought home where she eventually passed away.

"We are glad that we could communicate with Madam C and her family at an initial stage to understand their care preference," said Wen Yang. Most importantly of all, they were able to fulfil Madam C's last wish.

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Plan well to leave well

Three Singapore Hospice Council volunteers share their views on end-of-life care planning and why it matters.

hen you or your loved ones are faced with life-limiting illnesses, having plans and documents in place which reflect one's choices, values and beliefs can help to provide a definitive peace of mind. It is key that we talk about end-of-life care with our loved ones, learn about the types of decision-making tools and resources available, and act on them while still healthy and of sound mind. Three Singapore Hospice Council (SHC) volunteers — Edi Wu, Jennifer Lim and Tan Sze Wei — share about what spurred them to action and how you can also get started.

What sparked your interest to advocate for palliative care and end-of-life care planning?

Edi: My father's palliative doctor left a lasting impression on me. During my father's final days, I gained more knowledge on palliative treatment and care. After the experience of my father's passing, I realised the importance of making preparations for my mother collectively with my siblings. It became the starting point for my desire to understand more about the different caregiver services, facilities and planning such as Advance Care Planning (ACP).

Jennifer: My father was admitted to the hospital after vomiting at home one day. By the time I reached the hospital at 4am, he was on a ventilator but considered brain dead. The doctor asked me to make the decision to take my father off breathing support. I realised that making the decision will release my dad from pain



but it will leave me with a mental scar as to whether it was the right decision to make. Therefore, I think as an individual, I should take responsibility in making the decision for my own life by signing a simple document like the Advance Medical Directive (AMD). We should not leave stress or guilt for our loved ones like how my dad left me to make the decision. I am thankful that my dad left peacefully that night without my having to tell the doctor to remove his ventilator.

Sze Wei: It all started one day when I volunteered with "Both Sides, Now", a community engagement project that uses art and public dialogues to create awareness, encourage reflection and provoke end-of-life conversations among healthcare professionals, caregivers and the public at large. I started to ask myself questions such as

what is death and dying to me. I also became inspired by the art exhibitions, discussions and performances they presented. It all gave me lots to think about. Later, I found SHC's resource website and have relied heavily on it when making many of my end-of-life care decisions.

What do you think about death and dying?

Edi: Dying is more of a concern than death. The endpoint of dying is uncertain whereas death is definitely final. The mental capacity needed to deal with dying is more immense than that for death.

Jennifer: Death is an instant, while dying will take some time. I feel the one living needs to learn how to cope with the one who has already left. I had thought I

Opposite page: Jennifer Lim learning about funeral pre-planning; Below: Tan Sze Wei during the 2021 SHC World Hospice and Palliative Care Day Celebration

was ready to part with my father, but I wasn't prepared when that day came.

Sze Wei: Everyone has to experience dying and death. The question is whether we can make things easier for our loved ones and how do we prepare ourselves well for the end.

Who can speak for you when you're admitted to hospital?

Edi: My wife, as she is the one who is handling my personal matters.

Jennifer: My husband. We have both signed the Lasting Power of Attorney (LPA) and AMD, entrusting our lives to each other.

Sze Wei: My husband, my brother and my son.

Why is it important to have these conversations and make plans for the end of life as early as possible?

Edi: The dying would be comforted to know that their wishes will be executed accordingly, as usually there are worries of unfinished business. By having the conversations in advance, it gives the assurance that things will be handled in their preferred way. As for the loved ones — in my case, I have siblings — this mitigates arguments and provides direction to execute the desired plan. We served the interests of our dying father in all discussions.

Jennifer: I feel that Singapore is death illiterate. When I bring up this topic during conversations,

It is key that we talk about end-of-life care with our loved ones, learn about the types of decision-making tools and resources available, and act on them while still healthy and of sound mind.





it usually gets uncomfortable. When my father was still around, I asked from time to time how he would want me to settle matters after he leaves, but was brushed off every time. When he passed on suddenly, thankfully, I knew friends in the funeral industry who helped to ensure the wake went off smoothly.

Sze Wei: My family was devastated when my dad passed away shortly after being diagnosed with cancer. We didn't have much time for conversations and preparations then, so I definitely agree it's

important to start conversations early, when we are young and healthy. It's definitely not because I am depressed or having suicidal thoughts. I would feel more ready to live a full life and face life's challenges after having talked to my loved ones and making plans.

What end-of-life arrangements have you made?

Edi: I've completed financial and fixed assets allocation. Also I started the conversation last year about end-of-life care and treatment; the plan would be more concrete this year.

