

THE POWER OF THE SIMPLEST GESTURE

*Prayer, Music, Touch, and Silence Can All Be
Therapeutic in Caring for the Seriously Ill*

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People who care for the seriously ill and dying must be strong and sensitive. God grants caregivers these gifts in order that they can improve the quality of living and the quality of dying.

This strength and power does not necessarily manifest itself in complex ways. Rather, it is sometimes seen in the simplest gesture rendered by the caregiver with sincerity and grace. In this article, I will explore the powers of prayer, music, touch, and silence. At first, these all seem to be small and insignificant interventions. But when done with "great love," they make a difference in the life, and death, of those in our care.¹

STORIES ABOUT NURSES

To demonstrate the power of the simple gestures of shared prayer, music, touch, and silence, I will tell several stories. Some are drawn from a study I conducted of exemplary nurses who provide care for patients with cancer.²

The participants in this study were nominated by their peers, who described them as "nurses they would want to have care for them, or for family members, in a palliative care situation." I conducted interviews with these nurses, observed them at work, and asked them to recount memories of patient interactions that had changed them or the way they practiced nursing. Following the interviews, I analyzed their recollections and observations using a multidimensional analysis derived from the phenomenological perspective.³

Perhaps the stories told here will remind some *Health Progress* readers of patients they once provided care for. These stories illustrate what I believe is the essence of exemplary palliative care. Stories are especially appropriate in articulating the actions of nurses caring for the dying because "stories are the juncture where facts and feelings meet."⁴ I will offer further analysis of the caregiv-

ing experience through several short poems (see below and pp. 51 and 52). According to one authority, poems are the perfect medium for giving voice to the tacit and unspoken.⁵ These poetic interpretations also come as close as is possible to capturing the emotion of human interaction.

THE POWER OF PRAYER

Many of the stories told by the nurses I interviewed provided insight into their spiritual beliefs. In many cases, their spirituality developed as they cared for people who were dying; the caregivers were faced with patients' questions about the existence of a greater power and with concerns about what happens after death. In their stories, some nurses shared their emergent beliefs about God and everlasting life. Many gave examples of how they had learned through experience to utilize the power of prayer as they prayed with, and for, their patients.

Marie, one of the nurses I interviewed, said, "I pray for my patients now. When they are dying, especially, I pray for them out loud, at the moment. It is my way of assuring their safe passage. I truly believe it; and I know that, if they

PRAYER

As we gather
In Your name,
We open our hearts
To Your will,
And sense Your
blessing in our souls.

are aware, they will understand. Really, it is for me as well as for them." Marie then went on to tell a story illustrating how she relies on prayer to help facilitate the transition from life to death.

"The process of dying can take a long, long time," Marie said. "Mr. Johnson had been in the last stages for about two weeks. He was a very religious man, and we had shared many talks about his illness. I was there when he was originally diagnosed, and I had come to know his family well. They had been keeping vigil day and night at his bedside, reading to him and praying his favorite prayers. He was very much at peace, but we all wondered silently, 'Why was this taking so long?'"

"It was Tuesday morning, and I was his nurse that day. When I did my assessment, I found his breathing was irregular and his extremities were very cold and mottled. I knew that the time for his passage had come. I quickly found his wife and daughter and whispered, "It's time." I placed one of his hands in his wife's hand, and the other in his daughter's and I simply stated, "He's going home." Tears flowed as they said goodbye. I cried too. No matter how prepared you are for death, the final moments are always hard. I felt very privileged to be present with them. I reached out to them, and we formed a tiny circle around his bed. Together we recited an 'Our Father' and prayed for his safe journey.

"I can't tell you how very special I felt to be part of that intimate circle. It was a gift to me that would give me a great deal of strength in the deaths I would stand by in the days to come."

THE POWER OF MUSIC

Sound, which is part of everyday life for most people, can elicit a wide range of emotional responses. Music, in particular, affects people deeply.⁶ Music therapy has been defined as "the prescribed use of music to aid in the prevention or amelioration of physical, psychological, or cognitive problems."⁷ Research has shown that, among hospitalized patients, the positive effects of music therapy include reduced anxiety and pain and increased relaxation.⁸ Indeed, music therapy appears to be an excellent noninvasive technique that can offer some patients additional comfort during times of stress.

Consider, for example, a story told by a nurse called Sue. She chanced on the use of music to calm the anxiety in a severely disquieted man.

"A year or so ago, I was working as a shift manager on nights," Sue said. "A man of about 35

MUSIC

When all else seems lost,
And I flail with fear,
And descend into despair
Music can reach me,
And again—I remember
And again—I am found.

years of age became increasingly restless and agitated. We will call him Mark. Mark had a progressive brain disease that was unlike anything I had seen in 25 years or more of nursing. That night, Mark required two-to-one nursing care. As [my colleague] Jane and I worked with our patient, we observed that, in spite of his verbal lashing-out, Mark never once cursed. [Jane] remarked that he must not have curse words in his normal vocabulary because, usually, what is in a mind comes out in confusion. I looked at his bedside table and saw a Bible.

