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Origin Stories II

Compiled by Gabriel Schauf

Last year in this publication, we cast a net into the funeral service education waters to ask students why they chose this particular career path. One of the first questions we tend to hear once someone finds out that they are speaking with someone in funeral service is, “How did you get into that?” Sometimes it is asked with genuine interest in mind, while some might just have a morbid curiosity. Be that as it may, almost everyone enjoys a good origin story.

In 2023, funeral service education students at Wayne State University in Detroit, wrote short essays about why they chose funeral service. In this edition, we present another group of students sharing their origin stories.



MADELYN FERGUSON

My path to obtaining a degree in mortuary science wasn't always clear, and it was definitely a long journey for me to get here. From a young age, I knew

It takes a special person to be comfortable enough with death to assist others who might be unsure or scared.

I wanted to go into a helping profession. I wasn't quite sure what I exactly wanted to do, but I knew I wanted to help people.

I went to college not fully knowing what major I wanted to pursue. I remember sitting on my dorm room floor crying because I was overwhelmed with the stress of trying to choose what career I wanted for the rest of my life. I was trying to choose between becoming a funeral director or a psychologist. I recall it being so difficult for me because both

are helping professions, but, on the other hand, I come from a family of funeral directors. How was I supposed to know what I wanted to do for the rest of my life at 18 years old?

Ultimately, I chose psychology because I wanted to create my own path. Since I come from a family of funeral directors, becoming one was always a thought I had, but I also wanted to branch out and be my “own person.”

Fast-forward to my senior year of college at Michigan State University. A month before graduation, I was accepted into a master’s program for counseling psychology. All of my hard work in college was paying off, yet I found myself sitting in my apartment in East Lansing looking at Wayne State University’s mortuary science program website. I remember trying to figure out if my credits from Michigan State would transfer over and count toward the program’s prerequisites. At that moment, I thought to myself, “This is crazy! I already planned my future and I need to stick to the plan.”

So that’s what I did. I graduated from Michigan State University with a degree in psychology and attended the master’s program that fall. After the first semester in the program, however, I became very unhappy. I was truly struggling with my decision to become a psychologist.

I kept this to myself for a bit because I didn’t want to give up or disappoint my family, so I thought I would just stick it out. After a lot of self-reflection, however, I realized I couldn’t pursue the program and that I didn’t want to become a psychologist. Throughout this period, I kept thinking about mortuary science and becoming a funeral director, so I finally talked to my parents and grandparents about my struggles.

After talking to my family, it became very apparent what I wanted to do – attend Wayne State University’s mortuary science program. I can honestly say this whole experience taught me a lot, and now I truly feel like I am where I’m supposed to be.



MCKENNA STEHR

Ever since I was young, I have had a fascination with funeral service. It started when I attended the funeral for my maternal grandfather. His death was expected as he had small-cell lung cancer for a few years. He had been staying at my family home and my mom was his hospice nurse. I was only 9 at the time. Before this loss, I had no experience with death, so I didn’t know what to expect.

After his passing, my family and I attended his viewing.

We are so scared of death that living is even scary, and that is not how it should be.

One of my mom’s high school friends was the funeral director at her own funeral home. To ease the tension and divert the topic away from death on the ride to the funeral home, she mentioned her friend, Becca, who lived above the funeral home. I thought this was the most bizarre thing.

I also remember asking what was going to happen to my grandfather once we left, and my mom loosely conveyed the topic of cremation in the most age-appropriate way. It left me in shock, but not in a bad way.

My memory is hazy since this was about 14 years ago and I was a small child, but I can still remember specific details. I remember the red carpeting. I remember my entire family, as well as people I had never met before, all congregated in a small viewing room. And, most importantly, I remember the look of peace on my grandpa’s face. I had never seen a deceased person before, but it wasn’t as scary as I thought it would be. I remember my brother making a remark about “grandpa sleeping.” (He was even younger than I was.) I have been to several funerals since, and I can’t remember any of the people I have seen looking as natural and lively as that first one.

About 12 years later, I was trying to decide what to do with my life. I was flip-flopping between different career paths, but mortuary science had always been in the back of my mind. It takes a special person to be comfortable enough with death to assist others who might be unsure or scared.

I decided to do a job shadow with the same funeral director who hosted my grandpa’s viewing all those years earlier. While the job shadow was at a church and not her funeral home, I still felt like this was something I was meant to do. I am sure if we had been at her funeral home, it would have brought back many hazy memories from before, and I feel as if this calling would have been even more intense with the newfound peace I was experiencing surrounding death and dying.

In my soul, I feel that this is something I am meant to do. I want to be that supportive figure for families going through the toughest moments of their life because I know it makes all the difference in the world. I want to help educate people to try to destigmatize death and those working in this profession. We are so scared of death that living is even scary – and that is not how it should be.

I also want to create a more inclusive space because I feel like the funeral profession has been the same forever and could use a fresh perspective. I have a special interest in eco-friendly burials and other similar concepts. I want to provide service and support in a judgment-free way and, ultimately, learn more about myself and my attitude toward my own mortality. I believe if we approach our fears head-on, it can make them less scary. Once we become comfortable with our own eventual demise, we can actually start living.



VIKRAM BARTON

Mortuary science has always been in the back of my mind ever since I graduated from high school. Honestly, my experience with death has been fairly limited,

with only my grandmother dying during my lifetime. What really appeals to me about mortuary science is not necessarily death itself, however, but the multifaceted nature of the work.

I have worked several dead-end jobs in my life, each with varying appeal. There are elements I found enjoyable in all of them, whether it be the laborious aspect of painting or the need to be nurturing in child and senior care. Still, these jobs would eventually devolve into tedium and I found myself wanting to pursue something more ambitious.

Obviously, there is a tedium to all jobs, and funeral direction does not escape this, but the greater appeal of mortuary science, beyond the dynamic type of work done, is the fact that helping the living grieve, deal with their losses and revere the dead is an integral part of any healthy human society.

And so, with this realization, I was further drawn to the study of mortuary science. As I began to read more and more about the field, the anecdotes and cases of the industry fascinated me. The restoration of eviscerated corpses, the solace given to those through the services performed – it seemed like it was a job that truly helped all walks of life.

But why the pursuit of a degree over simply working as an assistant? Well, I have always had a resistance toward the more grotesque things in life and a keen interest in biology. It made sense to me to pursue the “full package” of the funeral business. Being able to do both embalming and directing as a licensed funeral director was another great appeal to me.

I also want the flexibility that comes with such a degree, i.e., the capacity to get a job anywhere in the state and, potentially, the entire country. I would like to develop my career in a more populated area. Afterward, I would like to return to the more rural lifestyle I grew up in and raise a family. A degree in mortuary science makes this more than possible.

Being a jack-of-all-trades type of person is something that doesn't just appeal to me, it is a principle I want to aspire to. Being a member of a community while doing something important is necessary for me to be fulfilled in life. And through the acquisition of a mortuary science degree, I know I will be able to achieve this desire.



MAYA MEHALL

Like most 10-year-olds, I had never had a close encounter with death. I still viewed it as a far-away concept and something that could never impact me. In the winter of 2012, however, my grandfather was diagnosed with stage 4 liver cancer – fatal, inoperable. He lived until September 2013, barely making it past his 70th birthday.

As a child, watching this robust, large man shrivel away into nothing but a skeleton was terrifying. What was even scarier was the day he died, surrounded by family in his living room. I had never been to a funeral home before, and television had made all funeral directors look like depressed

Helping the living grieve, deal with losses and revere the dead is an integral part of any healthy human society.

and depraved shells. My grandfather looked so unhealthy and ragged when he died, so the thought of seeing him in a casket filled me with anxiety.

Fortunately, I could not have been more mistaken. I have forgotten the name of the funeral home, but I have not forgotten the feeling of comfort that seeing my grandfather again gave me. He looked fantastic. His cheeks were full of the color of life, his hair was neatly groomed and, dare I say, it looked like he had a slight smile on his face. The serenity within him gave me a feeling that he was all right, wherever he was.

The funeral director and the other employees were extremely compassionate to my family and me, gently handing me tissues when I cried and patiently listening to me talk about my grandpa. It was such a profound feeling of understanding, and it fundamentally changed my trajectory in life. I wanted to give the same feelings of understanding and comfort to others that those employees gave me 10 years ago.

As I grew older, I participated in service projects and mission trips through my church's youth group. These experiences further cemented my belief that my purpose in life was to help others and to lessen the burden of grief whenever I can.