It's important to reflect on what matters to us, what makes life meaningful and share it with our loved ones." Jennifer: I plan to buy my funeral package for a three-day wake and choose my coffin, so that my husband doesn't need to be bothered about this matter when I go. I have also written my will and made my CPF nomination.

Sze Wei: I completed my ACP, LPA, AMD and funeral pre-planning. I'm happy to say that not only did I settle this end-of-life care planning for myself, but I also helped my mum do hers at the same time.

Do you have any words of encouragement or advice on how to get started?

Edi: Death is inevitable for everyone and you never know when it will happen. Planning for end-of-life care and matters not only provides peace of mind to you when you are dying but also your loved ones who may be emotionally overwhelmed by the situation. This may not be a one-off conversation. Your preference may change over time so keep an open mind and it is okay to speak about different aspects over time.

Jennifer: I love the wise words I heard from Mr Ang Ziqian, a fourth-generation funeral director and founder of Ang Chin Moh Foundation, along the lines of "You don't talk about death, you die anyway. You won't die talking about death".

Sze Wei: Get some conversation cards to start with from SHC or attend their webinars. Bring the family together to do these activities and just start. We don't need to do everything in one session as we all need time to think. Start early and don't give up. It took quite a while because I was also trying to get my family together to understand the importance of all these end-oflife matters and decisions. We can start with reflecting on our beliefs, values and preferences for our healthcare and financial matters. It's important to reflect

Opposite page (top, bottom): Jennifer Lim with her dad; Tan Sze Wei with readers at her community library initiative; Below: Tan Sze Wei presenting SHC resources

on what matters to us, what makes life meaningful and share it with our loved ones. If we are to spend our final days with dignity, we must plan ahead and make our decisions known when we are able to, with sound body and mind.



Tust Life Everyone deserves dignified end-of-life care. Hear from SHC volunteer Chia Ling Yi on the importance of having conversations about dea

and planning ahead, and lessons she learned from being a volunteer, caregiver and healthcare professional in the palliative care sector. Watch our "Just Life" episode on The Backstage Bunch YouTube channel.



importance of having conversations about death and planning ahead, and lessons she learned from

Scan the QR code to watch this!

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Authoring life chapters

The Singapore Cancer Society Psychosocial Services and Hospice Team supports the terminally ill in living out their life narratives in unique and creative ways.



eath and terminal illnesses can be difficult topics to navigate. A 2014 Lien Foundation study¹ found that 45% of respondents said that not knowing how to broach such topics is a significant barrier to death-related conversations.

Yet, end-of-life conversations are possible when space is created in diverse and creative ways so that people can be supported when telling and authoring their narratives in "ways that make them stronger"

amid their grief² (Wingard & Lester, 2001). These conversations start by having a deep respect of people's life narratives and understanding what is meaningful to them.

When people face terminal illnesses, narratives of death and hardship are profoundly present, yet narratives of life and resilience can be honoured³ (Moxley-Haegert, 2015).

This article showcases the different ways people facing terminal illnesses are supported by the Singapore Cancer Society Psychosocial Services and Hospice Team to author their life narratives.

When he was diagnosed with terminal cancer, Mr Ong's wish of publishing a book of his own came to light in a conversation with a social worker about leaving a legacy for his family. The social worker facilitated the conversation regarding his life experiences, values, and lasting words for his family, and compiled them into a legacy book. Mr Ong and his family

These conversations start by having a deep respect of people's life narratives and understanding what is meaningful to them.

gathered to celebrate and read it. This journey allowed him to fulfil his wish of being the author of his life and to leave a legacy that would be passed on to his descendants. His book was also shared with neighbours and friends.

Mr Woo has been a caregiver for his wife who is terminally ill, bed bound and assessed to lack mental capacity due to her illness for about three years. Despite the years of ongoing caregiving, financial challenges and his own serious health issues while caring for her, he won the Singapore Health Inspirational Patient & Caregiver Award 2022 for his unwavering commitment and learned expertise in caring for his wife's every need at home. His expertise and values were elicited through conversations with the social worker using S.T.E.P.S (see box) as she acknowledged his

struggles while noticing the ways in which he responded to them. He was also able to share his expertise with a caregiver facing a similar situation, which provided much-needed support, and in turn, reinforced his expertise.

