

## Taking Care of YOU: Self-Care for Family Caregivers

# Montgomery HOSPICE

### First, Care for Yourself

On an airplane, an oxygen mask descends in front of you. What do you do? As we all know, the first rule is to put on your own oxygen mask before you assist anyone else. Only when we first help ourselves can we effectively help others. Caring for yourself is one of the most important—and one of the most often forgotten—things you can do as a caregiver. When your needs are taken care of, the person you care for will benefit, too.

### Effects of Caregiving on Health and Well Being

We hear this often: “My husband is the person with Alzheimer’s, but now I’m the one in the hospital!” Such a situation is all too common. Researchers know a lot about the effects of caregiving on health and well being. For example, if you are a caregiving spouse between the ages of 66 and 96 and are experiencing mental or emotional strain, you have a risk of dying that is 63 percent higher than that of people your age who are not caregivers.<sup>1</sup> The combination of loss, prolonged stress, the physical demands of caregiving, and the biological vulnerabilities that come with age place you at risk for significant health problems as well as an earlier death.

Older caregivers are not the only ones who put their health and well being at risk. If you are a baby boomer who has assumed a caregiver role for your parents while simultaneously juggling work and raising adolescent children, you face an increased risk for depression, chronic illness and a possible decline in quality of life.

But despite these risks, family caregivers of any age are less likely than non-caregivers to practice preventive healthcare and self-care behavior. Regardless of age, sex, and race and ethnicity, caregivers report problems attending to their own health and well-being while managing caregiving responsibilities. They report:

- sleep deprivation
- poor eating habits
- failure to exercise
- failure to stay in bed when ill
- postponement of or failure to make medical appointments for themselves



Family caregivers are also at increased risk for depression and excessive use of alcohol, tobacco and other drugs. Caregiving can be an emotional roller coaster. On the one hand, caring for your family member demonstrates love and commitment and can be a very rewarding personal experience. On the other hand, exhaustion, worry, inadequate resources and continuous care demands are enormously stressful. Caregivers are more likely to have a chronic illness than are non-caregivers, namely high cholesterol, high blood pressure and a tendency to be overweight. Studies show that an estimated 46 percent to 59 percent of caregivers are clinically depressed.

### Taking Responsibility for Your Own Care

You cannot stop the impact of a chronic or progressive illness or a debilitating injury on someone for whom you care. But there is a great deal that you can do to take responsibility for your personal well being and to get your own needs met.

### Identifying Personal Barriers

Many times, attitudes and beliefs form personal barriers that stand in the way of caring for yourself. Not taking care of yourself may be a lifelong pattern, with taking care of others an easier option. However, as a family caregiver you must ask yourself, “What good will I be to the person I care for if I become ill? If I die?” Breaking old patterns and overcoming obstacles is not an easy proposition, but it can be done—regardless of your age or situation. The first task in removing personal barriers to self-care is to identify what is in your way. For example:

- Do you think you are being selfish if you put your needs first?
- Is it frightening to think of your own needs? What is the fear about?
- Do you have trouble asking for what you need? Do you feel inadequate if you ask for help?
- Do you feel you have to prove that you are worthy of the care recipient’s affection? Do you do too much as a result?

Sometimes caregivers have misconceptions that increase their stress and get in the way of good self-care. Here are some of the most commonly expressed:

- I am responsible for my parent’s health.
- If I don’t do it, no one will.
- If I do it right, I will get the love, attention, and respect I deserve.
- Our family always takes care of their own
- I promised my father I would always take care of my mother

“I never do anything right,” or “There’s no way I could find the time to exercise” are examples of



# From Ann's Office

## In Honor of Caregivers

The Random House dictionary defines the word "caregiver" as "a person who cares for someone who is sick or disabled." In a hospice setting, the word is often used for both family caregivers and professional caregivers. Family caregivers are those unpaid family members who work to meet the many day-to-day needs of their loved ones who are living their last weeks and months. Tending to those needs can often be physically and emotionally draining. This issue of Hospice Matters is dedicated to family caregivers, providing information and ideas for them to

use to take care of themselves, for their own sake and the sake of their loved ones.

Montgomery Hospice staff members also are referred to as "caregivers." Our physicians, nurse practitioners, nurses, hospice aides (certified nursing assistants), spiritual counselors and social workers have specialized skills and training that they bring to the caring of our patients. With 300 employees, the majority of whom are clinicians, Montgomery Hospice has a wealth of knowledge and expertise. Individual patients are not aware of all of these staff members because each patient is assigned a "primary care team," which consists of one nurse, one spiritual counselor, one social worker, and one hospice aide. These four professionals visit regularly, and get to know the patients, in order to understand and address their specific physical and psychosocial needs. Each patient receives

personalized care from this small team of "professional caregivers." Self care, such as adequate sleep, is also important for these primary care team professionals. Therefore, in order to provide 24-hour medical support to patients, Montgomery Hospice employs a different set of clinicians who work evenings, nights and weekends.

Although the roles of family caregivers and professional caregivers differ, this quote applies to both: "When you are a caregiver, you know that every day you will touch a life or a life will touch yours." I admire and respect all who are or have been caregivers.

Ann Mitchell  
President & CEO

## Taking Care of YOU *cont. from p. 1*



negative *self-talk*, another possible barrier that can cause unnecessary anxiety. Instead, try positive statements: "I'm good at giving John a bath." "I can exercise for 15 minutes a day." Remember, your mind believes what you tell it.

Because we base our behavior on our thoughts and beliefs, attitudes and misconceptions like those noted above can cause caregivers to continually attempt to do what cannot be done, to control what cannot be controlled. The result is feelings of continued failure and frustration and, often, an inclination to ignore your own needs. Ask yourself what might be getting in your way and keeping you from taking care of yourself.

### **Moving Forward**

Once you've started to identify any personal barriers to good self-care, you can begin to change your behavior, moving forward one small step at a time. Following are some effective tools for self-care that can start you on your way.

