What Have I Learned from Cicely Saunders?

I knew Dame Cicely Saunders for only the last months of her life. I joined St Christopher's Hospice in January 2005, aware of the history of the hospice and the impact that the movement Cicely Saunders started some 38 years before had on support for dying people. I was more aware of the extraordinary story of the founder of the hospice in the city where I grew up, St Luke's Hospice, Plymouth. Dr Sheila Cassidy had been taken captive while working in Chile and held as a prisoner for some time. On release, she had joined a religious order and then returned to medicine, advocating for many years for a similar service to St Christopher's for the southwest of the UK. Dr Cassidy frequently spoke at events passionately promoting her desire to provide a hospice service into a mixed urban, suburban and rural context. Perhaps there is something about pioneering women who have the drive and tenacity to begin a new work that speaks to us all.

I first met Dame Cicely about 3 months prior to joining the hospice. In October 2024 I was invited to come to the hospice for a service in the hospice chapel, led by the then Archbishop of Canterbury, Dr Rowan Williams. After the service I was led across the room to where Cicely sat in her wheelchair, and I nervously introduced myself to her. Nerves is perhaps a very poor word, I was terrified … What I said and what she replied I cannot now recall. She was an imposing person, not only in her physical presence, but somehow, in a way that was literally about her as a phenomenon.

I will come to what I have personally learned from Dame Cicely in a short while, but I'd like to offer some context for St Christopher's, both historically and as a contemporary healthcare provider.

The resulting hospice was a protest at dying in the UK in post war Britain, growing out of her meeting with David Tasma, a Polish refugee, from as Cicely reports, the Warsaw ghetto. Her meeting as a young Lady Almoner (social Worker), remember she was only 30 years old with a dying man 10 years her senior set off a chain of events which I would describe verge on a mission of faith. She had become a Christian a couple of years earlier and in her own writing articulates that she was clearly seeking for a purpose. It was Tasma's dying that spurred her to advocate

among the medical profession at St Thomas' Hospital, and it was the medics who bluntly told her that unless she joined their ranks, no one would pay her attention. Driven by this, she enrolled at St Thomas' Medical School at 33, far older than her contemporaries. Dr Mary Baines, a fellow student interviewed by me for our Oral History Project, recalled this of her meeting Cicely at medical school,

> 'It struck me then as being exceedingly odd why she was going into medicine ... this extraordinary woman … had gone into medicine to care for the dying. I had never heard of anything like that before and if you had asked me at the time whether I thought anything would come of it, I would have said without any doubt no, of course not.'

Yet Cicely Saunders changed the face of dying and recruited Mary Baines to work in the new Homecare service in 1969.

For the first years of the hospice's existence, the 55 beds, all in bays were what we might call long stay wards, with patients being present for 2 or 3 years. A community was formed with an old people's wing and a children's day care facility, all of whom would come together with staff and volunteers to pray and eat. The spiritual foundation of St Christopher's, was fundamental to the service for Cicely she based on patient care, research and education

Palliative Medicine is of course now a recognised pathway for doctors and length of stay averages 11 days. On any one day there are around 1800 patients, drawn from a diverse population in five south east London boroughs: Bromley, Croydon, Lewisham. Lambeth and Southwark. The majority of the work takes place in patient homes with only 32 inpatient beds within the hospice. These function more in line of a high dependency unit with symptom management, support for complex pain being the primary reasons for admission.

The development of the use of medications which enable a patient to live longer and with greater comfort and therapies offered to enable individual psychological and wellbeing to thrive have joined the traditional hospice services of which Chaplaincy is one. Services for family members and carers to enable them to

support their relative or friend have also developed, in recognition of the burden and weight of caring and how this can affect an individual into bereavement.

When Dr Colin Murray Parkes began the hospice bereavement service at St Christopher's this was an offer only to patient relatives. Today we offer support to children and young people bereaved in southeast London by any means and to those adult relatives or friends of patients who die under our care, but also as a commissioned service to people in Lewisham and Bromley.

St Christopher's support around 4,300 patients each year, but that is only a proportion of the numbers we could support with greater finances.