In addition, I have always excelled in science courses and have taken an interest in the more “taboo” side, such as what happens to a body when it decomposes, or the chemical processes of embalming. I never shied away from dissecting things, even when I had to dissect a sheep's eye in middle school. I have the capability of working with subjects that other people might find gross, and I have a massive need in my heart to help others.

Mortuary science is a perfect combination of science and service, and I have great respect for the deceased. Earning a degree in mortuary science is my dream, and I one day hope to become a licensed funeral director to give back to my community and provide the most respectful services possible.



CHARLENE EDELMANN

Being a mortician was not always a dream of mine. I never knew it was a career, to be honest. As cliché as it sounds, however, I always was fascinated with death. I was always curious about people's views of death and how it was spoken about.

Like all parents, mine never wanted to expose me to death because they did not want me to witness it, fearing that it

would harm my growth. There was a time, however, when they were unable to prevent that from happening. There was a streak of family members dying in front of me throughout my teenage and early adult life. The one that impacted me the most was my mother.

The experience of her going from being healthy to only having a month to live, to even how others treated her after she passed, caused me to switch careers completely. I decided I was not sure when I was going to die, so I might as well do something I enjoy most – *art*. I chose to make twisted and creepy art by restoring old dolls and articulating them into different positions and silhouettes in order to depict messages of death and loss while emphasizing the weight emotions have on the psyche.

Although I love art and the messages it portrays, I felt like I could do something more with it that could give back to the community, so I started researching different careers that deal with restorative work.

From videos to articles, I dove into what I could do with my skill until I came across a video on YouTube. This was an interview between the host and different morticians. Each of them spoke about what they liked about their job, the hardships, aspects of the job they never thought about before and, lastly, what made them want to be a mortician. Each of their answers shook me. Each of them spoke about how they had a family member or someone they loved die in front of them, or someone they loved died suddenly, which then drove them to want to be a mortician.

The interview caused me to think back to my mother and how and when she passed. For a brief moment, I pondered becoming a mortician due to not only my skills as an artist, but also because the only people that treated my mother with the dignity she deserved were the morticians. I had dismissed those thoughts, however, until I saw that interview.

My mother's family treated her like garbage after she died because she did not live up to their standards. They could not focus on all the good she did. From being a nurse to all the hours she spent away from her family to take care of her own mother so everyone else could go on with their lives, they could not focus on my mother. My family had to deal with the consequences of everyone's selfish actions, and not one of them showed up to her funeral. Not one of them stood by her as she was passing to tell her they loved her.



TAYLOR WILLIAMS

It all started back in 2019. I found myself scrolling through 10 pages of Indeed.com and came across a listing for a "Funeral Services Assistant." Instantly, I applied. A couple of weeks later, I received a phone call to come in for an interview. A couple of months later, I was helping set up services, supervise visitations and generally just assist the funeral director with whatever was needed. I loved it.

One day in June, I was working alongside one of the funeral directors on a funeral service at a bible church. The service was for a young teenage boy who had been hit and killed

walking home. Understandably, the family was extremely distraught and upset, and I remember to this day the overwhelming emotion in the room as everyone shared in their grief and sadness.

After the service was completed, the mother and father came up to me and the funeral director. The mom wrapped the funeral director in a hug and thanked her over and over again for being there for her and her family, and for making her last goodbye with her son special. At this point, both the funeral director and I were in tears, unable to hide the pain and sorrow we felt for this family.

At that moment, I realized I wanted to be that person for these families. I wanted to be the one to firmly grasp their hand and guide them through one of the hardest journeys of their lives. This moment was like the sky opening up after a rainy day and the sun emerging. When I left that day, I called my mom and told her that this was what I wanted to do.

The following day, I sat down with my general manager and told her that I would like to begin an apprenticeship to see if this is really a good fit for me. She was ecstatic, immediately agreed and told me that she would discuss this with our market director and then let me know. From that point forward, I began my apprenticeship and fell even more in love with helping families and their loved ones.

The last step to being able to really be the person I want to be is to obtain my degree in mortuary science and gain all the knowledge necessary to be the best funeral director/embalmer I can be.



CORIANNE FINCH

I chose to get a degree in mortuary science because I have always felt compelled to care for people when they cannot care for themselves. During my time in the medical field, I learned how to be patient, careful and to listen closely to patients while validating their feelings. I feel like those are some skills that will transfer over to this field because a certain level of bedside manner will always be involved.

The respect does not end when we finish talking to the family, or when they are not in the room. The same level of respect is given to the decedent throughout the entirety of

The mom wrapped the funeral director in a big hug and thanked her over and over for making her last goodbye with her son special.

Working at a funeral home is unlike anything else, and I immediately fell in love. Every job is something new and there is always something to learn.

their time in our care. I made the decision to get a degree in mortuary science because I want to help make a positive difference in society while helping vulnerable people get through some of the worst times of their lives.

I have also been in the position where I lost someone and was overwhelmed and had no idea what to do or when. It felt like every piece of paperwork was waiting on another one, and I could have used the patience of someone willing to walk me through it. I want to be the person providing that assistance to someone who needs it. I am able to set my emotions aside when others' are more pressing, which in turn makes me a good listener. I am able to put them at ease with reassurance, and I enjoy helping people when I can.

In addition to having experience working with people during highly distressing situations, I enjoy that kind of work. I like having the structure of proper forms, an order of operation and clear guidelines, as well as the closed-loop communication. Having a standard to meet or surpass with every task is what makes me appreciate the effort I put into it. While I am able to work under pressure and make split-second decisions, I dislike doing so. I prefer to have more of a methodical and well-planned process at my hands. Being able to take my time and put forth my best effort is where I excel.

I am an artist who uses various different mediums, so I am oriented on a variety of materials and ways to use them. I enjoy tedious projects that require focus and attention to detail. I have pride in making beautiful things that I can present to people. Being able to apply those skills in restorative art will give me a way to create an aesthetically pleasing image for the loved ones to see. If I can put those skills to work in creating something that will help people through grief, I want to be in a position to do so.

[T]here are quite a few reasons I am in the mortuary science program. I wanted to get my degree so I can put it to use by providing a necessary service. I enjoy many different aspects of the work that's involved, and I know I can do them well. I am excited to learn more about the human body every day.

Everyone is different and requires individual care, and we can learn something from every person we meet or work with. I want to be able to prepare people to attend the last event of their time on earth, as well as be a guide to those who might need assistance working through grief.



MYYA KRENK

Mortuary science wasn't my first choice in schooling and wasn't really given much thought until fairly recently. I'd always been interested in the medical field and thought that there were only two routes to go: nurse or doctor. I planned on being a nurse.

I didn't land immediately on nursing though. I originally wanted to go to school to become a forensic doctor – a coroner, to be specific. I knew, however, that I would not be able to survive mentally, physically or financially from that schooling. Nursing seemed like a good in-between.

But more issues came up there. I have a few health problems that would, unfortunately, hold me back in the nursing profession. You need to be able to be on your feet all day long, and always be on call and prepared. Due to nerve damage in one of my legs, that simply wasn't and isn't possible for me.

I'd always been interested in the arts as well. I draw and paint and worked with clay for a while. I thought about going to school to become a medical illustrator.

While I was bouncing between degree ideas, I ended up receiving an associate degree in arts and science while working at a dead-end coffee shop job. One of the regulars was a funeral director, and the more we got to talking, the more interested I became.

I'd looked briefly into becoming a mortician, and the field had always fascinated me, but I didn't know that much about it. Getting to talk with Elizabeth and hearing about some of the services and cases she took on mesmerized me. She offered me a job, and I took it. Working at a funeral home is unlike anything else and I immediately fell in love. Every job is something new and there is always something to learn.

After a few weeks of working there, I started looking at schools. What originally drove me was my pure passion for art and science, but the more I got to work with the families and the deceased, the more I realized that I truly enjoy working with them. I've never been great at communicating, but I somehow manage to flourish in the funerary environment.

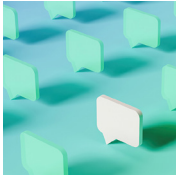
I want to help people understand this field. Death should be demystified and talked about openly. People should understand what goes on inside a funeral home and how much work and effort is put into their loved ones. The funeral industry is amazing and filled with wonderful people who truly want to help others. I truly believe that this is the profession for me.

Gabriel Schauf is a licensed funeral director, an instructor with the Milwaukee Area Technical College Mortuary Science Program in Wisconsin and host of the NFDA podcast A Brush With Death.