#### **Tool #1: Reducing Personal Stress**

How we perceive and respond to an event is a significant factor in how we adjust and cope with it. The stress you feel is not only the result of your caregiving situation but also the result of your perception of it—whether you see the glass as half-full or half-empty. It is important to remember that you are not alone in your experiences.

Your level of stress is influenced by many factors, including the following:

- Whether or not support is available.
- Whether your caregiving is voluntary. If you feel you had no choice in taking on the responsibilities, the chances are greater that you will experience strain, distress, and resentment.
- Your relationship with the care recipient. Sometimes people care for another with the hope of healing a relationship. If healing does not occur, you may feel regret and discouragement.
- Your coping abilities. How you coped with stress in the past predicts how you will cope now. Identify your current coping strengths so that you can build on them.

*cont. on p. 3*

- Your caregiving situation. Some caregiving situations are more stressful than others. For example, caring for a person with dementia is often more stressful than caring for someone with a physical limitation.

### Steps to Managing Stress

- Recognize warning signs early. These might include irritability, sleep problems, and forgetfulness. Know your own warning signs, and act to make changes. Don't wait until you are overwhelmed.
- Identify sources of stress. Ask yourself, "What is causing stress for me?" Sources of stress might be that you have too much to do, family disagreements, feelings of inadequacy, or the inability to say no.
- Identify what you can and cannot change. Remember, we can only change ourselves; we cannot change another person. When you try to change things over which you have no control, you will only increase your sense of frustration. Ask yourself, "What do I have some control over? What can I change?" Even a small change can make a big difference. The challenge we face as caregivers is well expressed in the following words modified from the original Serenity Prayer (attributed to American Theologian, Reinhold Niebuhr): *"God grant me the serenity to accept the things I cannot change, courage to change the things I can, and (the) wisdom to know the difference."*
- Take action. Taking some action to reduce stress gives us back a sense of control. Stress reducers can be simple activities like walking and other forms of exercise, gardening, meditation or having coffee with a friend. Identify some stress reducers that work for you.

### Tool #2: Setting Goals

Setting goals or deciding what you would like to accomplish in the next three to six months is an important tool for taking care of yourself. Here are some sample goals you might set:

- Take a break from caregiving.
- Get help with caregiving tasks like bathing and preparing meals.
- Engage in activities that will make you feel more healthy.
- Goals are generally too big to work on all at once. We are more likely to reach a goal if we break it down into smaller action steps. Once you've set a goal, ask yourself, "What steps do I take to reach my goal?" Make an action plan by deciding which step you will take first, and when. Then get started!

**Example** (Goal and Action Steps):

**Goal:** Feel more healthy.

**Possible action steps:**

- Make an appointment for a physical.
- Take a 1/2-hour break once during the week.
- Walk three times a week for 10 minutes.



### Tool #3: Seeking Solutions

Seeking solutions to difficult situations is, of course, one of the most important tools in caregiving. Once you've identified a problem, taking action to solve it can change the situation and also change your attitude to a more positive one, giving you more confidence in your abilities.

#### Steps for Seeking Solutions

- Identify the problem. Look at the situation with an open mind. The real problem might not be what first comes to mind. For example, you think that the problem is simply that you are tired all the time, when the more basic difficulty is your belief that "no one can care for

John like I can." The problem? Thinking that you have to do everything yourself.

- List possible solutions. One idea is to try a different perspective: "Even though someone else provides help to John in a different way than I do, it can be just as good." Ask a friend to help. Call Family Caregiver Alliance\* and ask about agencies in your area that could help provide care.
- Select one solution from the list. Then try it!
- Evaluate the results. Ask yourself how well your choice worked.
- Try a second solution. If your first idea didn't work, select another. But don't give up on the first; sometimes an idea just needs fine tuning.
- Use other resources. Ask friends, family members and professionals for suggestions.
- If nothing seems to help, accept that the problem may not be solvable now. You can revisit it at another time.

Note: All too often, we jump from step one to step seven and then feel defeated and stuck. Concentrate on keeping an open mind while listing and experimenting with possible solutions.

### Tool #4: Communicating Constructively

Being able to communicate constructively is one of a caregiver's most important tools. When you communicate in ways that are clear, assertive and constructive, you will be heard and get the help and support you need. The box below shows basic guidelines for good communication.

#### Communication Guidelines

- Use "I" messages rather than "you" messages. Saying "I feel angry" rather than "You made me angry" enables you to express your feelings without blaming others or causing them to become defensive.

- Respect the rights and feelings of others. Do not say something that will violate another person's rights or intentionally hurt the person's feelings. Recognize that the other person has the right to express feelings.
- Be clear and specific. Speak directly to the person. Don't hint or hope the person will guess what you need. Other people are not mind readers. When you speak directly about what you need or feel, you are taking the risk that the other person might disagree or say no to your request, but that action also shows respect for the other person's opinion. When both parties speak directly, the chances of reaching understanding are greater.
- Be a good listener. It is the most important aspect of communication.

### **Tool #5: Asking for and Accepting Help**

When people have asked if they can be of help to you, how often have you replied, "Thank you, but I'm fine." Many caregivers don't know how to marshal the goodwill of others and are reluctant to ask for help. You may not wish to "burden" others or admit that you can't handle everything yourself.

Be prepared with a mental list of ways that others could help you. For example, someone could take the person you care for on a 15-minute walk a couple of times a week. Your neighbor could pick up a few things for you at the grocery store. A relative could fill out some insurance papers. When you break down the jobs into very simple tasks, it is easier for people to help. And they do want to help. It is up to you to tell them how.

Help can come from community resources, family, friends and professionals. Ask them. Don't wait until you are overwhelmed and exhausted or your health fails. Reaching out for help when you need it is a sign of personal strength.

#### **Tips on How to Ask**

- Consider the person's special abilities and interests. If you know a friend enjoys cooking but dislikes driving, your chances of getting help improve if you ask for help with meal preparation.
- Resist asking the same person repeatedly. Do you keep asking the same person because she has trouble saying no?
- Pick the best time to make a request. Timing is important. A person who is tired and stressed might not be available to help out. Wait for a better time.
- Prepare a list of things that need doing. The list might include errands, yard work, or a visit with your loved one. Let the "helper" choose what he would like to do.