So, to turn now to what I have learned from Dame Cicely Saunders. As I do, I return to the first time I went to see her as a member of staff. A very new and green Chaplain of 40 years of age. She was at home on a Sunday and I took her Holy Communion after the service that morning in the chapel of the hospice. All I can remember now is that other than using the simple liturgy and sharing the elements, I was utterly tongue tied. Over the next 7 months of Cicely's life, I was able to say more to her, but there was inevitably an awe in every conversation and opportunity to share in thinking together.

I want to list those elements which remain with me now, 21 years after our first meeting. (bearing witness, total pain, learning, inquisitiveness)

I would begin here by talking about bearing witness. This sounds so inane to many people, but to genuinely bear witness to another, in their pain or distress or moments of joy is a privilege. To illustrate this, I would suggest that if you can find a copy of *Watch with Me* you will see how Cicely Saunders embodied this. She writes,

> 'Watch with me' means still more than all our learning and skills, our attempts to understand mental suffering and loneliness and to pass on what we have learnt. It means also a great deal that cannot be understood. (p.4)

I recall a visit to a very elderly patient at home one Christmas several years ago. I initially spent an hour with him, listening to him describe how when he prayed God was not present and that reading the Bible no longer brought him any support. I did my very best to respond to him using scripture about abandonment and loss and the presence of God. He cried throughout my time with him. When I had prayed with him, drawing in our conversation together I stood up to put my coat on and go out into the wintery day. Doing so he looked up at me and simply said, 'I was in the war …' and then I knew what bearing witness really means. For the following hour I heard his harrowing account of his experience as an ambulance driver and stretcher bearer in the liberation of Europe from 1943 onwards.

To bear witness is to hold these personal stories and treat them as if they are themselves diamonds honed from the pressure of the earth's core over millions of years and of great price. It is to be next to the bed of a dying person and listen to a life narrated by those who are also present and hold this as if there has never been another life with so much value.

I can hardly speak about what I learned from Cicely Saunders if I don't mention total pain. In 2025 Heather Richardson and I developed a conference focussing on total pain in contemporary hospice care. It was here that the amazing pop-up exhibition was lent to us. This provided a great back drop to the whole 2 days. As a concept, total pain can be viewed as a cliché that has become tired and outlived its usefulness.

However, the planning was helped enormously by the publication of Joe Woods' PhD research in *Cicely Saunders and Total Pain*. In it he reviews the concept and suggests that total pain may now include wider national and international themes, global warming, political and economic instability.

I was also reflecting on a personal experience of bereavement. The title for the conference 'What is to Become of Me?' was formed from the words asked of me by my mother in late 2022, shortly before her own death in early 2023. In these words, I saw, perhaps fully for the first time, how the facets of total pain, social, emotional, physical and spiritual can draw to together to impact the whole of a person's life.

In the latter period of Cicely's life, some of the time I spent with her was a review of her own life and the changes she had experienced, most recently in her 2005 admission to the hospice up to her death. Cicely wanted to reflect on a book written in the early 1980's by WH Vanstone *The Stature of Waiting*. This book was an exploration of the Gospels of Mark and John had been a book read by the Foundation Group; people she personally invited to join with her in reading and discussion. At the end of life, the theme of the book, Jesus's waiting, his inaction or passivity, sat with Dame Cicely, and she wanted to think about her own inactivity and how this was an uneasy bedfellow for her. Looking back this was an expression of total pain. A full life reduced to a room in the hospice she founded.

Total pain has become more readily noticeable for me as my own life experience has changed and I have worked with people approaching the end of life and those close to them. From it I have learnt that it takes a team to wholly allow total pain to be approached and held. I hesitate to use the word 'solved' because it may not be possible to make everything right, but it is possible to allow voice to be given to that which was previously inexpressible.

In those last months of Dame Cicely's life, one element of my pastoral care for her was the degree of interest she continued to have in learning, exploring and reflecting, leading to new understandings of self and the wider world. Again, from our Oral History Project, one interview I led with Dr Robert Twycross, who was the first academic researcher at the hospice says so much in a few words. I travelled to Oxford to meet him at his home and, as always, my opening question was 'tell me a little of your recollections of Cicely Saunders'. Robert described his undergraduate medical training in Oxford in the early 1960's. Cicely came to the Christian Union which he attended to talk about the vision for St Christopher's. At this point she was reporting on her research into pain relief taking place at St Joseph's Hospice among other places and on the verbatim conversations she was recording. Cicely Saunders distilled her research to an address to a CU. Robert's short phrase to me on listening to her speak was, 'it was the lecture which really gripped me'. Her learning from research was powerful enough to influence the future choice of career of a medical student.

