

Saying goodbye - How to support a colleague with a terminal illness

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Imagine a fairly tight-knit team, stable – some have worked together for years. They don't socialise, but during the regular Monday morning team meetings they exchange greetings, their personal news headlines and team members have a good sense of one another's families and interests. People have shared birthday highlights, children's school successes – a range of joys and tribulations.

Then one of you gets sick, not just the flu, but a cancer diagnosis. There's time off work, blood tests, scans, chemotherapy treatment, followed by radiation. And phew, your colleague is back at work, seems to do okay, with a prognosis that is looking good. Then there's a turn for the worse. Over time, you notice slowness, some inaccuracies, and eventually an incoherent response during a Monday team meeting. No one is surprised when a family member phones the team leader to say the cancer has metastasised and your colleague won't ever be returning to work. The expectation is that in a few weeks' time, you will all be attending a funeral.

Someone suggests doing a home visit. The more private members of the team are reticent about this idea. It's resolved, "Let the family decide." The family response is unreservedly positive. A time is agreed upon – a couple of people will represent the team later in that week. There may be a prognosis of days, and somehow that stretches to weeks. So, visits of two by two might be best. A card is discussed. The traditional "Get well" card would be inappropriate. Someone suggests one of those word cloud cards- the ones where you get people to write down all the positive words that come to mind when you think of the person who is to receive the card – and then the app generates an attractive design of different-sized words.

What to take on the visit? Flowers for the family? Baked goods? Team members chat with their families. What have they seen that has worked best during these dying days? One team member's relative had a close friend die. She told him that besides any baked goods, they needed to bring some real food. Families get strung out during these hard times. That family-sized lasagna, or any other suitable alternative that you brought that is in the freezer, ready to be heated up, will be hugely appreciated.

Another team member confirmed the need to take food. He said his family always commented on distinct cultures. There are those who arrive thinking they will be served tea and scones. There are others who bring scones and more, even money -knowing that at such times household resources are under pressure.

What to talk about during the visit? Very sick people are not often talkative. Visitors must gauge what is the level of energy. A light recall of workplace stories has been known to work well. And then there needs to be a sensitivity to read the room – not to hurry but also care not to outstay your welcome.

And then when its over, the team would do well to visit again. It is important to the future healing of those grieving that there is witness to their grief. If the service is not explicitly private, go to the service and whatever form of after tears there may be.

Again, the sharing of anecdotes may be comforting to the bereaved. My father died of a heart attack at 68. My favourite memory of the after tears gathering is that of listening to his work colleagues. They knew my father differently. I discovered that my father was quite the prankster in the workplace and everyone appreciated his humour.

Meanwhile the team has been stretched. During these weeks of illness, the team leader has been sharing out the tasks normally done by sick person. People are taking strain. Its incumbent on the team leader to pressurise for additional resources and identify all forms of support.

And that's not all. How many of us have attended a funeral and the event has triggered thoughts of other deaths of loved ones, or even out thinking about our own inevitable mortality? The mood at work in days to come may be sombre. Someone may feel and act depressed. Counselling sessions from an employee wellness programme may be in order – or even a mini team workshop on grief. Can HR mobilise these resources?

Are people aware of which strategies have proved to work best to support people's resilience? There's good research done on this. Lucy Hone's work on the three strategies of resilient people is easily accessible – a 16-minute Ted talk. The team leader needs to try and make sure the team is aware of

these strategies and encourage people to implement them. I hope such a team leader gets recognised for this work, emotional labour, which is not covered in any job description.

"Grief moves through us as we move through grief," says Elizabeth Gilbert, author of *Eat Pray Love*. There is no one recipe to handling any of this. David Kessler, grief experts advise us that each situation, each person's "grief is as unique as our fingerprints."

The important thing is for the team to be encouraged to talk and share. Being active conversationalists about their feelings is what matters most. Grief experts have commented that the culture that thinks being silent, being private, being strong is admirable is creates dangerous setbacks to emotional well-being. That "stiff upper lip" culture closes emotional sharing. And then people may pay the bills for repressed emotions only much later, and with accumulated interest.