- Be prepared for hesitance or refusal. It can be upsetting for the caregiver when a person is unable or unwilling to help. But in the long run, it would do more harm to the relationship if the person helps only because he doesn't want to upset you. To the person who seems hesitant, simply say, "Why don't you think about it." Try not to take it personally when a request is turned down. The person is turning down the task, not you. Try not to let a refusal prevent you from asking for help again. The person who refused today may be happy to help at another time.
- Avoid weakening your request. "It's only a thought, but would you consider staying with Grandma while I went to church?" This request sounds like it's not very important to you. Use "I" statements to make specific requests: "I would like to go to church on Sunday. Would you stay with Grandma from 9 a.m. until noon?"

### **Tool #6: Talking to the Physician**

In addition to taking on the household chores, shopping, transportation, and personal care, 37 percent of caregivers also administer medications, injections, and medical treatment to the person for whom they care. Some 77 percent of those caregivers report the need to ask for advice about the medications and medical treatments. The person they usually turn to is their physician.

But while caregivers will discuss their loved one's care with the physician, caregivers seldom talk about their own health, which is equally important. Building a partnership with a physician that addresses the health needs of the care recipient and the caregiver is crucial. The responsibility of this partnership ideally is shared among you, the caregiver, the physician, and other healthcare staff. However, it will often fall to you to be assertive, using good communication skills, to ensure that everyone's needs are met—including your own.

#### **Tips on Communicating with Your Physician**



- Prepare questions ahead of time. Make a list of your most important concerns and problems. Issues you might want to discuss with the physician are changes in symptoms, medications or general health of the care recipient, your own comfort in your caregiving situation, or specific help you need to provide care. The physician only sees a moment in time with the patient. Make sure you let him/her know what your concerns are in the daily care/health of the patient.
- Enlist the help of the nurse. Many caregiving questions relate more to nursing than to medicine. In particular, the nurse can answer questions about various tests and examinations, preparing for surgical procedures, providing personal care, and managing medications at home.

- Make sure your appointment meets your needs. For example, the first appointment in the morning or after lunch is the best time to reduce your waiting time or accommodate numerous questions. When you schedule your appointment, be sure you convey clearly the reasons for your visit so that enough time is allowed.
- Call ahead. Before the appointment, check to see if the doctor is on schedule. Remind the receptionist of special needs when you arrive at the office.
- Take someone with you. A companion can ask questions you feel uncomfortable asking and can help you remember what the physician and nurse said.
- Use assertive communication and “I” messages. Enlist the medical care team as partners in care. Present what you need, what your concerns are, and how the doctor and/or nurse can help. Use specific, clear “I” statements like the following: “I need to know more about the diagnosis; I will feel better prepared for the future if I know what’s in store for me.” Or “I am feeling rundown. I’d like to make an appointment for myself and my husband next week.” Or “I need a way for my mother to sleep at night as I am now exhausted being up every two hours at night with her.”

### Tool #7: Starting to Exercise

You may be reluctant to start exercising, even though you’ve heard it’s one of the healthiest things you can do. Perhaps you think that physical exercise might harm you or that it is only for people who are young and able to do things like jogging. Fortunately, research suggests that you can maintain or at least partly restore endurance, balance, strength and flexibility through everyday physical activities like walking and gardening. Even household chores can improve your health. The key is to increase your physical activity by exercising and using your own muscle power.

Exercise promotes better sleep, reduces tension and depression, and increases energy and alertness. If finding time for exercise is a problem, incorporate it into your daily activity. Perhaps the care recipient can walk or do stretching exercise with you. If necessary, do frequent short exercises instead of those that require large blocks of time. Find activities you enjoy.

Walking, one of the best and easiest exercises, is a great way to get started. Besides its physical benefits, walking helps to reduce psychological tension. Walking 20 minutes a day, three times a week, is very beneficial. If you can’t get away for that long, try to walk for as long as you can on however many days you can. Work walking into your life. Walk around the mall, to the store or a nearby park. Walk around the block with a friend.

### Tool #8: Learning from Our Emotions



It is a strength to recognize when your emotions are controlling you (instead of you controlling your emotions). Our emotions are messages to which we need to listen. They exist for a reason. However negative or painful, our feelings are useful tools for understanding what is happening to us. Even feelings such as guilt, anger and resentment contain important messages. Learn from them, then take appropriate action.

For example, when you cannot enjoy activities you previously enjoyed, and your emotional pain over-shadows all pleasure, it is time to seek treatment for depression—especially if you are having thoughts of suicide. Speaking with your physician is the first step.

Caregiving often involves a range of emotions. Some feelings are more comfortable than others. When you find that your emotions are intense, they might mean the following:

- That you need to make a change in your caregiving situation.
- That you are grieving a loss.
- That you are experiencing increased stress.
- That you need to be assertive and ask for what you need.

### Summing Up

Remember, it is not selfish to focus on your own needs and desires when you are a caregiver—it’s an important part of the job. You are responsible for your own self-care. Focus on the following self-care practices:

- Use stress-reduction techniques, e.g. meditation, prayer, yoga, Tai Chi.
- Attend to your own healthcare needs.
- Get proper rest and nutrition.
- Exercise regularly, if only for 10 minutes at a time.
- Take time off without feeling guilty.
- Enjoy pleasant, nurturing activities, e.g. reading, taking a warm bath.
- Seek and accept the support of others.
- Seek supportive counseling when you need it.
- Identify and acknowledge your feelings, you have a right to ALL of them.
- Change the negative ways you view situations.
- Set goals.

<sup>1</sup> Shultz, Richard and Beach, Scott (1999). *Caregiving as A Risk for Mortality: The Caregiver Health Effects Study*. JAMA, December 15, 1999 - Vol. 282, No.23

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# Corporate Partners

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Montgomery Hospice is grateful to its 2017 Corporate Partners. Donations through our Corporate Partnership program help to underwrite educational programs and other initiatives that inform county residents about our services.

