

caring
for those
you care about

Beginning the Conversation **About End of Life**

Death is a natural part of life ... but talking about it isn't! That's because most people are too afraid to talk — or even think — about what will happen when they or a loved one dies. But avoiding the topic will not prevent death from happening nor ease the pain that is associated with loss.

Many people avoid talking about end of life because of their fears: separation from loved ones, suffering, pain, and the unknown. These fears prevent them from dealing with life's final lesson and make it harder to evaluate and plan their lives as they wish. Facing your fears is the first step towards planning for the future.

Now is the time to take control over your final days — before illness happens. Talking and planning for death is the best way to ensure that your wishes will be fulfilled and that you will be able to live your life to the fullest until the end.

Why Is It So Important?

Most of us hope that we will die quickly, but the fact is that many of us will die after a long, slow decline. It is for this reason that talking and planning for your death is so important to your well-being and your loved one's peace of mind.

Making decisions about how you want to spend your final days is not simple. There are many factors and options available today that may influence your care at the end of life. Where do I want to die? Who will take care of me? What do I have to do to achieve a “good death?” These questions raise just a few of the points to be considered in deciding your care at the end of life.

Another focus is on what kind of treatment you want during your final days. While some of the issues related to end-of-life care haven't changed for generations, new ones are making decisions even more challenging. Also, the health care arena has been changing so quickly that there are new medical technologies and treatments that can extend your life well beyond its natural course.

When you were born, your parents spent nine months preparing for your birth. They wanted everything to be perfect for you so that your arrival would be smooth and loving at the beginning of life. This same kind of planning should be applied at the end of life. Talking and planning for death are the very acts that may allow you to live a fuller and more comfortable life in your final days.

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How Do I Begin?

The first conversation you must have is with yourself to find out what your feelings are regarding your own death:

- Where do I want to die, i.e., home, hospital, or medical facility?
- What kind of medical treatment do I want?
- Who do I want to take care of me?
- What kind of funeral services do I want?
- Where do I want to be buried?

Once you have decided on what you want, write your wishes down through advance directives. Advance directives are formal documents that explicitly describe your wishes for care near the end. There are two kinds of advance directives:

- **A Living Will.** This is a document in which you specify your wishes regarding medical treatment, generally the refusal of life-prolonging treatment when death is imminent.
- **A Health Care Power of Attorney.** This document allows you to appoint someone you trust to act on your behalf and make decisions regarding your medical treatment if you are unable to do so.

Also, sit down with your doctor and loved ones and tell them your wishes. By beginning the conversation with them, you are giving them comfort and peace of mind to follow your wishes.

Where Do I Go for Help?

To address these complex issues and to help you plan, AARP recognizes that you will need help and support in navigating the complex medical, legal, and personal issues that are major parts of end-of-life care. To guide you through this maze, AARP has developed a series of Tip Sheets that will give you pertinent information and valuable insights to assist you in beginning your own conversation about death.

Among the topics included in the Tip Sheets are:

- Advance directives;
- Pain management;
- Hospice care;
- Palliative care;
- Legal issues;
- Symptom management.



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