MADAM CHIN'S FIGHT-BACK JOURNEY

Life had never been easy for advanced cancer patient, Madam Chin, who was given away as a child and had no formal education. She has neither children nor sibling support to look after her elderly frail husband and herself. Undaunted by her cancer diagnosis, she built a social network for the two of them — Singapore Cancer Society (SCS) home hospice care, Lion's Befriending, Blossom Seeds eldercare and medical and transport services, church and neighbour support. She also

converted to Christianity to receive spiritual calm and peace. Madam Chin does not wish to burden social services and prefers to use her own CPF savings from her past cleaning jobs for her living and medical expenses. To sparkle up her fight-back journey, Madam Chin recruited SCS to organise her first-ever birthday celebration, which she deemed as "really precious" as she's able to "leave this world in peace". Madam Chin has been participating actively in outreach events with her support network and it is her hope to encourage more volunteers to come forward and help the elderly who are struggling with old age and illness. Madam Chin has since outlived her prognosis and is still running a robust fight-back race. She won the Singapore Health Inspirational Patient & Caregiver Award 2022. **1**

One step at a time

S.T.E.P.S is a guide that supports navigation of conversations to encourage individuals to share and author their life narratives of death/hardships and life/resiliences in facing terminal illness. This guide is adapted from narrative therapeutic practices⁴ (White, 2007) in the local hospice context. One can consider exploring the aspects of S.T.E.P.S as one way among many to converse with and support people facing terminal illness:

- Struggles/suffering: Acknowledging the struggles and suffering people go through
- **1** racing responses: Noticing and affirming values and expertise people take to cope
- (a) nriching memories and legacy: Uncovering enriching life narratives
- Persons on the journey: Inquiring of the people in their life narratives that matter to them
- **S** teps of contribution: Providing opportunities for people to contribute to their care planning and to contribute to others.

¹ Lien Foundation. (2014, April 08). Death Attitudes Survey: http://lienfoundation.org/sites/default/files/Death%20survey%20Presser%20Final%20-%20Combined_0.pdf ² Wingard B. & Lester J. (2001). Telling our Stories in ways that make us stronger. Dulwich Centre Publications.

WORDS AMANDA TAY, FLORINA WONG AND VIVIAN KOO, SINGAPORE CANCER SOCIETY PSYCHOSOCIAL SERVICES PHOTO FREEPIK.COM

1!

³ Moxley-Haegert, L. (2015). Leaving a legacy and Letting the legacy live. The International Journal of Narrative Therapy and Community Work, (2), 58-80.

White, M. (2007). Maps of Narrative Practice. W.W. Norton & Company.

Planning your own funeral brings peace

Angjolie Mei, founder of The Life Celebrant, stresses the importance of deciding on your final farewell details early so that your loved ones can carry out your wishes with certainty.

n old man who was
dying of cancer once
came to me, with two of
his three sons, to discuss
his funeral. In fluent Mandarin, he
calmly described how he wanted his
funeral to be conducted while his sons
diligently took notes.

He made it clear to them that he did not want a wake to be held as he did not have many close friends. He did not want to be embalmed and would instead prefer a simple funeral followed by a cremation straightaway. He did not want to wear shoes in the casket because he felt that as he was born without shoes, he should leave the same way. He wanted his ashes to be scattered in nature.

Sometimes his sons asked questions, pertinent ones: "Who do you want us to contact when you die, Pa?" He provided a list of numbers.

When he died, we — his sons and the funeral provider — knew exactly what we had to do. Nobody had to search for anything or second-guess the deceased, and it was a peaceful process.

Planning for the end of our lives, in this case our funerals, is a proactive gesture which really lightens the load on our loved ones.

When we die, whether it be a sudden death or death from illness, we want to spare our family members the hassle of struggling to make decisions and do administrative work regarding the funeral, while grieving.

Just imagine: How would they source and select a funeral service provider? Would they have a nice photo of you for your funeral portrait? Would they know what garments you would want or do not want to wear on your final journey? Would they

be able to guess whether you want a wake which celebrates your life, or whether you want to go quietly? What music or special touches you would want at your wake and funeral? And would they know who are the best people to present eulogies?

I find that, often, those who are dying of illness are quite ready to discuss their funeral details. It is the family members who may not be ready for it.

This happened with a French lady, a teacher, who decided to pre-plan her funeral in 2015 as she was already frail and sickly. She died recently in 2020. Her only son was not ready to join in our conversation. But what brought him great comfort was that after she died, he was able to listen to a recording of her voice which she had prepared, and which he had known nothing about. This was part of her emotional legacy.

For family members who are able to join in these pre-planning conversations, however, it is clear from the example of the cancer patient that the process can bring tremendous relief and closure; not just in ironing out the funeral details but in communicating that to the family members.