END WELL SYMPOSIUM

Making the End of Life a Human Issue, Not a Medical One

By Edward J. Defort



As we move forward into 2024, the funeral service landscape is much different than it was, say, even five years ago. There seem to be fewer “traditional” services, with cremation the dominant choice among families. The overall end-of-life care continuum is expanding, however, and funeral service is a part of this continuum. Today, building relationships with those other end-of-life care providers is essential to the longevity of the funeral.

In 2017, End Well started with a simple idea – to make end of life a human issue rather than a medical one. Now, seven years later, End Well has become the most widely known and respected organization at the intersection of popular culture and healthcare, with a focus on end of life, grief, loss, caregiving, and associated health and welfare challenges.

The nonprofit is dedicated to the belief that all people should experience the end of life in a way that matches their values and goals. This has helped shift the conversation toward living fully until the very end. End Well brings together a community that unites design, technology, health, policy and activist initiatives to transform how the world thinks about caregiving, grief, illness and the end-of-life experience. The ultimate goal is to create a future where ending well becomes a measure of living well.

“From the start, End Well has been focused on shifting culture way upstream so that people can have the information, the knowledge that they need about options for treatment and for care before they’re in a crisis,” said Shoshana Ungerleider, founder and board president at the beginning of its 2023 Symposium in Los Angeles, California, of which NFDA was a community partner. “We’ve been doing this in lots of ways – through our social media, through our website, and by speaking at all sorts of conferences, and not just healthcare ones, around the country. But our dreams are a lot bigger.”

Setting the stage for the event, End Well had been conducting research for the past two years and building connections with Hollywood’s top storytellers to offer expertise that they need to bring more nuanced, diverse and surprising stories about all things end of life to television.

“I look out at you all with deep gratitude and awe, knowing that in this room we bring together an incredible mix of top TV showrunners, of healthcare, most senior executives of hospice’s most dedicated staff and volunteers, engaged patients, survivors, committed entrepreneurs, social media



NFDA served as a Community Partner at the 2023 End Well Symposium. Lower, from left: NFDA CEO Christine Pepper with Anthony Kaniuk, director of industry relations, and Gail Marquardt, vice president of consumer engagement.

influencers, clinician change agents, designers, writers, architects, and so many more to share and to learn from each other,” she added. “In this moment when the world is facing so much collective grief, I want to thank you all for being here and for all that you do.”

Hosted by Yvette Nicole Brown, an Emmy nominated actor, writer, producer and host best known for her roles in a number of TV series and films, the symposium brought together 25 speakers in a fast-paced format to share their stories.

“We are all here for deeply personal reasons,” Brown said. “One, we all die. We all will have witnessed, or will witness, people we love facing illness and the end of their lives. We are all trying to figure this out for ourselves.”

“Yet I think we’re all here together in this room today because, ultimately, we are guided by love. That is the one essential truth; that the best way to understand our purpose on

this planet is through the love we have for others,” she added.

Brown noted that this year’s theme for the symposium, “It’s About Time,” makes a lot of sense in that light. “Love is all about time,” she said. “It’s about taking time, giving time, sharing time and making time. But when you think about it, time isn’t a very straightforward concept. Time changes depending on where you are in the trajectory of your life. And if illness strikes, time changes again.”

“As mortality looms large, time is something that can feel like an eternity to a person who’s isolated from others, or be an incredible, precious resource for someone balancing multiple jobs while also being a caregiver, like me,” Brown added.

Each of the scheduled speakers had about 10 minutes to share their stories. Three of those presentations follow.

DR. IRA BYOCK

The first speaker, Dr. Ira Byock, was introduced as a pioneer in palliative care who has made significant contributions as a clinician, author, educator and advocate for more than four decades. Byock told the story of Mr. Rodriguez, a terminal cancer patient he met while doing rounds as an intern early in his career. Byock asked a simple question, “How are you today?” and was perplexed by Rodriguez’s answer, “I am well, Doctor, how are you?”

“His answer stunned me. I didn’t know what to make of it,” Byock said. “Dying is hard, and it was hard for Mr. Rodriguez. He knew he was dying.”

Byock wondered if his response was merely graciousness or if he was a bit euphoric from the opioids or the steroid medications that were prescribed. “Hospitalized patients who were deemed to be dying were commonly moved to a room down the hall, ostensibly for their privacy, but in reality also to shield us from the discomfort of their situation,” Byock said. “I saw many people die unnecessarily lonely, painful deaths. This seemed to me to be a failure of our teaching hospitals’ commitment to excellence, but also a social injustice. I mean, when did they stop mattering?”

“This time of life we call dying has plenty of potential for suffering, but also, apparently, the potential for well-being,” Byock said. This circumstance was literally brought home to him the following year when his own father was diagnosed with terminal cancer.

The time from his father’s diagnosis until his death was difficult. “However, during that difficult time, Dad and I had some precious interactions, important conversations,” he said. “The months before his death gave us a chance to say things to one another that might have gone unsaid. We also had time to share stories that the other hadn’t heard. I heard stories from his early years and my parents lives before my sister and I came along. We laughed together. We were sad together. Though he felt physically lousy a lot of the time, he had never lost his capacity for joy.”

These early experiences shaped Byock’s practice as a young physician, as well as his career. “I learned that at critical moments of life, time is measured in depth as much as in length,” he said.

“When I met a seriously ill person, in addition to asking about their pain, I was sure to take a moment to get quiet, lean forward and ask, ‘And how are you within yourself?’” he said. “This felt like real doctoring.”

Byock was drawn to the early hospice movement in the late 1970s and ’80s. “My generation was going to change the world, end war and hunger and poverty, extend healthcare to all,” he said. “Many of us were appalled to witness dying patients receiving bad care, and committed to doing something about it.”

Dying people should not be left to figure things out on their own. That’s tantamount to abandonment.

He said that hospice upended mainstream medicine’s denial of death, and its “treat till they die” mentality, simply by being honest about dying. “Combining good medical care with meticulous attention to people’s personal, and their family’s, priorities, we showed that much better care was possible,” he said.

“This was a clinical revelation, but also social and cultural,” he added. “In a sense, we were stretching the wellness movement through the end of life.”

As people approach the end of their lives, some choose to devote limited time and energy to take bucket-list trips, or to devote time to visit loved ones to invest in mending and tending relationships, and to just enjoy relationships, sharing stories, reminiscing, giving gifts. “For some people treated in this manner, it turns out that dying can become a culmination of life, not merely its ending,” Byock said.

“The full continuum of human caring extends to honoring and celebrating the persons who are ill or who have died,” he said. “That’s why we hold vigils, throw going-away parties, convene celebrations of life, funerals, memorials, attend wakes and Shiva. These are rituals that help care for the whole person, their family – and ourselves.”

“This full continuum of human caring feels culturally monumental,” he added. “Hospice and palliative medicine research has clearly shown that consistently excellent care is practical, affordable and scalable.”

“So, why haven’t we done it?” he asked. “Why haven’t we revolutionized the way Americans are routinely cared for and experience these last stages of life?”

“A new cultural awakening and corresponding social movement is needed to safeguard people’s full human potential,” he said. “It is up to you and me to raise people’s expectations for reliably excellent care, and their awareness of the potential richness of these inherently difficult, unwanted times of life.”

“Dying people shouldn’t be left to figure things out on their own,” Byock added. “That’s tantamount to abandonment. They deserve doctors and social workers, and patient advocates and navigators and doulas who serve them. Patients and families need the resources to identify the best hospitals and hospice programs. They need to know what to ask for and, when necessary, how to demand much better care.

Many are already engaged in what Byock called this important work of cultural evolution. The End Well Symposium would showcase innovative efforts through advocacy, and by infusing stories and images of people facing life and, within, the fabric of contemporary life. “We are stretching collective notions of full and healthy living,” Byock said. “I thank the doulas for the cultural leadership. I thank the spiritual leaders who have the courage to integrate illness and caregiving and dying within faith community life. Thank you to the psychedelics-assisted therapists and researchers, and the green burial entrepreneurs, and the conveners of ‘death over dinners’ and ‘death cafes.’”

“The young idealistic physician still living within me believes that, together, we can realize this bright vision of a healthy human community,” he said.

HADLEY VLAHOS

At the opening of her presentation, Hadley Vlahos asked, “Were you the butterflies?”

The remark confused the audience until she explained. Vlahos, a nurse specializing in hospice and palliative care, and author of the *New York Times* best seller *The In-Between: Unforgettable Encounters During Life’s Final Moments*, said “confused” is exactly how she felt as she sat at the bedside of one of her hospice patients, Miss Cheryl, very early in her career.

It was a seemingly normal visit – well, as normal as it can be for a patient with terminal, untreated cancer. “I wasn’t really doing much other than sitting there at her bedside,” Vlahos said. “As I was sitting there, I heard her ask that question out of the blue – ‘Were you the butterflies?’”