Businesses and organizations interested in becoming a Montgomery Hospice Corporate Partner should contact:

Marlene Bradford, Vice President of Philanthropy  
301 637 1874 mbradford@montgomeryhospice.org

Thank you to the 2017 Corporate Partners listed below.

## Gold Level Partner

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### Family & Nursing Care

Support from Others Can Help You Cope with Grief and Loss. When a loved one is receiving hospice care, having a team in place is vital to staying healthy and preparing for loss. Family & Nursing Care can be an integral part of the team.

Caregivers from Family & Nursing who have previous hospice experience have a better understanding of the importance of pain management and changes in condition such as breathing, alertness, appetite, and mobility, and can report these changes to the hospice team. The Caregivers enable the family to spend quality time with their loved one and reduce the responsibilities of personal care.

A highly-trained, dedicated Client Services Manager (CSM) also serves as a support to the family every step of the way. Unique to Family & Nursing Care, the CSM will help coordinate the in-home Caregivers and stay in regular contact with the family and with hospice. This high level of communication means that the best care possible is given to your family.

Family & Nursing Care has been a long-time supporter of Montgomery Hospice and its mission to “gentle the journey through serious illness and loss with skill and compassion.” Home care is a perfect complement to help ease the burdens of clients and their families and provide them with dignity and comfort throughout their difficult time. As the spouse of a mutual Family & Nursing Care and Montgomery Hospice client expressed, *“From their [Family & Nursing Care’s] responsiveness and flexibility to the high quality, sincerity, and enthusiasm of the caregivers, they helped me and my family navigate this difficult journey with empathy and respect.”*

## Silver Level Partners

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### Metropolitan Shuttle

Metropolitan Shuttle is your #1 provider for charter buses. Our specialists can book buses for your group of any size anywhere in the U.S. and Canada.

Located in the Washington DC metro area, Metropolitan Shuttle has offered safe and reliable transportation to millions of passengers since 2001. We are proud of our track record and have served clients such as Harvard, Walmart and UPS, among many, many others. We’re especially proud of the work we do for the Veterans Affairs, transporting hundreds of our veterans to their doctor’s appointments every day.

Whether you need a minibus across town, charter bus across the country or local transportation for a fun night out on the town, we have buses for you. Metropolitan Shuttle is the bus you can trust!



### Sagel Bloomfield

Located in Rockville, Maryland, Sagel Bloomfield Danzansky Goldberg Funeral Care, Inc., is a family-owned funeral home that brings a rich history of experience, and a 90-year tradition of caring for families from all walks of life. Blending traditional funeral services with contemporary forward-thinking approaches, our funeral home is a proven leader in the profession, and a trusted partner for bereaved families. Our highest quality services, integrity, dedication to customer care, and deep roots in the community are key building blocks of the reputation that local and independent owners Al Bloomfield and Ed Sagel have built across the Washington, D.C. metropolitan area.

Sagel Bloomfield’s customized ‘Fair and Realistic’ approach is fully responsive to the needs and customs of the families it serves. We have a wide variety of services, and have Jewish expertise, as well as knowledgeable licensed non-Jewish staff for our Simplicity Christian Funeral Packages. We can handle advance planning needs, and monument design and installation. We’re truly able to deliver a funeral service of *your choice and your way*.

Along with concern for the community, building strong relationships with organizations like Montgomery Hospice, we also strive to recognize the hard work of all hospice care workers throughout the year with meals, flowers or a simple thank you. For more information on Sagel Bloomfield please visit [www.sagelbloomfield.com](http://www.sagelbloomfield.com).

## Corporate Partners, cont.



### Visiting Angels

Some things are innately beautiful and cannot be improved upon. A bunch of white daisies, a perfectly formed rose, and the smile of a child—none of these can be improved upon. Some things are beautiful because they have been improved upon. And, some things are both innately beautiful in their design and enhanced by their inclusionary nature. The basic premise of Montgomery Hospice, to gentle the journey of those with life-limiting illness, is in itself an awesome, innately beautiful gift to the recipients and their families. The gift is enhanced by partnerships Montgomery Hospice fosters, such as the partnership with Visiting Angels. Visiting Angels works hand-in-hand with Montgomery Hospice staff and volunteers to gently tend the body and spirit of the hospice patient.

For just over 15 years, we have held fast to our principles of quality care for our clients, regardless of any obstacles. We uphold the highest standards of ethics and compassionate care. Our specially screened, licensed and trained caregivers provide assistance with all the tasks of daily living. Visiting Angels provides gifts through services that are often difficult for families and patients themselves. Our can-do spirit and our smiles convey to the family and the client that, at least for the time we are there, they are safe and cared for. Our relationship with Montgomery Hospice is ever growing as we continue to learn from their fine example. We *are* Visiting Angels but no one gentles the journey like Montgomery Hospice.

## We also want to thank:

Thanks to the corporate partners whose logos appear below. They will be featured in the fall edition of this newsletter.



## Circle of Light Society

*The Circle of Light Society recognizes individuals and families who have included Montgomery Hospice in their estate plans through a bequest, trust, insurance policy or other estate-planning vehicle. Individuals interested in joining the Circle of Light Society should contact Marlene Bradford, Vice President of Philanthropy, at 301 637 1874.*



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*Montgomery Hospice also received donations from the following estates:*

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*We are grateful to our Community Partners who have supported Montgomery Hospice with a gift of \$250 or more between September 1, 2016 and January 31, 2017.*

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*Thank you to Robert E. Greenberg, who established the **Lauren Greenberg Care for the Caregivers Fund** in memory of his beloved wife. Mr. Greenberg made this gift to recognize and support the staff at Casey House who lovingly cared for Lauren at the end of her journey. The fund enables events and activities to nurture and re-energize staff members for their professional caregiving responsibilities*

# Memorial and Honorary Gifts

Gifts made "in memory of" may recognize any person, including members of the community or a Montgomery Hospice patient.

