



# **THE FUTURE OF PALLIATIVE CARE: AFTER THE STORM**

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# Disclosures

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- I have nothing to disclose

# COVID broke down the barrier between “us” (the healthy professionals) and “them” (the sick patient).



The thin veil



Source: AP



Every patient who survived and left the hospital offered hope that we too would survive



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# What have we learned from our vulnerability?

# COVID exposed the broken health care system and disparities





**“Disease and death have long been recognized as reflections of the social fault lines in a society”**

Pandemic precarity: COVID-19 is exposing and exacerbating inequalities in the American heartland

Brea L. Perry, Brian Aronson, Bernice A. Pescosolido

Proceedings of the National Academy of Sciences Feb 2021, 118 (8) e2020685118; DOI: 10.1073/pnas.2020685118



“The virus is ruthlessly exposing the gaps between the haves and the have nots, both within and between countries. It finds a fertile hunting ground when more than half the world’s people lack essential health services and have little or no social protection. About 100 million people are being pushed into extreme poverty because they can’t afford healthcare.”









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# **What are the opportunities for palliative care to contribute to reducing disparities?**

**COVID broke the illusion that only old, chronically ill people die, that we are all fragile and what we should learn from this experience of seeing people decline rapidly and die.**

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Source: LA Times



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**What are the possibilities for palliative care to be better integrated in acute care, sudden illness and crisis?**



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“At times of existential danger, we instinctively desire to be close to our family and friends, hold their hands and embrace them – but now we are forbidden to do so, for every act of physical contact – every expression of physical loving-kindness and compassion – could bring illness and death.

We are confronted with the true uncertainty of human existence and the true vulnerability of human life. How often have so many of us believed that we are supreme masters of the world around us.”

Opening Address of the Global Solutions Summit 2020  
Global Solutions – The World Policy Forum  
By: Dennis J. Snower

# Marking the End of a Life: When Rituals Go Missing



“The most profound life cycle rituals are those that mark the end of a life, whether that be a funeral, a burial, a cremation, or a memorial service. Here, COVID-19 pushed us to our limits. Death by COVID-19 changed our rituals profoundly and immediately, depriving the living of any chance to say goodbye or to grieve in traditional ways. With the exception of an acute and unexpected death, such as a heart attack or stroke, family members and close friends are usually at a loved one’s side at the time of death, able to stroke a hand or give a last kiss. Not so with COVID-19. ...forbidden to enter the hospital”.

Imber-Black, E. (2020) Rituals in the Time of COVID-19: Imagination, Responsiveness, and the Human Spirit. *Family Process*, Vol. 59, No. 3, 2021 ©

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doi: 10.1111/famp.12581



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“Couples married fifty or sixty years were separated in death. Adult children could not say goodbye to parents. No family member identifies a body, resulting in a profound ambiguity. And because of the requirements of the shutdown and social distancing, funerals were limited to two to four mourners. There would be no wake, no viewing of the body, no sitting Shivah, no visiting to bring food and comforting hugs to the grieving, and perhaps most important, no in-person storytelling of the person’s life. Burial practices changed profoundly—there would be no passing of a shovel to pour dirt on a Jewish grave, replaced by throwing a handful of soil, no washing a body as done in Islam and Judaism”.

# COVID taught those who had been ignoring palliative care that we have a lot to offer the health care system

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Source: AP



Source: @TV News



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**Who are the populations yet to be reached by  
palliative care?**



# COVID is a reminder that illness is not only physical, it is a whole person, psychological and existential experience

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Source: AP



Source: Newsweek



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**What has COVID taught us about spiritual care?  
About knowing the patient? About ourselves?**

# COVID taught us that we as clinicians are not robots, we are humans and we have to take self care seriously



Source: @abc.com



Source: Georgetown University



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“The pandemic sharpens our awareness of the fragility of life and jolts us not to take future time for granted. The inevitability of losing others becomes more salient: What would we regret—things unsaid, undone—if a loved one died, or as we faced our own impending death. Loss and threatened loss can heighten appreciation of loved ones taken for granted and spur efforts to repair grievances in wounded bonds. Time does not heal all wounds, but offers new perspectives, experiences, and connections that can help people forge new meaning and purpose in their lives.”





“Over time, we will need to integrate the pandemic experience into the chapters of our individual and shared lives, strengthening the relational connections that matter to us: with the families we were born into, those we choose, and our wider communities. There is no love—or life—without loss. We are all mourners now, trying to guide one another as we navigate our way forward and strive to make a better world out of tragedy. Our resilience is relationally based, nurtured, and fortified through our interconnections. By facing our vulnerability and by supporting one another through the worst of times we are better able to overcome daunting challenges to live and love fully.”



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“Resilience is commonly thought of as “bouncing back,” like a spring, to our pre-crisis norm. However, when events of this magnitude occur, we cannot return to “normal” life as we knew it. As our world changes, we must change with it. In the wake of the 9/11 terrorist attacks, I suggested that a more apt metaphor for resilience might be “bouncing forward” to face an uncertain future. This involves constructing a new sense of normalcy as we recalibrate our lives to face unanticipated challenges ahead”.



“Over the ages, individuals, families, and communities have shown that, in coming together, they could endure the worst forms of suffering and loss, and with time and concerted effort, rebuild and grow stronger. The painful experiences in this pandemic will require time and shared reflection for meaning making, questioning old assumptions, and grappling with a fundamentally altered conception of ourselves and our interconnections with all others in our shared world. Taking a systemic view, the pandemic and our response will generate reverberations we cannot foresee or control. Mastering these challenges will require great wisdom and humanity in the months and years ahead”.



# Possibilities



“More than surviving loss or managing stressful conditions, family processes in resilience can yield personal and relational transformation and positive growth. In struggling through loss and hardship, in active coping efforts, and in reaching out to others, families tap resources that they may not have drawn on otherwise, and gain new perspective on life. Similarly, studies of posttraumatic growth have found that individuals often emerge from life-shattering losses with remarkable transformations: gaining appreciation of life and new priorities; warmer, closer relationships; enhanced personal strengths; recognition of new possibilities or paths in life; and deepened spirituality (Tedeschi & Calhoun, 2008).”





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“As the initial overwhelm with COVID-related loss and disruption eases and we contemplate a long haul, it affords the opportunity to reflect on our personal and collective lives and to re-appraise our values and aspirations (Bruner, 1986). A crisis can be a wake-up call, heightening attention to what matters and who matters. In thinking more deeply about the “Old Normal” and “New Normal” we realize that many aspects of our COVID lives that were normalized need to be changed for the better. As we expand our vision beyond our personal struggles, we see needs for broader systemic changes with more urgency.”

**“This COVID-19 pandemic is forcing us to “Stare at the Sun” too long. We try to look away, but it is there wherever we attempt to avert our eyes. This Death Terror is punctuated by episodes of grief and sadness and tears. It is also punctuated by amazing acts of heroism, compassion, love, humanity, joy, laughter, gratitude, and self-forgiveness.”**

Breitbart, W. (2020). Life and Death in the Age of COVID-19. *Palliative & Supportive Care*, Vol 18(3): 252-253.

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