Vlahos looked around the room to see if anyone else had walked in, but it was just the two of them, so she leaned forward and touched Miss Cheryl’s arm and said, “I’m sorry.”

Miss Cheryl turned to her and said, “I was asking my son if he was the butterflies.”

Vlahos stepped into the hallway to talk to Miss Cheryl’s husband. As she explained what happened, his eyes filled

His eyes filled with tears as he told her about their son dying in high school and how, afterward, Miss Cheryl saw butterflies everywhere.



Attendees participated in a variety of discussion groups during lunch, focusing on a variety of end-of-life topics.

with tears as he told her about their son dying in high school and how, afterward, Miss Cheryl saw butterflies everywhere.

“I wish I could say that I walked back into my patient’s room and sat at her bedside and witnessed that beautiful conversation unfold between her and her deceased son,” Vlahos said. But that’s not what happened. Instead, she walked to her car and called a physician and asked him what medications to give to a patient who is hallucinating.

“And I will always regret that decision,” she said.

Vlahos was raised in a very strict religious household, so the idea of an afterlife was a given. But when she was 15, the world as she knew it ended. At a high school football game, she watched as her friend jumped up to catch a pass. He was violently hit by two opposing players, and the impact ruptured the receiver’s liver. He died instantly.

“I became extremely confused and skeptical of everything,” she said. “I would sit in church and just say what kind of loving God would take my friend and allow certain other people to stay here? It really rocked my foundation. And I just really began to question everything that I was hearing.”

As she moved on in her hospice journey, Miss Cheryl was not the only one who was seeing deceased loved ones. “I had Miss Sue, whose husband came and got her at the end and her death anxiety was wiped away,” Vlahos said. “And Miss Edith, who had severe dementia and was able to seemingly communicate with me at the end of life and even predict what would happen later on.”

As she had these experiences, Vlahos had one question: What is going on?

“This just did not jive with my atheism,” she said. “I felt like I could piece everything together and put it into pretty little boxes and make it make sense, and I can disprove all of this as a hallucination.”

And then she met Miss Margaret. “This was not my first experience of people seeing deceased loved ones, or having surges of energy,” Vlahos explained. But when she went and saw her in the hospital, Vlahos talked to her nurse outside of

the room. She told Vlahos that the night before, Miss Margaret's heart had stopped, but they were able bring her back through CPR.

As soon as Miss Margaret regained consciousness, she asked to go home on hospice. Vlahos admitted her but the doctor warned that her heart was going to give out at any minute, and she probably would not even make the drive home.

"But that is not what happened at all," Vlahos said. "I actually got to spend many months with Miss Margaret, and I was always amazed at how happy she was despite her circumstances."

Miss Margaret encouraged Vlahos to live life to the fullest. "To her, living life to the fullest was finding everyday joy," she said. "It was using fine China on a Tuesday, or it was laughing with a co-worker or taking a scenic drive."

Vlahos was always curious to know what Miss Margaret saw when she died. "I was always searching for that time to naturally ask her, but it never came," Vlahos said. "Instead, when she seemed happy with my understanding of what a life well lived looks like, she offered it to me."

"It's beautiful, you know," she said to me out of the blue one day. And I said, 'What is?' And she said, 'The afterlife. I can't wait.'"

"I really started to rethink how I had been not only thinking, but I began to scrutinize my actions because I was not simply present with them," she said. "I was constantly analyzing and looking for a reason for all of this happening. And as I started to really look back on my life, I realized that everything in my life had been trying to find an answer. My Episcopalian beliefs were an answer, and so too with my atheism."

"And I started to understand that a joyful life does not come from us having it all figured out," she said. "It's our ability to simply enjoy these unexpected moments. And as I began to accept this and was able to really sit there with my patients as they saw their deceased loved ones, I started to really look forward to the next time that moment would happen."

Some years after Miss Margaret, Vlahos took care of Mr. Al – "Big Al," as many people called him. He was a chef in New Orleans his entire life. Vlahos said he was pretty indifferent to her when she first met him, and she was desperately trying to find a way to connect with him. One day, she walked in as he was eating red beans and rice. She told him that she tried to cook red beans and rice recently for her family, but the results were not very good.

He offered to walk her through the steps and give her some tips. She did not get very far into the steps before he asked, "How long did you soak the red beans?"

"I looked at him confused, and he looked very concerned, and I said, 'Are you supposed to soak the red beans?'"

Big Al said, "You served your family dry red beans?"

"That really bonded us," she said. "In every visit after that, we just grew closer and closer."

One day, Vlahos get a call from Big Al's wife, who said that

he was out of bed – something that had not happened for probably a year. "That surprised me, but what surprised me even more was when I walked in, and he had a large kitchen knife in his hand. I looked at his wife and she was very concerned. Instead of walking over and taking the knife from him and safely leading him back into bed, as I would have done at the beginning of my career, I walked up to him and placed my hand on his free hand and said, 'Am I finally going to get to learn from the master?'"

And he said, "More than you know. My mom is here, and she is the real master." As Vlahos cut up vegetables under his direction, she got to witness him talk to his mom as a school-age child would talk to his mom about a field trip he was going on, and they were both excited about it.

Miss Margaret asked to go home on hospice, but the doctor warned that she probably would not even make the drive home. But that is not what happened at all.

"We placed the red beans and rice on the stove to simmer, and I helped him back into bed, and I could still smell the red beans and rice in the air when I pronounced his time of death just a few hours later," Vlahos said.

"When I went to his funeral, it was clear that he was very loved by so many people. I did not expect any of his wife's time, but, to my surprise, she came up to me and in her hands was his top-secret bread, beans and rice recipe. And as I held it in my hands, I realized that the next beautiful moment had happened," Vlahos shared.

"In our industry, I see so many people attempting to analyze and control from that place, but I want to invite all of you to, instead, meet your patient where they are at and, in that moment, behold your next beautiful moment, as well," she said.

DARNELL LAMONT WALKER

When Yvette Nicole Brown introduced Darnell Lamont Walker to attendees at the End Well Symposium, she said his life story is quite unique. As a children's television writer, as well as a death doula, "He connects the dots along life's trajectory," Brown said.

"I know this thing may sound strange to some of you, because it does sound strange to me sometimes," Walker said. "Writing was always the goal. I started writing stories when I was 7."

Walker's first story was about a 7-year-old little boy who ran



Gail Marquardt (right), NFDA vice president of consumer engagement, met with grief specialists and other end-of-life professionals to talk about the resources available through NFDA's consumer education initiative Remembering A Life.

away from home because his mom wouldn't stop smoking cigarettes. "It's kind of autobiographical. I still hate cigarettes," he said.

He stayed up all night working on that story. When he woke up the next morning, he left it on the bed. He was very proud of his story. While at school, he told his friends about it, and they wanted to read it. "But I got home and my parents were sitting there reading this [what they thought was a] letter."

His parents were about to call police because they thought he really had run away. So, he honed his skills and has been able to travel the world as storyteller, poet and playwright. "In fact, I was actually in Amsterdam when I got the call that I'd been accepted into the *Sesame Street* writers room," he said.

"It was strange because everything that I had created before this had nothing to do with children, at least not directly," Walker said. "I'd come from creating and producing and directing socially conscious content that some called 'heavy.'"

His first film was called *Seeking Asylum*, a documentary about him trying to escape America. His second was *Outside the House*, about black mental health. And his third was *Set Yourself on Fire*, about the global rape epidemic.

"Heavy? Yes, but I like to say that it was more about how society is failing us and how society could be positively transformed," he said.

So, it was *Sesame Street*, it was New York, and it was exciting. "And it was my chance to ask myself, 'How can I create better people?'" Walker said. "I long lived by the quote of Frederick Douglass, 'It is easier to build strong children than to repair broken men.'"

His first question in the *Sesame Street* writers' room was, "How can I create content that keeps kids from turning into the adults that we're so busy repairing?" It was a hard, but necessary, question.

Ultimately, he was able to create work that was light, encouraged kids to get out and play and able to inspire imagination and curiosity and creativity in the minds of young children. And it worked. Walker left *Sesame Street* and went to work for *Blue's Clues and You!* and some really amazing shows. "I loved it. It was my chance to see that my work actually mattered," Walker said.

So, how did the death doula thing come about? "This thing

popped up on me in one of those wild moments I hope we all get to experience from time to time," Walker said.