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Philip Bennet  
Richard W. Bergmann  
Edgar G. Best  
Viggo A. Blaes  
Marilyn Janeck Blaisdell  
Charles J. Bocklet  
George J. 'Buddy' Bodmer, Jr.  
Carl S. Bokman, Sr.  
Phyllis M. Bokman  
John Christopher Boland  
Alice Mae Bonifant  
John Boon  
David M. Boone  
Dennis F. Boone  
Thea 'Tillie' L. Boone  
Ben Booz  
Philip J. Bosco  
Bob Bosley  
Catherine E. Boulden  
Irving Bowers  
Shirley J. Bowers  
Susan S. Bowers  
Patricia Hamilton Bowery  
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Dr. Roscoe O. Brady  
Martha & Walter Bräutigam  
Angela Briefs

Rita D. Brinley  
Annette B. Bronrott  
Betty Ellen Brown  
Marcia J. Brown  
Sylvia Pope Brown  
John Christopher Bruning  
Dr. Fred W. Buddy  
Enrique Buguna  
Gertrude 'Gertie' Burdoo  
Joe Burdoo  
Barbara G. Burgess  
Donald E. Burke  
Maureen B. Burton  
John Butler  
Sarah F. Carl  
John 'Jack' Carlile  
Matilde A. Carrera  
Mary Christina Carretta  
Herman Carson  
Helen Elizabeth Carter  
Ron Carter  
Patrick F. Catena  
Francis M. Cauley  
Charles Peyton Chambers  
Ines Chaney  
Jane C. Chang  
Barbara A. Chapman  
Eddie Cherven  
Faye Cherven  
Gary Chin  
David Civali  
Elsie 'Scooter' Clarke  
Eleanor B. Cleary  
Carolyn J. Cobb  
Maurice Coja  
Marshal Livingstons Cole  
Jack Orson Collins  
John W. Colston  
Loretta & Ralph Colwell  
Ruth Betty Compart  
Eugene Cooper  
John D. Cooper  
Karl W. Cooper  
Colleen S. Coppersmith  
Frances S. Cornell  
George H. Cornell  
Sydney T. Cornwell  
Alphonse and Annette Cowette  
Elaine C. Crane  
Josephine Quirk Crapanzano  
Dr. Mark Crapanzano  
Michael Francis Crowley  
Claudia Cruzat  
Joanne S. Culler  
Richard T. Culler  
James Aubrey Daniel  
Sue Dao  
Mary Wallace Davidson  
Mary H. Day  
Lou Deadrick  
Carolyn Francis Dean  
Bob Deffinbaugh  
Anthony DeMatteo  
Anna S. Demetro  
Mary DeMulder  
Jane Ann Daniel DePas  
Edna May Regan Devlin  
Albertina H. DeVroom  
Hendrikus D. DeVroom  
Gabriele DiFranco  
Catherine Disque

Elmer J. Disque  
Paula Disque  
John B. Doak  
Bill Dodds  
Janet Doeler  
Richard Doeler  
Donohoe/Walling Family  
Joan Doupe  
Alex Drabkowski  
George R. Dunn, Sr.  
Gerri Cassandra Durham  
Eugene Laurence Dutton  
Thomas Eargle  
Jeff Ebbeson  
Robert J. Eby  
Fred I. Edwards  
Leo John Eger  
Kurt Walter Eigner  
Janine Vegiard Eisold  
John Rolfe Eldridge, Jr.  
James E. Embrey  
Barbara E. Engle  
Larry Engman  
William Michael Lisbon Engram  
John Ennis  
Stanton and Alice Ernst  
Peggy Eshman  
Mary Ann Estey  
The Estrada and Depprer Family  
Gilda S. Evans  
Thomas R. Evans  
Ann M. Faegre  
Belle Fagot  
Elsie May Bonnie Fansler  
Jill Farr  
Robert L. Faust  
John and Rose Favre  
Joanne Feliciano  
Josefina C. Feliciano  
Bill Feller  
Charles J. Ferdock  
Americo Fernandes  
Marian Lee Fields  
Thomas Fields  
Maxine Van Cise Fiely  
Billy Lester Finchman  
Margaret Ann Fink  
John G. Finneran  
Matilda and Joseph Fiorino  
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Murray Follender  
John Gregory Folstrom  
Roger J. Folstrom  
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Jan Forman  
Janice Forman  
MariePaule Former  
Frances Foudin  
Stella A. Foust  
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Robertta Freedman  
Gilbert J. Frey Sr.  
Katy Frey  
Grey H. Froelich  
Louise E. Froelich  
Richard W. Froelich  
Ella F. Fuller  
Harry M. Fuller  
Joan R. Fuller  
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Michael P. Ganassa  
Stephen A. Ganassa  
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Evan Finn Gardner  
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Gladys Garoufes  
Kenneth E. Garrison  
Kay Gebhardt  
June Gebicke  
Elizabeth Gelsleichter  
Carole B. Gerber  
Ryna Edele Gerber  
Dr. Raymond Gibbons  
Bob Gilbert  
Pat Gilbert  
Corey K. Gill  
Len Gill  
Corinne C. Gillis  
John H. Gillis  
Cindy Glasser  
George L. Gleason  
Joan and Gerald Goeringer  
Ruth Wolff Goldberg  
Helen Goldthorpe  
Joseph B. Good  
Karen A. Goris  
Thomas J. Gownley, Jr.  
Michael Grace  
Barbara Ellen Graves  
Nikolajs Gravitis  
Clara L. Green  
Todd Louis Green  
Max Greenberg  
Rachel Greenberg  
Edward T. Griffin  
Michael H. Griffin  
Ronald Wesley Griffith  
Ward Willson Griffith  
Charlotte E. Grimes  
Gabi Guaipatin  
Gertrude E. Gutmann  
Joseph D. Gutmann  
Jack Haben  
Daniel J. Hafrey  
John M. Haire  
Eileen Haley  
Jo Anne E. Hall  
Roosevelt E. Hall  
Phyllis Haltermann  
Krishna R. Hamal  
Laura B. Hamilton  
Jane Harkaway  
William Harkaway  
Jeanette Harlow  
Milton Patrick Harlow, Jr.  
S. Henry Harris, Jr.  
Thelma Vauls Harris  
Valerie B. Harris  
Laura Hartle  
Carl Hartzell  
James L. Hartzell  
Kay L. Hartzell  
Glenn Eric Hawkins  
Daniel L. Hayes  
Victor & Fortunée Hazan  
Margaret S. Headlee  
Thomas Hearl  
Richard Joseph Heiman  
Gustav Joseph Heintze, Jr.  
Margaret Henderson