I also want to offer an example of this not through some grand research project or academic paper, but in the discussion of a particular book. In 1982, WH Vanstone an Anglican priest wrote *The Stature of Waiting*. This book became a reading text for what was then Cicely's 'Foundation Group'. A number of people, hand selected by Dame Cicely as people who would be supporters of the cause and willing travellers in a spiritual and intellectual journey. Cicely wanted to talk about this book with me and produced her own annotated copy from the earlier Foundation Group study.

Vanstone's premise in the book, which is a study in the Gospels describes the sudden and vital change in Jesus' ministry in the Garden of Gethsemane. He wrote that in Mark's Gospel there is a separation into two distinct sections. Initially, Jesus is described by Mark as always active and the terms used for Jesus' work display this. We can read 'immediately', 'straight away', 'very early in the morning', or 'started on his way'. There is a lively engagement with others and clear decisive actions on his part. That is until the moment in the garden. From there, Jesus' passivity is clear, plainly found in the way Mark writes. There is nothing taking place that Jesus is active within. He is a passive observer to the events unfolding around him. Vanstone draws too on John's Gospel for the same themes. The terms used in the Gospels and in the early church was 'handed over'.

When the book was suggested to me by Dame Cicely it was unknown to me. I had to buy a copy and quickly work my way through it. Over the period that I sat with Cicely in her home initially and then her room in the hospice ward, she frequently returned to the themes of this book and wanted to explore where in this she now found herself. In what place was Cicely situating her life as it drew to a close?

There was a profound learning for me in these moments as I hesitantly suggested to her that there might possibly be a parallel in her life with that of the experience of the garden and subsequent events for Jesus; that passivity had replaced activity and the 'handing over' was not just all that Cicely had achieved in her life, but also in allowing herself to be the patient and not the doctor. I found these conversations intense in their impact on me, as well as hugely challenging to be sitting with the founder of the modern hospice movement and listening and responding as a pastor within our shared conversation.

The learning of course was more than the semi-academic study of a book published nearly 30 years ago; it was in the moments when, reflecting on those meetings I realised that I was being taught by the person I was there to pastor to. In the periods shared in learning, exploring and reflecting, Dame Cicely taught me so much about my future approach to and work with patients, their family members and carers. I found that I am not the expert, but sometimes the student in a pastoral contact, however brief, and it is in allowing the self to be the student that genuine learning is embedded.

Finally, and briefly, I would offer you something which might seem for those here this evening who are ordained fundamental to your ministry, inquisitiveness. I am sure for those who are not ordained, it is inquisitiveness and interest in Cicely Saunders and her legacy that has brought you here this evening.

I can't pinpoint any moment when I can say I decisively leant to be inquisitive from Dame Cicely. Perhaps this was one of those attributes that is picked up by seeing it in action in others. But I can reflect to those times I sat with Cicely and understood that a sense of enquiry into the lives of others which is supportive and hopeful is enabling of change and growth. The inquisitor (if that is the right term) was Dame Cicely herself in my periods of being alongside her in the last months of her life.

To simplify what I mean, I guess I am describing interest in the other, wanting to know, to listen and to understand what is going on for the other person and through that enabling some kind of revelation or assurance to be found.

This simple attribute has travelled with me constantly over the years that have followed. I think there was an inquisitiveness already present within me, but it was in the times of sitting and being with Cicely Saunders that I discovered what this really looks like. I felt more confident to take this up because I witnessed it being modelled towards me. This simple characteristic of being interested in those you are with, has enabled me to recognise that a pastoral encounter can be one of two things, either a period of time when a **function** of ministry is fulfilled, or an **opportunity** to lift the participants beyond the mundane to the holy. Being

inquisitive allows, no invites, so much more in the liminal space that is inhabited for such moments.

So, I want to conclude by saying that Dame Cicely Saunders has taught so many people so many things but looking back at that time when I met her frequently, I am left with these abiding imprints in how I work with others. They may seem obvious everyone else, but at the time as a new chaplain within the world of hospice care these four elements were part of the legacy that Cicely Saunders left me with. I was privileged to have journeyed with Cicely at the end of her life. I am grateful for those months and all that has come after. Thank you.