At nine years of age, Walker was helping his family navigate the loss of his great aunt from lung cancer. "At nine years old, I didn't fully understand what death was. I'd never really experienced it," he said. "But every night, my mom would come home and give me updates. And, in her last update, she said that my great aunt had said that earlier that day, her mother had come to see her. And again, not knowing much about death, I somehow knew that my great aunt saying that her mother visited – a woman who died a few years before – probably meant death was coming for her, too."

In 1994, when Walker was 12, AIDS was the leading cause of death for Americans aged 25 to 44. "I had a cousin who wanted to come home to die," he said. "And families at that time were a little ignorant of the disease so many didn't want to come around. But my grandmother, this woman who was so full of love and compassion, welcomed him home."

"I'm not sure when [he] died, but I just remember the silence that stayed around that house for a very long time," he said.

The next year, just looking for something to do after school, Walker volunteered at a local hospice. "I made toast with a little bit of cinnamon, a little bit of sugar, a little bit of butter," he said. "But my favorite part... was sitting in this room with some of the patients. I would sit there, they'd tell me their stories, they'd ask for hugs, they'd want to hold my hand."

"It sounds to me like you're a death doula," a friend said. Walker had never heard the term before. "I simply don't want people to feel alone. It's about facilitating a peaceful and dignified transition."

"I'm 13, and I didn't think much of it. I'm just there to listen," he added. "I didn't know what this thing was called. I didn't have a name for this thing I was doing – this holding hands, this hugging, this, this... holding of space. It was all intuitive. It was just who I was at the time, who I am."

One day, sitting in Daytona Beach talking to a friend, a hospice nurse, he told her about all of these experiences, and she said, "It sounds to me like you're a death doula."

Walker had never heard the term before. "But it made sense, and it was for me. It was just about trying to make sure that no one felt alone," he said. "As a death doula, I offer emotional support and guidance to those nearing the end of

their life, and those who are navigating these waves of grief. I simply just don't want people to feel alone. It's about facilitating a peaceful and dignified transition."

As a death doula, a lot of the work Walker is doing now is in Black communities. He helps people not only navigate the profound journey of life's conclusion, but also make sense of black grief. "Recently, I was on a plane from South Africa to Morocco, sitting next to a man who asked how black grief was any different from the grief that he, a white man, would experience at the loss of a loved one," Walker said. "And I told him that black grief tends to be more communal. It's more frequent and, more times than not, it's too soon. And though grief is as necessary as it is natural, black folks rarely get enough time to process and fully grieve the death of a loved one, or the death of a thing, before it's time to move on to grieve another. So, in these places where I show up with comfort and joy and compassion and love and empathy, I also show up ready to celebrate life, ready to call names, ready to call in the ancestors and to say, 'I know you said you don't need me, but I'm just outside if you need anything.'"

Walker was halfway through an interview on a podcast when he realized how being a children's television writer and a death doula are intertwined. The interviewer said, "Things seem so disconnected, so have you thought about a theme for all the work you're doing – the death work, the children's writing, the activism, the films and all these things?"

"Honestly, it never crossed my mind," Walker said. "I

hadn't thought about it, and, in that instant, it all came to me. I thought, all the work that I've been doing – the death doula, writing, everything – was all about leading people back to joy and happiness."

"So, deathbeds and writing rooms and both of these jobs, I'm finding ways to bring joy to those who want, need and deserve it," he continued. "I'm creating safe spaces for children and for those at the end of life so they can be fully themselves and vulnerable. I'm creating the space big enough so they can continue to grow. Because as long as we're still alive, why shouldn't we continue to grow?"

"It's about getting to the truth, because then the truth is where I'm able to show children and those at the end of their life what may come. ...I stand here today as a testament that joy knows no boundaries. It is present in the laughter of children and then the serenity of those transitioning. I've discovered the key to bringing joy lies in embracing and honoring every phase of existence and celebrating every stage of life."

Walker shared that at 22, he was diagnosed with a blood-clotting condition. "I stand here as a testament that human experience, like joy, knows no boundaries. Being alive and being aware that we're going to die are the same. So, being a death doula is being a life doula. It's about celebrating every stage of life, and if we truly believe that joy is a human right, then I hope we pay attention to those being able to access it."

Edward J. Defort is editor of NFDA Publications.

Demystifying AI And Its Role in Funeral Service

By Edward J. Defort

It's a new day. For many people, the first word they speak when they get up in the morning is either "Siri" or "Alexa." Every car has a navigation system that gets you from point A to point B without ever having to ask for directions.

Because artificial intelligence (AI) has a broad range of practical applications – automation, data analysis, customer service, gaming and more – the topic will often trigger different responses in different people.

AI continues to advance and evolve, driving innovation in numerous applications and impacting our daily lives in various ways. Thus, at his keynote session on the final day of the NFDA International Convention & Expo last September, Dennis Yu, CEO of BlitzMetrics, attempted to demystify AI and discuss its role in the future of funeral service.

To consider that future and how best to market a business



to families, Yu enlisted the assistance of three funeral directors – David Hernandez of Old Bridge, New Jersey; Julia Prout of Verona, New Jersey; and Larnique Mickens of Las Vegas, Nevada – to show how AI can help funeral homes expand their marketing capabilities and drive their business.

"What if we took funeral home owners, from small to large,

and demonstrated what we could practically do with AI so that you could walk away with the action guide of the work being done by these young adults?" Yu queried attendees.

The opinions people have about AI are driven by Hollywood movies, he said. In real life, he noted, AI is still in the early stages, and there is a lot of hype, a lot of misconceptions and misuse, of the technology.

Yu asked his funeral director panel what people were saying about AI. "Well, I know there are the avatars, and that can be a little frightening to people," said Prout. "There has been a lot of talk about recreating a deceased loved one and interacting with them. And one of the questions the industry would face is – is that really helping someone or are they prolonging their grief?"

Yu noted that in preparation for his presentation, he interviewed some of the top AI people in the world and shared the number-one tip they had about the people who are winning in AI. "It's that they are human," Yu said. "They start from the humanity. It's not technology and engineering, it's whoever is the most human."

To make that point, he demonstrated some AI functions. In one clip, it was Yu's face wishing someone a happy birthday – but nobody thought it was really him. "It's my face, the lips are moving, but the AI's not ready," he said. "What you really need to do to succeed with AI is start with things that are real now. Do you really want to have an AI-generated avatar representing you in your community? [That technology] is not ready."

"Some people are afraid of video, and we're going to talk about how to overcome that," Yu continued. "When you share your stories and you put them out there, you show the humanity. People have this preconception of what funeral homes are, and we're going to change that by using social media and digital AI to increase our humanity."

Yu described this as "generative AI," which is about taking what you have, the seed of something real, and being able to modify it in different ways. The mechanism of how AI can practically work in funeral service is a four-stage model he called the "Content Factory." The steps are:

- *Produce:* Zoom calls, podcasts, social media posts, speaking, iCloud photos, design style guide
- *Process:* Description, social snippets, content library
- *Publish:* YouTube, Facebook, company website, social channels
- *Promote:* Thank-you machine, dollar-a-day ads.

"You're producing content; this is the reality," stated Yu, who noted that he could record video of the three funeral directors with him on stage and share their experiences and post it to Facebook, Twitter, Instagram right from a smartphone. When you have all this stuff, now you have the raw ingredients," he said. "The raw ingredients can then be processed, and this is where AI tools come in."

"AI tools being used by young adults in a smart process will overturn most people in the world of marketing who

think they're professionals in digital marketing," Yu continued. "We coach 2,000 digital agencies on this, and they are getting disrupted because you can do this off your iPhone. And all these AI tools we're using today are not the tools you're going to use six months from now because, every day, these tools are being replaced and getting better and better."

"When the videos get processed, then they can be published to your Facebook, Twitter, YouTube, TikTok, Snapchat, Instagram, LinkedIn – all these places," he added. "And that's how you dominate in digital marketing. You send that signal to Google so that you can rank on whatever keywords you want. The work is being done by those networks. That's the future of marketing. It's not about social media and influencers and singing and dancing – it's about getting your stories out there."

As for the last part – promoting – it's investing a dollar a day on Facebook or YouTube. "Every single social channel has got the AI built into it," he said.

Yu next presented videos by the three funeral director panelists to illustrate his point. The video he produced at Mickens' funeral home describes how to present a life celebration for a loved one. "In our mortuary, we have this playroom set up so that you can see how to establish a celebration of life," said Mickens. "When you're grieving, you don't know how to express a celebration for your loved one. So, we set up that display room to show how you can celebrate your loved ones if they have a musical interest."

When you share your stories and put them out there, you show humanity. We will use social media and AI to increase our humanity.