"The night wore on with Mark's continual agitation, yelling, and extreme restlessness. He would bite his hands and arms and grab on to anything near him. At one point, I heard Mark repeat a series of words in a garbled fashion and recognized the words of an old hymn. I began to sing the hymn, and immediately he became quiet. The change was instantaneous and profound. Jane was able to leave for a break while I sat beside him, singing every hymn I could remember. As long as the hymns were sung, Mark rested.

"We later found out that Mark had been a lay pastor. He was loved by many, many people; and he died a terrible death that sucked every bit of dignity from this previously dignified, gentle man. I loved being his nurse because none of the usual textbook interventions worked [with him]. Mark required flexible, creative nurses who were not afraid to try the unconventional.

"Large doses of artificial sedation made no difference, but somewhere in the deepest levels of this man's mind, the songs of praise and worship touched him. It was a profound night because all

THE COMFORT
OF A TOUCH

Soothe, support, strengthen,
You can do it with,
Just a perfect touch.

my years of training and education came down to the simple singing of a tune.”

THE POWER OF TOUCH

In the caregiving professions, touch may be one of the most powerful of all the various nonverbal methods of communication.⁹ Touch is invaluable in enhancing the nurse-patient relationship.¹⁰ Used skillfully, touch can provide comfort, facilitate social interaction, confirm a diagnosis, trigger the release of pent-up emotion, and even help caregivers maintain a connection between themselves and otherwise unresponsive patients.¹¹

In spite of its obvious importance, touch has received only marginal attention in nursing research studies. Because touch is more difficult to quantify than other forms of therapy, and because there are many different *kinds* of touching, its effectiveness tends to be assessed subjectively, which causes some people to remain skeptical about it.¹² In fact, one writer has suggested that such skepticism has prevented caregivers from reflecting on their *own* use of touch and its potential as a contribution to high-quality care.¹³

One particular example of the power of touch to provide comfort can be seen in a field note I made as I witnessed a nurse consoling a patient who was very short of breath.

“Even before we entered the room, I could hear the desperate gasps for air. As I laid my eyes on [the patient], I could see his struggle. Starved for oxygen, physiologically by his disease and psychologically by his mind, he fought for every breath. I watched as the nurse walked to his side and took his hand. In a very soft and reassuring voice she said to him, ‘Take it easy; relax; take it slower.’ Her words were matched by repetitive strokes of his forearm. She was so calm herself, and, as his eyes fixed on hers and he felt the softness of her touch, together they slowed his breathing down until the desperation left.”

THE POWER OF SILENCE

Silence is powerful. It is pure, precise, and in some sense, perfect, and it was commonly used as a purposeful intervention by some of the nurses in my study.¹⁴ Silence is especially effective for transmitting feelings and emotions—experiences for which we do not have words. Compassion, acceptance, and support, for example, are often communicated best by silence. In an emotionally laden environment, such communications are frequently necessary, even though the words we have available are often too limited to communicate such subtle and intense meanings and messages.

Words are often inadequate; they can be imprecise and awkward. It often takes many words to convey a single sentiment; and when one tries to put one’s feelings into words, there is sometimes potential for misinterpretation. On the other hand, a silent moment can convey a myriad of emotions, precisely and accurately. Jane, one of the nurses in the study, succinctly said, “Silence is more filled with communication than words ever can be.”

The following story about a nurse-patient interaction demonstrates the power of silence in breaking thorough barriers and offering care in a seemingly hopeless circumstance. The story was told by a nurse named Candice.

BREAKING
THROUGH

Words, words, words,
Jackhammers pounding,
Against my protective
wall of isolation.

They do not crack it.

Gentle, silent presence
Passes through the wall.
And dismantles it.
Without even leaving a mess.

"Whenever I would try to 'care' for Will, he would erupt in anger and dismiss me from his room," Candice said. 'A real curmudgeon' was how the staff referred to Will. He had lived a hard life riddled with experiences of abandonment, struggle, and rejection. Now here he was, in his final days of life in our hospice, with no one and nothing to live or die for. He must have felt very much alone.

"As his nurse, I tried very hard to reach inside and help him to come to some peace with the life he had led. I wanted so much for him to know the love of the Lord before he died; but even my small acts of caring, like an offer of a hot coffee or an extra blanket, were sharply refused.

"It is hard not to take such constant rebuttal personally. But I did persevere; and I made sure that when I passed his room I would stop in, say 'Hi,' and ask if there was anything at all I could do for him. One day, to my surprise, when I asked if I could sit with him awhile, he nodded yes. So I pulled a chair up to the side of his bed, lowered the rail and sat, in silence. What could I say? I admit I was afraid to speak because I was certain he would send me out, so I sat very quietly praying inside my heart. The next day, when I again asked if I could sit with him, he agreed—as he did the next and the next. Each time the routine was the same: Pull a chair close, lower the rail, and sit quietly.

"One day when I came by, the door to Will's room was closed. On asking the other staff, I found that he had died in the night. Although I was saddened by his passing, I felt a small pang of relief knowing that perhaps the silence we had shared had in some small way comforted Will and aided him on his journey."

God's Gifts to Caregivers

The stories I've told here demonstrate the power of the simple gestures of shared prayer, music, touch, and silence. These are capabilities afforded to those who care for the seriously ill so that they may improve their patients' quality of living, as well as their quality of dying. God grants the powers and understandings we need to give comfort and care. May we all be thankful for these gifts, and may we use them generously to make a difference. ■

NOTES

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