Abelardo Hernando  
Joan Hessey  
Juliana L. Hickerson  
Carroll and Martha Hickman  
Eva R. Hickman  
Kathleen 'Kay' Hicks  
Robert Hicks  
Arlene Claire Hiener  
Ann W. Higgins  
Gregory R. Hinely  
Lawrence A. Hite  
Emma Hixenbaugh  
John Hoak  
Dan Hocker  
Philip A. Holman, Jr.  
David Parker Holt  
James Robert Hopkins  
Lily Hopkins  
Tom, Marie & Tom Horan  
Irwin Hornstein  
Lydia R. Hornstein  
Mafalda M. Houtz  
Michael Howes  
Michael Howes, Jr.  
Michael D. Howes, Sr.  
Bruce Hoyt  
Carol Hudsick  
Carolyn Hudsick  
Charlene Huebl  
Evelyn Huebl  
Merle Huebl  
Thane Huebl  
Loraine Hunt  
Martha Hunt  
James Hunter  
Sofia Hutupas  
Michael H. Hydro  
David J. Hyndman  
Martha S. Hyndman  
Anna L. Iacangelo  
Fernanda M. Iacangelo  
Jerry R. Iacangelo  
James Imperial  
Betty June Ingram  
Ernest O'Neal Ingram, Sr.  
Lena Cooperman Isaacson  
Eleanor D. Iversen  
Larry R. Jackson  
Roland P. Jackson  
W. Peter Janicki  
Wanda J. Janicki  
Betty Jarrard  
James E. Jarrard  
Paul Jarrard  
Deanne D. Jennings  
James E. Jennings  
Thomas L. Jentz  
Jimmy  
Bill and Linda Johnson  
Emery A. Johnson, M.D.  
Denise Jones  
Powell B. Jones  
William J. Jones, Jr.  
Jacob Kanfee  
Elizabeth E. Kangas  
Eleanor P. Karpe  
Sol F. Karpe  
Marion J. Kawata  
Roman Kebede  
Edith Keegin  
Nancy M. Keller

## Tree of Lights, cont.

Donald A. Kelly  
 Martha 'Mardi' Kemp  
 Cinny Kenat-Noe  
 John H. 'Jack' Kenworthy, Jr.  
 Julius J. Kessler  
 Howard E. Kettl  
 Ruth S. Kettl  
 Samuel W. Kidder  
 Eunah Kim  
 Ki Suk Kim  
 Karen Kimmel-Militzer  
 Alice Myers King  
 Christine A. King  
 Walter Allen Kirsch  
 David Kliot  
 Lee Kliot  
 Nathan Kliot  
 Clement Knight  
 Dr. Albin B. Kocialski  
 Helga R. Kohl  
 Karin Kohler  
 James S. Koiner  
 Steven Koiner  
 Frances Koso  
 Betty Mae Kramer  
 Carol L. Kregloh  
 William Grant Kreuzburg  
 Dr. Robert Lawrence Krichmar  
 Frederick J. Kull  
 Frank Kakuzo Kuwamura, Jr.  
 Karen F. Lagnese  
 Cora A. Lamb  
 William A. Langbehn  
 Linda M. Langs  
 Mary Jane Lanier  
 Joette Lantagne  
 Edward Lantz  
 Diane H. Larke  
 Bruce Earl Lavengood  
 Helen Lazar  
 Glen Leaich  
 David Lear  
 Sandra Greenspan Lederman  
 Ethan Carter Lee  
 Lisa Lee  
 Robert E. Lee  
 Paul Lehmann  
 Lewis E. Leiby  
 Marion E. Leiby  
 Gustave Gus Lerman  
 James Hunter Leshner, Jr.  
 Raisa Levin  
 Harold Douglas Michael Lewis  
 Loren Linholm  
 Rochelle 'Shelly' Lipsman  
 Clifford 'Lee' Little  
 Martha N. Liu  
 Al Locktosh  
 Mary Ann Locktosh  
 Helen F. Loftus  
 Rosemarie Long  
 Norman L. Long, Jr.  
 Phil C. Longenecker  
 Teresa S. Lou  
 Kathleen M. Lovendosky  
 Deceased members of the  
 Luczak and Williams Family  
 Kathy Ludwig  
 Judy Lynch  
 Diane L. MacDonald  
 Marjorie M. Mack  
 Tom and Connie Magoon  
 Patrick J. Maiolo  
 Kay Malengo  
 John Mancini  
 Mary R. Mancini  
 Susan M. Mannina  
 Marie Maresca  
 Marie Crutchfield Marino  
 Harvey Marshak  
 Bernadette Marie Marshall  
 Robert N. Marshall  
 Harold T. Martin  
 Heather Martin  
 John Gazzo Martinez  
 Elinor Lin Maruyama  
 Masao Maruyama  
 Marilyn Maruyama-Craw  
 Fuad and Helga Massa  
 Philip Mathieu  
 Herbert L. Mautner