As for the tech crew and equipment, Mickens' son, Skylar, filmed his mother using an iPhone. "Capture moments – short little cellphone videos – and post them on the ultimate AI tool, Google," Yu said. "AI is not this futuristic robot; it is right here, it is practical. You are using it every day when you Google something. That's the AI. It's not the scary thing."

When Yu used Google to search "green burials in Verona, New Jersey," the top response was Prout Funeral Home. That is generative AI. Below that, Google highlights "People Also Ask," which is basically an FAQ about green burials.

"These are additional questions that share expertise on the same topic but give you... multiple angles, so you can kind of broaden your scope," Yu said. "It's basically a whole process of giving you questions that can be their own videos because people are already searching for your services. They're already searching for these additional ideas, but you don't have them represented on your site. It's related to what you already have, but it's not exactly going to pull up your site for

these different searches. You want to have... a broad scope to generalize the different aspects.”

Yu shared that Google is about to integrate Bard.google.com [Google’s AI tool] into regular Google. So, he asked Bard, “What can you tell me about Prout Funeral Home?”

Bard responded, “Prout Funeral Home is a family-owned business [and] here are some of the services they have.”

“Google is pulling all this from our content – what we’ve been putting up and what’s already online about us,” explained Prout. “We went through the process where people Googled ‘green funerals’ and then people also asked [other] questions, so we just started shooting videos answering those questions honestly, authentically. We put those videos on our website, we put them on Facebook and on Instagram, and then started to boost them.”

Yu reminded attendees that it makes a difference with consumers when a third-party is recommending a business rather than the business talking about itself.

“We take these videos and create articles,” Yu said. “It’s also a big thing to be able to promote articles and different things because the articles are a little bit more in-depth. Articles send more signals to Google for these different things to be picked up and ranked.”

Answer [consumer] questions in video and process them using AI tools. Put them on YouTube and the different social media sites [and] it starts to affect your search results.

Prout pointed out that the videos taken with her dad in front of the sustainable options in the funeral home’s showroom were shot on one of their busiest days. “We had people coming in, walk-ins, funerals, we had construction going on,” she shared. “And I said to my dad, let’s just do one video, we have to get them something, and we just got on a roll and in 15 minutes, we had maybe 10 videos to send.”

One-minute videos are the optimal length. “I think you can definitely get the message across in a one-minute video,” said Prout. “You’re going to lose people [if it’s too long], but it definitely grabs people’s attention.”

Regarding feedback she’s received from her community, Prout said she has had people comment to her on the various videos, saying, “I saw that video of you and the dog” or “I saw that video of your dad... can you tell me more about what he was talking about?”

“That’s a lot nicer than people coming up and saying, ‘So, how’s business?’” she said. “People are actually engaged.

They’ve seen that content, and they want to learn more.”

Yu asked Prout about the business impact she’s seen so far. “Well, honestly, as soon as we put out the first video on Facebook, we started getting messages from our website, our contact form, people saying, ‘I want to know more about natural burial.’” New Jersey-based Prout has also received inquiries from as far away as California asking for information about natural burial in their own area. “Of course, we’re willing to help them,” she said.

Prout also mentioned that her father was slated to be interviewed by a Fox TV station in New York City, New York, and Yu asked about what the firm planned to do with the newsclip. “We’re going to relink everything back to the website,” she said. “The backlinks back to the website will help improve our SEO [search engine optimization]. I am very driven in this now that I’ve seen how easy it is. Anybody who knows me personally knows I tend to keep a low social-media profile, so that was definitely a fear coming into this. But now I know I have that drive. This was a really fun process, and I want to partner with other people and do some cross-posting to boost that SEO.”

While Yu noted that not many funeral homes are making videos about these various topics, “Video is an incredible place to rank because there’s no competition,” he said. “If we go to some websites, it’s just going to be blocks of text about cemeteries and urns – just not very much information – like a brochure from 20 years ago that got copied to the internet.”

“Answer [consumer] questions in video and process them using AI tools,” he added. “Put it on YouTube and the different social media sites [and] it starts to affect the search results. That’s SEO. There is nothing magical about SEO – it’s this simple.”

In his research, Yu also looked at Old Bridge, New Jersey, where Hernandez operates Old Bridge Funeral Home, one of 11 Jersey Memorial Group properties. He did a search of funeral services in Old Bridge and what was missing on the results page was video. Video might have triggered a “full-knowledge panel,” which is an information box that appears on Google when people search for people, places, organizations or other things. A knowledge panel includes a bio, social profiles, videos and common questions. “All the search results are going to start to look like this,” Yu said.

“When you produce content, Google doesn’t want to show you just web pages,” he explained. “They want to show you the complete answer and... a consolidated answer, and not make you have to look at 10 different things because AI has trained people to be lazy and get this simple answer,” Yu said.

“You have to make it so that when people are searching for the things you want – Old Bridge, funeral home, mortuary, cemetery, whatever it is – you have so much corroborating evidence from so many different angles that it generates a knowledge panel,” he added. A knowledge panel is the result of Google’s processing of the knowledge graph, which is a big database. Content can live in many places – and make sure you promote it.

So, why would anyone want to pay Google and Facebook

money? “To get more leads, more phone calls, more bookings, more people coming to the business,” Yu said. “The big thing is generating revenue for the business and to provide impact.”

“When you put content out there through the first three phases of the content factory, if you don’t promote it, nothing’s being seen,” he continued. “I’ve looked at so many funeral homes, and they’re basically invisible on the internet. They might have web pages, but those pages aren’t showing up. Someone’s posting dutifully on Twitter and Instagram, whatever you’re supposed to do, but there’s no traffic.”

“When you promote these posts on Facebook, YouTube, Instagram, and people actually engage – they stay for 15-plus seconds – that sends a signal to YouTube, Facebook, Google,” explained Yu. “It’s not just that ‘I’m getting lots of views for the sake of it; I’m actually engaging. People are actually liking and commenting. They’re staying to watch. That sends a really strong signal and that impacts your search results.”

Paying to promote these posts would impact search results but only if the content is engaging. If it isn’t and it’s made by people who are not the recognized experts, then it won’t work. “You can’t just throw money at it,” cautioned Yu, “but if it’s good content, you amplify it [until] that signal is being picked up by the search engines – and that’s the number-one signal we’re seeing right now for the people who do SEO.”

Prout said that when she looked back at the videos her firm produced that resonated with consumers, they were the videos in which her father just had really raw moments talking about natural burials and/or greener funerals and how to make a more sustainable funeral.

“And at the end, he just says there’s really no right or wrong; it’s what’s going to suit your needs and your family’s needs,” she said. “I looked at the comments on that video, too, and people were just saying ‘Yes, that really spoke to me.’ Being authentic and real – that definitely resonates with people.”

Yu then presented videos of candid moments with Mickens and her son, which were genuine conversations that really couldn’t be scripted. “People see you; they feel like they know you,” he said.

“When that connection is made and there’s higher engagement because of these videos, Google and Facebook and these other networks pick that up [and] that creates a ranking signal,” Yu added. “If you understand strategically that it’s about sharing your story and collecting stories of other people and honoring them, that’s the future.”

“The people who are going to win with AI are the ones who adopt the humanity first. AI is there to help you process it. It takes people who are empathetic, like Larnique, and have these stories. AI is there to put their vibe out. That content – your relationships, your vibe, your reviews, your reputation – is really the thing that drives your marketing.”

In discussing his videos, Hernandez said funeral directors forget that they are known in their communities. “We’re the expert in our community, so when we speak, the community listens and it validates who we are, validates our credentials and ultimately our firm,” he said. “If you’re just sitting back in your funeral home and waiting for those services, and

then dialoguing with the families, that’s fine, that’s what we do. But for them to see us in a different way – to see us not during a service, not driving a hearse, not at a graveside service – it is really powerful. And when we posted those videos, I was getting text messages and responses right there on the social media platforms; we saw the response instantly.”

The lesson here, suggests Hernandez, is that, “You’re not going to eat the elephant in one bite. Grab your cellphone, get a colleague, get someone on staff and just talk about something you’re comfortable with. And if you have to do a couple takes, take a couple takes and then post it. This content factory is really simple steps.”

He also suggested that if a firm has an up-and-coming director, someone on staff who’s charismatic or someone you really want to start getting out in the community, then put them in a one-minute video. “It’s a low-risk thing to get them out in the community and start letting your community see someone, maybe besides yourself or your manager all the time,” he said.

Mickens agreed. “This is a great way for you to introduce your team to the community. Not only that, but this is also a great way for you to answer all those frequently asked questions... to rate yourself as the best mortuary and to put yourself as number one without spending all of those dollars. Even though you may be a large firm and you may have those dollars to spend, you may use those in other areas of your businesses,” she said.

