

## 1. Context: Recognizing the need for the treatment of mortal illnesses/chronic pain

“Progressive and mortal illnesses have not had the accommodation nor the research devoted to them that has been given to acute, remediable conditions, nor are the needs of those who suffer from such illnesses commonly well met in busy general hospitals. The situation of chronic pain, so different in character, expectation and meaning from the events of acute pain, has received little attention until recently.” (*A Place to Die*,” p. 125)

## 2. David Tasma - Informing the three Principles of “Hospice Philosophy” :

Commitment to 1) Openness; 2) Mind together with Heart; 3) the Freedom of the Spirit

Two phrases he used in our long talks formed for me the challenge I came to believe I had to respond to. Referring to a small legacy of £500 he said, ‘*I will be in a window in your Home*’. And again, ‘*I want what is in your mind and in your heart*’. The first phrase gave us all a commitment to openness — openness to and from the world, to all who would come and to all future challenges. From the second, although at the time it was a very personal exchange, came the commitment to everything of the mind; research, learning, full scientific rigour, always matched with the friendship of the heart, the vulnerability of one person before another. After he died, having made a private peace with the God of his fathers, I had the assurance that he had made his journey with his own quiet dignity in the freedom of the spirit.<sup>2</sup> So openness, mind together with heart, and the freedom of the spirit are the three founding principles, not only of St. Christopher’s Hospice, but of a now worldwide movement. David Tasma, the Polish Jew who thought he had made no impact on the world by his life, started a movement founded on the Judean-Christian ethic, which has shown it can flourish in different cultures, each initiative with its own characteristics, but with the common aim that people should be helped not only to die peacefully, but to live until they die with their needs and their potential met as fully as possible.” (*The Evolution of Palliative Care*”, p. 252)

## 3. David Tasma –An Encounter of “Spiritual Pain” and its therapy

- i. During his last two months [David Tasma] made friends with a young social worker and the idea of a place that could have helped him came while they were talking. He asked for the confident skill of the mind to relieve his pain, to help him put his affairs in order and to understand some of the anguish of a lonely, apparently unfulfilled life. He needed even more the compassionate friendship of the heart, someone to see him as another person, good to meet and to know, to laugh with, to pray for and to commend with love to the God of his fathers. (*A Place to Die*”, 125)
- ii. David Tasma found peace in his own way. A Jew with little relation to his faith for years, he had memories of long hours of discussion as a little boy with his grandfather who had been a Rabbi. As he came back to this his clenched, anxious, fighting fists relaxed into open, vulnerable, accepting hands. St. Christopher’s is a Christian foundation and its members have various denominational ties. The main challenge seems to be for openness and simplicity and the symbol of the open hands. (*A Place to Die*”, 128)
- iii. David Tasma told me of the difficulties of laying down a life that felt incomplete and unfulfilled. He died of cancer, with pain and vomiting controlled as well as was usual at that time, helped by the interest and skills of a dedicated ward sister. But above all, he needed someone to listen, someone who believed it was important for him to end his life with a sense of personal worth. (*Hospice – A Meeting Place for Religion and Science*”, 225)

---

<sup>1</sup> <https://archive.org/details/cicelysaundersse0000saun/mode/2up>

<sup>2</sup> See also this remark on the “Freedom the Spirit” and the need to “create a space” for it: After his [Tasma’s] quiet death I knew that we also had to create space for the freedom of the spirit and the personal search for meaning of all who would need our welcome and care. Pg. 245, *Collected Writings*. From a piece titled “Origins: International Perspectives, Then and Now”.

#### 4. A Deep Dive into Caring for those in “Spiritual Pain” (Watch With Me, Listening, “Sorting Out,” Meaning Making (Various writings, emphasis mine))

- i. **“WATCH WITH ME”, LISTEN:** It is a question of time - and timing - a readiness on the part of all staff to stop and listen at the moment this particular area of pain is expressed and to stay with it. We are not there to take away or explain, or even to understand but simply to **“Watch with me”** as Jesus asked of his disciples in the Garden of Gethsemane. While we have worked so hard and so successfully to relieve physical pain and other symptoms, we may have been tempted to believe that spiritual pain should be tackled and solved in a similar way. Sometimes unrealistic fears can be explained and eased, but **a good deal of suffering has to be lived through**. The very pain itself may lead to resolution or a new vision, as came to Job. As Bishop John Taylor points out in his marvelous small paperback *A Matter of Life and Death* [7], awareness and life flowing into a numb and frozen limb is very painful indeed.

Only as a team becomes more experienced and confident do its members find it easy to allow or even *encourage the expression of the anger and other negative feelings such as self. pity, guilt, or fear that may express this inner pain, and the frequent question “Why?” We have to learn to listen in a way that will help the suffering person find the route to the real trouble, and the way to face and handle it*. Even to the end of life, the inner self can still stretch and broaden and make new discoveries. We neither have to idealize nor see the dark side only - but sometimes we need to look difficulties in the face and perhaps name them. That may well mean they lose some of their power to hurt or hinder.” (*Spiritual Pain, Facing Meaninglessness*, p. 219)

  - a) Man cannot help but search for meaning (Foreword to *Pain: An Exploration*, p. 216)
  - b) “Because he faced it, he finally comes through.” (*Spiritual Pain, Facing Meaninglessness*, 219)
- ii. **GIVE RESPECT, LISTEN, FACILITATE THE SORTING OUT IN THE SEARCH FOR MEANING:**

Some people, even in a hospice, will choose to deny or to conceal their knowledge of what is happening. That, too, is their right and a freedom we will not abuse. Most people wish to talk more openly than this but there are no general rules except that *we must all give respect and listen*. What we have all been hearing have been mixed feelings and changes of mind leading to a **sorting out** of what is important, a look at personal values and a **search for meaning**. Those outside this field may be surprised to know how often we witness a journey from the spiritual pain of anger, guilt and fear into acceptance, peace and a continual personal progress. (*Hospice: A Meeting Place for Religion and Science*, 226-227)

  - a) **INVENTORYING THE ACHIEVEMENTS STORED IN MEMORY/THE MEANING OF THE PRESENT**

[Viktor Frankl in *Man’s Search for Meaning*] believes that no one can tell another what the meaning of his life should be; that each must not only look back at achievements stored in memory, but also seek out the questions life is asking of him in the present. (*Spiritual Pain, The Search for Meaning*, 219)
  - c) **she [the volunteer] drew out parts of their story and listened** as these fell into place and gave some final meaning to what patients had found important...She helped patients to find the place where they could say, “I’m me — and it’s all right.” This gift of listening to the story may be made by any member of staff. (*Spiritual Pain, “The Need for a Listener”, 219*)

#### 5. “Incomplete Philosophy”

- i. A society which shuns the dying must have an incomplete philosophy. By their very existence among us they remind us to ‘number our days that we may apply our hearts to wisdom’, they make us ask the most important questions of life and bring its greatest realities to our notice. (“*And from Sudden Death*”, p. 39)
- ii. The dying need the community, its help and fellowship and the care and attention which will quiet their distress and fears and enable them to go peacefully. The community needs the dying to make it think of eternal issues and to make it listen and give to others. (*And from Sudden Death*, 39)
- iii. “unless we are occupied in our own search for meaning, we may not create the climate in which patients can be helped to make their own journeys of growth through loss.” (*Spiritual Pain, “The Need for a Listener”, 220*)