Myra Mautner  
 Mary M. McArdle  
 Anne Rita McCann  
 Margaret McCarthy  
 Martin McCarthy  
 Mary T. McCarthy  
 Cathy Owens McCloskey  
 Maris W. McCloskey  
 Paul W. McCloskey  
 Willie C. McCrae  
 Betty B. McCue  
 Frank A. McCue  
 Harry Ward McCurdy  
 Joan J. McCurdy  
 Stephen 'Boojay' McDaniel  
 Robert P. McDevitt  
 Rosemary S. McDiffett  
 Allyn S. McGinley  
 Irene E. McGowan  
 Elwood Mckee  
 Reta C. McKeever  
 Edwin V. McKenney, Sr.  
 Maxine M. McKenney  
 William and Grace McMahon  
 June McMurry  
 Martin J. McNamara  
 Gary McNeely  
 Leslie & Frances Meil  
 Michael C. Metrione  
 Dorothy C. Meyer  
 Mary 'Gigi' Miller  
 Captain Billy Mills  
 Arthur J. Mitchell  
 Jean Frances Mitchell  
 Joseph Michael Mitchell  
 W. Robert Moccia  
 Irwyn M. Mondschein  
 Henry Mongelli  
 Earl L. Moore  
 Frank Moore  
 Frankie Moore  
 Karen Moore  
 Rob Moore  
 Robert J. Moore  
 Heather Moran  
 Robert Moran  
 Russ Moran  
 Sally Moran  
 Sara Ann Moran  
 Thomas Moran  
 Alice P. Moreland  
 Victor & Florence Moretti  
 Carroll E. Morgan  
 Craig E. Morrill  
 Anita Morris  
 Morris I. Morris  
 Sheila Morrissey  
 Roberta J. 'Bobbi' Moss  
 Patricia A. Mulligan  
 Leafie 'Leatha' B. Mullins  
 N. Erline Munley  
 Timothy C. Murdter  
 Dorothy S. Murphy  
 Jack R. Murphy, Sr.  
 Terence and Martha Murphy  
 Mariko Murray  
 Donald Owen Myers  
 Elana Myers  
 Steve Nachman  
 Sandra Nazelrod  
 Andrew Ellicott Nealley  
 John Nelson  
 Charlotte T. Nettleton  
 Bill Nevin  
 Emmy & Glenn Nevin  
 Bill & Betty Newlen  
 George E. Niedzielko  
 Rachel Joan Niedzielko  
 Brittany R. Nolan  
 Evert Nolde  
 Gary L. Nordan  
 Blaine Novak  
 Yvonne L. Novak  
 Dr. James T. O'Brien  
 Robert A. O'Brien  
 Ann O'Donnell  
 Louis R. Oliver  
 Dr. Suzanne Miers Oliver  
 Helen Olsen  
 Verna J. Opiela  
 Arlene Orechwa

Olga Orechwa  
 Louis M. Orenberg  
 Tillie Orenberg  
 Mary Ann Bogucki Ostrowski  
 Helene Oswald  
 Ted Otani  
 Teressa LaJune Davis Palmer  
 Deceased members of the  
 Palmeri Family  
 Rosella 'Angie' Panzone  
 Ana Luisa G. Paraud  
 Donna Parker  
 Cephas T. Patch  
 Donald E. Payne  
 Marion S. Peake  
 Ken Peifer  
 Roseanne Penedo  
 Peter G. Perry  
 Timothy L. Perry  
 Anna Petryszak  
 Frank Petryszak  
 Mark L. Peyton, Sr.  
 Rose Mary Hogan Pibbs  
 Harry E. Phillips, CDR USN (Ret.)  
 Jacqui B. Phillips  
 Tom Pickrel  
 Chester V. Piczak  
 Ann T. Piety  
 Charles Pinkerton, Jr.  
 Samuele Pistacchio  
 Cynthia A. Pollnow  
 Bill Porter  
 Paula A. Present  
 Alberta C. Preston  
 Joyce Frances Prill  
 Steven Thomas Puglia  
 Carol Anne Puglise  
 Deceased members of the  
 Raabe and Sandberg Family  
 Jacob and Leah Rabinovich  
 Noble D. Raney  
 Vivian S. Raney  
 Dr. John E. Rasmussen  
 Beverly Rausch  
 Bill Reddick  
 Billy Reddick  
 Ruth Reddick  
 William and Ruth Reddick  
 Sherry Redding  
 Catherine Reidy  
 Mary Ellen Reidy  
 Michael P. Reidy, Sr.  
 Norah M. Reidy  
 Guenter H. Reif  
 Barbara A. Rexon  
 Beth and Bruce Reynolds  
 Audrey B. Rhiel and Joseph L. Rhiel  
 Dorothy Rhodes  
 Nancy Elizabeth Ribler  
 Ronald I. Ribler  
 Ray L. Richards  
 Jack A. Richardson, Sr.  
 Elizabeth S. Richmond  
 Buck Rikli, M.D.  
 Toni Ritz  
 Beverly Roberts  
 Fran Roberts  
 Lewis T. Roberts  
 Mr. and Mrs. Edward Robichaud  
 Glenn W. Rogers  
 Joseph Richards Rogers, III  
 Edgar and Sonia Rosen  
 Sarah Rosenbaum  
 Micky and Vivien Rosenthal  
 Nancy Lynn Roveri  
 Louis Rowe  
 Patrice Roy  
 Beate Betty Rubin  
 Harry Lyle Rundell, Sr.  
 O.T. Russell  
 Therese Saad  
 Margaret Sacuto  
 Juan Sagranichiny  
 Gloria Jean Sailor  
 Benedict C. Salamandra  
 Rashid Saleh  
 Sally Jordan Sallaway  
 Maxine Marion Saur  
 Geary Scheeler  
 Allen Schepps  
 Robert Paul Schilit