In recalling her experience at the NFDA Future’s Forum last May, Mickens said one thing that was frequently talked about was how to build resilience to the challenges the funeral industry faces and how to meet those challenges head-on. “I think of all the different solutions we listed, it gets down to you can’t be afraid to fail, you can’t be afraid to take risk or to take a step outside your comfort zone,” she said. “This is an amazing first step outside of that comfort zone because it is a guided process. Maybe you have some apprehension, some fears, but if you just follow the steps, then it’s going to be a very rich and rewarding experience.”

Mickens also suggested developing a plan, now, so the industry doesn’t get caught flat-footed as when COVID-19 struck and businesses were forced to change. “AI is coming. It’s also helping to make our businesses a lot more efficient and effective,” said Mickens.

Hernandez added another benefit of producing these videos. He saw the outtakes and how the staff was getting nervous that they were flubbing their words. “[But] the team kind of came together during the video sessions,” he said. “We were laughing and joking. We did a quick coffee break, came back and everyone’s taking pictures, and it was just really neat to see the team come together, and then they were encouraging the speaker. It could be a really neat team project for your staff to come together on something that’s ultimately helping your firm.”

Edward J. Defort is editor of NFDA Publications.

Avoiding the Forks in the Road Of End-of-Life Care

By Edward J. Defort

The old saying that no man is an island couldn't be more true today when discussing end-of-life care. Funeral service professionals are obviously quite familiar with end-of-life care options, but the public at large is not likely fully informed about its potential choices.

While the sphere of funeral service has been contracting, the sphere of end-of-life care has been expanding. Developing relationships and partnerships with other end-of-life care providers is essential as consumers continue to shuffle the deck when it comes to their final wishes.

The primary goal of end-of-life care is to enhance the quality of life for patients and their families by addressing their physical, emotional and spiritual needs with care and dignity. Emotional and psychological support is a key aspect of end-of-life care, which recognizes the emotional challenges faced by patients and their loved ones. It provides counseling, therapy and support groups to help individuals cope with the fear, anxiety, grief and other emotional aspects of the end-of-life journey.

End-of-life care also extends beyond the patient's health-care, as well as death, to support the grieving process of family members, which includes the memorialization of their loved one. Bereavement services might include counseling, support groups and other resources to assist individuals through the mourning and healing process.

Each person's end-of-life journey is unique, and the care provided is tailored to meet their specific needs and wishes. The aim is to offer compassionate support and dignity, allowing patients to live as comfortably and meaningfully as possible during their final stages of life.

For the longest time, there was a clear and distinct separation between funeral service and end-of-life care provid-



ers, such as hospice care. In recent years, both funeral service and hospice care have been able to find common ground in serving families. It is these types of relationships that develop and enhance a new continuum of care. The clear goal of all end-of-life care providers is to be prepared and be engaged.

To discuss the evolving end-of-life care dynamic, we spoke with the authors of

Engaging the Heart of Hospice: Making Funeral and Memorial Services an Extension of Hospice Care, a new book for funeral service professionals that illuminates the compassionate world of hospice care. Lacy Robinson and Greg Grabowski have been involved with funeral service and hospice, respectively, for a quarter century. Together, they offer their perspectives on

how hospice care can provide solace, dignity and compassion during life's most vulnerable moments and illustrate the deep connections fostered between patients and caregivers.

Thank you both for your time. Could you talk about your respective backgrounds and experiences in the end-of-life-care continuum?

Robinson: For nearly 20 years, I have created and facilitated customer service workshops. Five years into that is when funeral directors started sharing with me their challenges in connecting with local hospice providers. That's when collaborating with Greg Grabowski and major hospice providers began.

I also became a volunteer with Hosparus Health in Lou-

isville, Kentucky, which has allowed me to interact closely with patients and hospice care team members.

The insights I continue to gain from my volunteer experiences help me create engaging and impactful programs focused on funeral homes building a trusting partnership with hospice providers. My hospice experiences kept tugging at my heart, which prompted me to write *Engaging the Heart of Hospice* with Greg.

Grabowski: I have been working in the hospice field for over 25 years and have become very passionate that every person, and their family, has a unique end-of-life journey. From my perspective, we need to create a more interconnected and seamless continuum of care that can significantly enhance the end-of-life journey for individuals and their families.

Hospice has taught me that empathy and support for patients and their families are paramount in dealing with significant end-of-life challenges and barriers. We need to foster more-effective strategies and initiatives to create more collaboration among all organizations and professions in your end-of-life field.

For years, there seemed to have been clear lines drawn to separate funeral service from hospice. From each of your perspectives, how would you describe the evolution of the relationship between funeral directors and hospice over the past decade or so?

Robinson: Funeral directors have always been aware of the strong relationships between hospice care team members and families, but collaboration and engagement between hospice and funeral directors have not always been present. There has been a renewed interest on behalf of funeral directors to create an open dialogue with hospice and discuss their shared commitment to serve families.

As funeral homes have expanded their service offerings, updated their gathering spaces, worked to debunk misconceptions about funeral service, and looked for ways to be a part of the death-positive movement, they want to learn more from Greg and me about the best ways to support hospice.

Grabowski: True collaboration and creating a seamless transition for families have a long way to go. Collaboration between hospices and funeral homes can indeed greatly benefit patients and their families by ensuring a smoother transition and continuity of support during the end-of-life journey. Creating a bridge between hospices and funeral homes should be the goal.

In fairness to both hospice and funeral homes, it is an equal, two-way street, and while there are examples around the country of great collaboration, on the whole, this is not

what I/we see. We see disconnected care, and the hard part is that the family has shared and experienced so much with the different providers. For them not to share the history, preferences and the family's values limits each provider down the care line.

Is there still resistance in the hospice and funeral service communities about building these relationships with each other?

Robinson: The resistance toward hospice providers is still present in the funeral service community, but it is not directed toward the entire hospice industry. That resistance is usually a result of perceived ethical concerns with one hospice provider, or one hospice care team member.

Overall, hospice is viewed positively by funeral service professionals. Not only have funeral directors served many families whose loved ones received hospice care, but they also know someone personally, either a friend or close family member, who received hospice care. This has led to an increased understanding of the holistic approach to end-of-life care that families desire and how hospice helps to meet those needs.

Resistance comes from preset boundaries. Funeral service and hospice have operated independently, each with its own set of responsibilities, practices and preconceived notions of the other.

Grabowski: As a consultant, I see resistance in many fields when it comes to changing established practices or forming new collaborations. In the case of hospice and funeral services, resistance comes from preset boundaries. Funeral service and hospice have operated independently, each with its own set of responsibilities, practices and preconceived notions of the another.

As Lacy pointed out, there might be concerns about potential conflicts of interest or ethical considerations when hospices collaborate closely with funeral service. Hospice markets upstream to healthcare providers to seek collaboration and see no reason why funeral homes should not do the same. Some professionals in these fields do not fully understand the benefits of collaboration.

Despite these potential hurdles, however, there's a growing recognition of the benefits that can arise from closer cooperation between hospice and funeral services. Many professionals are increasingly open to exploring new ways to enhance the end-of-life journey for individuals and families. Slowly but steadily, as more success stories and best practices emerge from collaborative efforts, resistance tends to diminish, paving the way for more integrated-care approaches.

Is this relationship heading in the right direction, or is it heading where it needs to be?

Robinson: The relationship between hospice providers and funeral homes has been evolving positively and is certainly headed in the right direction. There are still tremendous opportunities for funeral directors to bridge the gaps and foster a more collaborative approach with their local hospice providers.

Those funeral homes that have been proactive in more personalized life-tribute events and contemporary memorials for families, or have implemented online arrangement tools or also addressed the challenging financial situations families face, are all of interest to hospice. Funeral homes are now in a great position to get the attention of hospice care team members and create an open dialogue.

Grabowski: While progress has been made in recognizing the potential benefits of collaboration, it is still in its early stages. It is still an evolving landscape, and it gets complicated by monetization. At the end of the day, folks need to get paid and don't necessarily have time to understand and build relationships.

In fairness to both hospice and funeral homes, it is an equal, two-way street, and while there are examples around the country of great collaborations, on the whole, this is not what we see. We see disconnected care...

I am not faulting this, but both parties need to go back and focus on the patient and family's whole end-of-life experience. Achieving the level of integration and collaboration necessary for optimal support is an ongoing process,

for sure. Continuous advocacy, education and the sharing of success stories will likely contribute to steering this relationship toward where it needs to be – a well-integrated, supportive continuum of care that seamlessly guides individuals and their families through the end-of-life journey and beyond.

