

Mostly fair
tonight, Wednesday;
highs in 80s

118th Year of Publication

Winona Daily News

WINONA, MINNESOTA 55987, TUESDAY, JULY 3, 1973



2 sections, 52 Pages, 15 Cents

Seminar students discuss effects of death experience

BY RICK GRAF
Daily News Staff Writer

"Death," she said, "is a catastrophic, destructive force bearing upon us, and we can't do a thing about it."

That's what students enrolled in "Death and Dying," a seminar conducted by Winona State College department of educational psychology, heard Monday afternoon when seminar director Dr. Elisabeth Kubler-Ross defined death.

THE AUTHOR of "On Death and Dying," she has studied the experiences of hundreds of dying

patients at the University of Chicago Billings Hospital. Monday's afternoon meeting was the first in a four-part seminar series. Another was held later in the evening and two more follow today in room 104 of Minne Hall, West Howard and Washington streets, one at 3 p.m. and the last at 7:15 p.m.

The study of dying patients began for Dr. Kubler-Ross seven and half years ago when a group of her students said they wanted to write a research paper about death.

Since then Dr. Kubler-Ross has learned a great about death by ob-

serving "those," as she said, "who know most about it—the dying."

Dying patients, according to Dr. Kubler-Ross, help the living lose their fear of death. And of those who are dying, she added, children face it better than adults.

"DO YOU know," she asked, "what the gut reaction of most U.S. nurses is to a dying patient?" She waited a moment before answering, hoping to receive a response from some of the nurses enrolled in the seminar. "The typical response of most U.S. nurses," she said, "is this: I hope he or she doesn't die on me."

Dr. Kubler-Ross asked, "Why should we feel so negative and give such a gut reaction? Why can't we speak about death like we do about birth? What's so terrible about dying?"

A student quickly responded that it's fear of the unknown. People get married and drafted, Dr. Kubler-Ross said, adding that both are "unknowns."

There are three types of death language—symbolic verbal and non-verbal, and plain English—that dying patients use. The first said Kubler-Ross is the most important, because those who use

it need someone the most. Its use by dying patients begins about age eight or nine. Children use it most, once they have reached those ages, she said.

As an example of verbal death language, she explained that a dying eight-year-old girl had said, "What do I do if a fire starts while I'm in this oxygen tent?" The girl, according to the doctor, needed someone to talk with about her death.

NON-VERBAL death language is used by youngsters between the ages of three and 10, she said, in the form of pictures that they draw,

touching or some other non-verbalized way.

Finally there are those who use everyday English to speak about their death. They are frank and open about dying and need someone the least.

All dying patients will tell "what, from whom and when they need something or someone." They all go through a spontaneous pattern before finally accepting their death. The important thing, Dr. Kubler-Ross emphasized, is that no one should try to push them to do anything. One who counsels the dying is a better counselor when he or she

strengthens or reinforces the hopes of those who are dying, she said.

It's difficult to conceive of one's own death, she said. "Most people think it happens to everyone but them. However, those who work with dying patients are forced to conceive of their own death," she said.

Students who have worked with Dr. Kubler-Ross have changed their ideas about the way they want to die. "At first they told me," she said, "that they wanted to die suddenly. But now after working with dying patients, they want to die by cancer."

Besides learning about the needs of dying patients, Kubler-Ross has also learned that one must not become insensitive to the dying patient's relatives. They, like the dying patient, go through a similar experience in accepting the death of a sister, brother, mother or father.

The art of counseling the dying or their relatives is to be able to pick up the different death language cues and accept them, she said. No one has to be a trained psychiatrist to do what she and others are doing, she said.