In the case of the patient, one of his sons did not want his ashes to be scattered in nature. The son might have preferred his father's ashes to be placed in an urn. But while the patient was still alive, he made a firm stance and the son deferred to his father's wishes.

Of course, apart from the funeral, there are other aspects of our life we should take care of before we go, in order to ease the burden on our family members.

Finally, don't postpone planning for end-of-life. While death can result from illness, it can also come about very suddenly and it is best to be well-prepared.



The big three must-dos

- Emotional will. This comprises letters or video recordings of ourselves which convey our last words to our family members and friends.
- Financial will. Without one detailing your asset distribution and debt list, many processes would take a long time and your family will have to jump through bureaucratic hoops.
- Living will. Advance Care Planning, Lasting Power of Attorney and Advance Medical Directive are all essential to ensure that your wishes regarding future health and personal care, key decisions and life-sustaining treatments are all covered.

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Building the best endgame for you and your loved ones

Singapore Hospice Council's public library exhibitions aim to educate and encourage die-loques on planning ahead.

to leave well, but lack awareness or understanding of the services, resources and support available. As part of Singapore Hospice Council's (SHC) efforts to educate the public on palliative care and end-of-life care planning, its "Die-logues: Building the Best Endgame" Exhibition will be travelling to various public libraries throughout 2022. With the needed space kindly sponsored by Public Libraries Singapore, the first exhibition at Bishan Public Library from 1 April to 31 May 2022 saw visitors of all ages taking a decisive step towards starting end-of-life conversations. As visitor Idelia shared, such discussions are "so important but very much neglected and avoided". Visitors learnt more about the accessibility, affordability and availability of palliative care,

any of us want

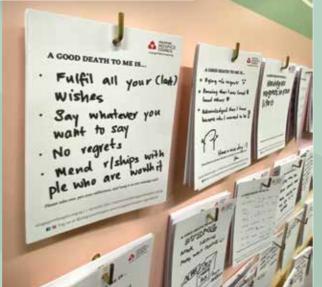
and the importance of talking about end-of-life matters. They were also able to learn about the resources available on SHC's e-library and take away relevant books and brochures to share with their loved ones.

A popular feature at the exhibition was the message wall, where visitors have left reflections on what a good death means to them. Many wished to leave without regrets and be

surrounded by loved ones at their final moments, while some wished for a painless death with no suffering. Some respondents to our survey indicated that after the exhibition, they would "read up resources on palliative care", "speak to aged parents about end-of-life planning", "discuss with friends", "use SHC's books to broach the topic with their kids", and "plan for their future".









Overcoming the stigma of palliative care



On 5 May 2022, as part of Eunoia Junior College's Values-In-Action programme, over 120 students came together to raise awareness for palliative care. Many have the misperception that palliative care is associated with impending death, resulting

in less people utilising palliative care when faced with life-limiting illness. Singapore Hospice Council's (SHC) Executive Director, Ms Sim Bee Hia, was invited to give a talk entitled "The Singapore Hospice and Palliative Care Story" to reduce the stigma of

palliative care. She shared about the modern hospice movement and the palliative ecosystem in Singapore, debunked common misconceptions and talked about how the students can get involved. During reflection time, students used SHC's Conversation Cards to discuss their values, motivations, beliefs and goals with their peers, such as "What do I value most in life?" and "Who can speak for me if I am admitted to hospital?".

It is heartening to see both students and teachers benefitting from SHC's information sharing and resources. "Thank you for giving the talk! It was very informative and insightful. We learnt a lot from this session and have become more aware of palliative care. We were able to participate in the activities with a greater sense of purpose and understanding," shared student Nicole Leow.

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Upcoming Events

SHC "LIVE WELL. LEAVE WELL." PROFESSIONAL SERIES THE PUBLIC LIBRARIES

Dates: 27 June, 25 July, 29 August **Venue:** Online via Zoom

Join us for open discussions on palliative care with healthcare professionals. This series will be held monthly till December 2022. Visit singaporehospice.org.sg for the latest updates.

SHC "DIE-LOGUES: BUILDING THE BEST ENDGAME" EXHIBITION @ THE PUBLIC LIBRARIES

Head down to these two libraries to find out more about palliative and hospice care, how you can get started on endof-life care planning, and the importance of having open conversations on these topics.

Dates: 1 June - 31 July

Venue: Jurong West Public Library, Level 1 Exhibition Area, 60

Jurong West Central 3, #01-03, Singapore 648346

Dates: 1 August - 29 September

Venue: Sembawang Public Library, Foyer, 30 Sembawang Drive,

#05-01 Sun Plaza, Singapore 757713



Living before Leaving

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