Charlotte Schlosberg  
 Valerie C. Schmidt  
 Hubert G. 'Hugh' Schneider  
 Sara Hall Schreengost  
 Mr. and Mrs. Peter Schwak  
 Nancy Schwartz  
 Carol Blythe Murdock Scinto  
 Donald B. Scott, Sr.  
 George F. Scott  
 John Carl Scott  
 Leona S. Scott  
 Rena Seliger  
 Robert Seliger  
 Andrea K. Sereno  
 Brandon Sgaggero  
 Caroline Sgarlata  
 Joseph L. Sgarlata  
 Donald W. Shanklin  
 Skip Shannon & Family  
 Aruna Sharma  
 Gretchen C. Sharpe  
 Linda Butler Shaw  
 Allan Sheldon  
 Theodore & Bernice Sherbow  
 Lucille Shevett  
 Buster Shores-Terle  
 Anna Marie Sieber  
 Charlotte Peverly Silver  
 Ben H. Simmons, Jr.  
 Ben H. Simmons, III  
 Velma Simometti  
 The Sipko and Good Families  
 Pamela M. Slagle  
 Gerard & Irene Smith  
 Gregory Smith  
 Lovell Stilwell Smith  
 Michael Smith  
 Steve Smith  
 Quilt Smith-Axley  
 Jacqueline Warchol Snook  
 Raymond Solecki  
 Jimmy Sopher  
 Colonel Richard Lee Spaulding  
 Christopher Spooner  
 Katherine Spooner  
 Alma C. Stalters  
 William 'Bill' J. Stalters  
 Steven J. Stein  
 Seymour Sherman Steinberg  
 Joe Stephenson  
 Mariel Brynhild Stephenson  
 Laurel Stevens  
 Katherine Stewart  
 Theodore W. Stippich, Jr.  
 Michael F. Storm  
 Gwendolyn Kaye Strike  
 Laurence E. Strong  
 Arnold R. Stull  
 Loris L. Suite  
 Elizabeth Sullivan  
 Irene B. Supinski  
 Gwen Surman  
 Kathy Sutton  
 Nils Swanson  
 Wilda P. Synan  
 Michael P. Szalaj  
 Senator Leonard H. Teitelbaum  
 Julia Tolbert Templeton  
 Erin M. Tervo  
 Donald G. Thompson  
 Delma Morris Tillman  
 Lisbon U. Tillman, Sr.  
 James Dayton Townsend  
 Brian C. Tressler  
 Stephen Triantis  
 Chi K. Tsao  
 James C. Tsao  
 Lily C. Tsao  
 Sangeeth Tummalapalli  
 Marie Tylor  
 Alexander Tysen  
 Melvin Ugel  
 Janet Valentine  
 Ralph VanKeuren  
 Alicia Maria Vasquez  
 Richard A. Vayhinger  
 Predy Victoria  
 Damji Vira  
 Kesar Vira  
 Laxmi Vira  
 Sam G. Vito

Fran Vogel  
 Lyle C. Vogts  
 Shirley M. Vogts  
 Carroll C. Volchko  
 David Walsh  
 John J. Walsh  
 Julia Kelly Wannan  
 Irene Boone Warnlof  
 Cheryl I. Weiner  
 Diane B. Weinfeld  
 Alethea Jordan B. Wells  
 Mary Noble Wells  
 Barbara Whitcomb  
 Marjorie Whitten  
 Agnes Whybrew  
 James W. Whybrew  
 Mary and Danny Wilderson  
 Harry and Nellie Wilensky  
 Norman R. Williams  
 Winifred F. Williams  
 Inez M. Willis  
 Layton Willis  
 Melanie Wilson  
 Michelle Lynn Wilson  
 Virginia L. Wilson  
 James Wing  
 Gisela Winkler  
 Barbara Wishner  
 Janet Louise Wolfe  
 Helen Elizabeth Wooditch  
 Eli Woods  
 Jim Woods  
 Marie Woods  
 Pao Wu  
 Ting Y. Wu  
 Richard Wyly, Jr.  
 Jennifer Yokley  
 Robert S. Yount, Jr.  
 Jason Zala  
 Edith Zappulla  
 Matthew C. Zehner  
 Patricia A. Zell  
 Helen and Simeon Zuppas  
 Irene J. Zynjuk  
 Ostop Zynjuk

### in honor of:

The 20th Anniversary of Friends  
 of Brookside Gardens  
 Tina Adler  
 Judy Bruce  
 Jeanne C. Edwards  
 Margaret E. Franz  
 Carole B. Gerber  
 George M. Gilbert  
 Joe Gilbert  
 Max Gilbert  
 Rosie Gilbert  
 Kay L. Hartzell  
 Andrea Hassani  
 Kay Head  
 Drew Evan Hykin  
 Mark Lazar Hykin  
 Victoria Johnson  
 Mr. and Mrs. Anton Kohut  
 David T. Landers  
 Marcia Landers  
 The Lowrie Family  
 Catherine McHugh  
 Cassandra Mendell  
 Stacey Moore  
 Erin Morrissey  
 John E. Mutty, Jr.  
 John C. Olson  
 Colleen Perret  
 Chris, Andy and Caroline Phelan  
 The Psotka Family  
 Buck Ranney  
 Bill Reed  
 Kate Reed  
 Christian Rhiel  
 Tom Rhiel  
 Madeline Rhiel Doran  
 The Seidelmanns  
 Ina Slough  
 Oscar Soler  
 Bobby Tsurapas  
 Imogene L. Washington  
 Susan Wilensky  
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Hospice Matters is a newsletter for family and friends of Montgomery Hospice, a non-profit organization serving residents of Montgomery County, Maryland who are bereaved or terminally ill.

## calendar of events

### Bereavement Care: free grief education for Montgomery County residents

*Remembering Mom and Dad workshop* May 10, 7:00-8:30 pm, Rockville

*Afternoon Grief Support Group* May 16, each Tuesday 1:30-3:00 pm for six weeks, Bethesda

*Evening Grief Support Group* May 16, each Tuesday 6:30-8:00 pm for six weeks, Rockville

*Loss of a Child Support Group* May 17, each Wednesday 6:30-8:00 pm for six weeks, Rockville

*Parent Loss Support Group* May 18, each Thursday 6:30-8:00 pm for six weeks, Germantown

### Volunteer Training

June 1, 2 and 9, 9:00 am to 4:00 pm, Rockville. Apply online.

Visit [www.montgomeryhospice.org](http://www.montgomeryhospice.org) for updated calendar information.