Greg, how do you see funeral service's role in the continuum of end-of-life care developing?

Grabowski: Funeral service providers are going to have to be more aggressive in wanting to build real relationships and truly understand each hospice provider in their community. From this, they can build service connections based on value for both parties, and hospice patients and their families.

It just makes sense that funeral directors reach forward in the continuum-of-care model, just like hospice reached out to health providers and other market segments. The funeral director's role needs to be operationally integrated with hospice, with both parties working together to support families with robust grief programming.

Lacy, how do you see hospice's role in the continuum of end-of-life care developing?

Robinson: As the death-positive movement engages more people, the mission of hospice will always be a topic of conversation. Hospice's role will continue to be influenced by what society says it wants regarding its end-of-life needs.

And hospice providers have demonstrated they can give the personalized end-of-life experiences people want. In addition to that, the advancements in healthcare technology will enable hospice and palliative care providers to expand their services and care for more patients and families.

How do you see the end-of-life continuum of care being defined now? In 10 years?

Robinson: Currently, the end-of-life continuum of care is more focused on the physical, emotional and spiritual needs of terminally ill individuals and their families. There is acknowledgment and understanding of the importance of funeral planning, but necessary action to complete those plans is not taking place.

It appears that funeral homes are sandwiched between the hospice care of the patient and providing bereavement care to families. The potential for that to change in 10 years is there, meaning hospice's view of funeral providers will

be less focused on disposition and more on ceremony and ritual.

Grabowski: I hope that 10 years from now, we will see innovation in the care model between the two industries. The quality of care provided by all providers will be very public and available online, so this will help the quality companies stand out.

Consumers will continue to want more and more meaningful end-of-life experiences and very personal celebrations of life. Even with consolidation within our industries, the voice of what patients and families want and need will determine the success of hospices and funeral homes in the future.

The possible threat to all of this for hospice is the looming and unknown with Medicare Advantage insurance plans taking over hospice reimbursement.

How can these relationships be developed to assure mutual trust and respect?

Grabowski: When a funeral provider strives to create a meaningful partnership, there is a foundation of trust, then relationships build, and mutual value develops. Hospice wants to feel confident and assured that its families are going to receive the same high level of care from funeral homes.

Continuous advocacy, education and the sharing of success stories will likely contribute to steering this relationship toward where it needs to be – a well-integrated, supportive continuum of care.

Eventually, hospice needs to get comfortable with the concept that end-of-life care does not end with hospice, and funeral service needs to do a much better job of wanting to be part of the end-of-life care community.

We see a lot of people within both industries that have task-force groups, consortiums, conferences and other work groups talking about end-of-life care, but nothing that I know of that is substantial that includes both hospice and funeral. We want our society to be more comfortable with talking about death, memorialization, what one's legacy will

be, and feelings of grief. This presents numerous opportunities for two major industries to collaborate. Since the emphasis for both, especially hospice, is marketing upstream, the opportunities will be for funeral providers to integrate their hospice initiatives through community outreach.

What is the gap in consumer education and how would these two entities fill those gaps?

Robinson: If families view the funeral as an afterthought, or are uncertain of which funeral home will best fit their needs, hospice is in the position to discuss the purpose of a funeral or memorial and the important role a funeral director plays during the planning process. When those meaningful and informative conversations take place between the hospice care team member and the family, it elevates the value that hospice provides.

Cost transparency and alternative options to a traditional funeral are two other topics of conversation that funeral homes can provide information on to hospice providers.

What types of community education should take place as both funeral service and hospice have changed over the years?

Robinson: Consumer surveys reveal that people are not attending educational events sponsored by funeral homes. It might be that these events are not publicized well, simply not offered in their community, or the taboo of talking about death is strong.

Alternatively, hospice is great at planning successful community events. Their challenges are time, resources and recruiting volunteers to assist. Hospice also must work hard to overcome the uncomfortable feeling people have when discussing death.

Partnering together to plan meaningful and memorable community outreach programs is the key. Representatives from the hospice provider and the funeral home need to be seen together in public. Whether at a senior expo, speaking to a community group or planning a community remembrance event, when both entities are together, it sends the message that both share a commitment and dedication to helping families discuss their end-of-life preferences.

Our book, *Engaging the Heart of Hospice*, goes into more detail on these diverse ideas and invaluable resources for community outreach.

Edward J. Defort is editor of NFDA Publications.

Editor's note: Engaging the Heart of Hospice is available at hospiceadvisors.com.



Critical Workplace Skills

By William E. Ford

As you embark on your career, know this: thinking critically, solving problems, innovating and collaborating are highly valued at every level within an organization.

More than half of polled executives, however, said there is significant room for improvement in these competencies among their employees, according to a recent survey by the American Management Association.

According to the survey results, a majority of respondents said that the “Four Cs” (detailed below) have been articulated within their organizations as priorities for employee development, talent management and succession planning.

Furthermore, a majority agreed that their employees are measured in these skills during annual performance appraisals and that job applicants are assessed in these areas during the hiring process.

THE “FOUR CS” DEFINED

1. CRITICAL THINKING AND PROBLEM SOLVING

The ability to make decisions, solve problems and take action, as appropriate.

2. EFFECTIVE COMMUNICATION

The ability to synthesize and convey ideas in both written and oral format.

3. COLLABORATION AND TEAM BUILDING

The ability to work effectively with others, including those from diverse groups and those with opposing points of view.

4. CREATIVITY AND INNOVATION

The ability to see what is not there and make something happen.

Three out of four survey respondents said they believe these skills and competencies will become more important to their organizations in the next three to five years, and they offered the following reasons:

- The pace of change in business
- The nature of how work is accomplished today
- The way work is structured

The survey also revealed that the polled managers and executives believe it is easier to develop these skills in students and recent graduates (59.1%) than it is to develop them in experienced workers (27.1%). This suggests that students and recent graduates might be more open to new ideas than experienced workers with established work patterns and habits.

Respondents identified mentoring and in-house job training as the most effective methods to improve employees’ skill levels in these areas, followed by one-on-one coaching, job rotation and professional development.

William E. Ford is president and CEO of SESCO Management Consultants in Bristol, Tennessee. SESCO is an NFDA-endorsed provider for human resources.

From the Editor's Desk

Me, Too

One conversation I hear often when talking about funeral service is the importance of teaching those new to the workplace how to engage families seeking cremation services and educate them about what is available. And since the majority of services now involve cremation, it's an important conversation to have.

Of course, for such an equation to work, families will want to hear the things you are saying to them but then relay their perspective. These conversations can be the difference between a memorable event and looking back through the lens of 20/20 hindsight and talking about what should have been different.

A friend once shared with me the story of the death of her friend's mother. The death was not unexpected as the woman was well into her 90s and had been in deteriorating health for weeks. I don't speak often with this friend, but she is the kind of person you won't see or hear from for a year, and when she does surface, she recalls all the events that have happened in her life in great detail – in a virtual tidal wave of words.

Her friend was the only child who lived locally, and the hospice nurse advised her to call her siblings to come since her mother's prognosis was not good.

I learned that two funeral homes were called and that the family did go with the lower-cost option. I pretty much knew then what the rest of the story would be, and I was right.

One thing that stood out was when she related that her friend's family was deeply impressed when they called the funeral home at 1:00 in the morning and the next thing they knew two men from the funeral home arrived in full dress suits. That detail really seemed to resonate with the family.

I asked my friend if the disposition was a burial or cremation. She said it was a cremation and that her friend's mother would have an urn identical to her husband, who passed away many years ago.

Given that it was a cremation, I asked about the kind of service they had. I'd already predicted that there would be no service given the way the price aspect was mentioned. Sure enough, she told me there was indeed no service. It seems that when the woman's husband died, there was some kind of a visitation, but the woman was adamant that she didn't want "anything like that."

I must have made a remark like, "Oh, that's too bad," which caused my friend to ramp up the questions.

"What do you mean?" she asked. I shared with her my beliefs on the value of visitation, of saying goodbye and allowing other people, both close and distant to the deceased, to share memories with the family.

She said that at age 90, her friend's mother had outlived almost all of her friends and there wouldn't be that many people who would come.

Other things could have been done, I offered, such as a private visitation for just the family. After all, the grandchildren and great-grandchildren hadn't seen the woman for some time, and it would have been good to hear all the stories that were never told.

After a long discussion, my friend turned to me and said, "I wish I knew we could have done those things for the family."

The only thing I could say was, "Me, too."

Ed - Edward J. Defort
- Editor

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