

Happenings

Talking the Talk—and Walking the Walk: Community Development in Western Manitoba

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How can an association concerned with death and dying be a healthy community project? Well, when one considers that a characteristic of a healthy community is that its members are concerned and caring enough to help each other through life's crises (English & Hicks, 1992, p. 63), how could it be considered anything else?

The impetus for forming WATCH, which is an acronym for Westman Association for Terminal Care in Hospice, arose out of the Healthy Community philosophy espoused by VisionQuest, Brandon's Healthy Community project. WATCH was born in 1992 out of the need for palliative care beds expressed in protest letters to the editor in the Brandon Sun. The Brandon General Hospital had virtually closed the palliative care unit in response to severely curtailed funding by the Manitoba government. A public meeting resulted in an intersectoral study group being formed to examine the need for hospice services here and found that this need extended to all of Westman. This finding resulted in the formation of WATCH. Membership in the organization has grown throughout the region.

Operating within the Westman region, WATCH exists to sustain dying persons and their families by providing a caring community in which patients may live life to the full, and bereaved families are supported into the future. This mission is carried out by offering support to terminally ill patients and their families and friends either in a residential hospice facility, in their own homes, or both. Specifically the goals are to:

- ♦ educate the public about the need for hospice and home care for the terminally ill,
- ♦ provide support for terminally ill people and their family and friends within the home environment,

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- ◆ establish a free-standing hospice (a homelike residence for dying people),
- ◆ provide opportunities for education of volunteer hospice workers,
- ◆ establish and maintain contacts with those groups concerned with the provision of terminal care,
- ◆ maintain sufficient funds for the establishment and maintenance of facilities and programs for the terminally ill,
- ◆ maintain membership in good standing in the Manitoba Hospice Foundation.

Membership in WATCH now stands at nearly 200. A Board of Directors, elected by the membership, and six standing committees administer all the work entailed in meeting the above goals. The task is enormous for a group of volunteers alone. Because of this, the Board has hired the services of a Coordinator of Volunteers, Susanne Hunt, to provide consistent organization and support, especially in meeting client care needs. Thousands of hours of volunteer time have been devoted to establishing and providing hospice services since the organization's inception.

WATCH first undertook the education of its volunteers. These volunteers are now providing service in the homes of families affected by terminal illness. The number of clients receiving care varies from month to month; ten families were attended to last month. WATCH is becoming established within the community as a credible agency that can accept referrals and provide valuable assistance. Linkages with the Brandon General Hospital and Home Care services are building bridges that enable WATCH to enhance the care received by families at this critical life stage. We are also providing bereavement follow-up to a group of twenty-five adults, and to a group of four children. A group of four adolescents will be started in the near future.

When we have a suitable facility, and a sufficient number of trained volunteers, we would like to start a Day Program for people living with terminal illness in their own homes. By bringing people together, this program will help to provide physical and emotional support, and the social contracts so necessary if one is to live life to the full. The tedium of being at home and sick can be very wearing to all concerned. This lighthearted program will provide respite for both the patient and his or her care-giver.

WATCH has yet to raise sufficient funds to establish a free-standing hospice. This difficult task is being worked on with energy and enthusiasm. Thanks to donations from individuals and organizations such as service clubs, churches and businesses we are steadily moving closer to that goal.

References

- English, J.C.B., & Hicks, B. (1992). A systems in transition paradigm for healthy communities. *Canadian Journal of Public Health*, 83(1), 63-65