

COMA WORK AND PALLIATIVE CARE

A Communication Skills Manual
for Supporting People while Living in
Delirium, Vegetative State, and Coma

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AWAKENING TO INNER WORK

Coma work has developed as a specialty within Process Work. Psychologist Dr. Arnold Mindell, founder of Process Work, has interacted with hundreds of comatose clients since 1975. He uses Process Oriented coma work to relate with people in a particular way, based on specific sensory information. Dr. Mindell combined knowledge from Jungian Psychology, Gestalt theory, the medical field, neuro-physiotherapy, Ericksonian Hypnosis, Neuro-Linguistic Programming, and information theory with his own observations and ideas to develop coma work. His courage and tenacity with people in extreme states ensured rapid creation of the practical techniques necessary for communicating with those in coma.

The generous sharing of this work by Dr. Mindell and his associates allows comatose people who need assistance to begin to receive it. In 1986 Dr. Mindell began teaching coma work. In 1989 he published **Coma: Key to Awakening**.

I have felt a commitment to learn about and teach coma work since 1986. This manual has been developed from my private practice and teaching experience. A number of the ideas and techniques presented here raise controversies among some caregivers. This debate is good; it will help people question and possibly add to their repertoire of skills to care for those living near death.

Comatose people's greatest fear is not necessarily of death, but of being trapped: either in inner states which

cannot be completed, or in negative states with no avenue of escape.

Coma states are symptomatic of a need for inner work. They call for a specific style of relationship, not just being left alone, or being stimulated in non-useful ways.

Coma workers communicate via specific sensory information. Through techniques presented in this manual, you will learn how to aid people in coma to become more aware, and to communicate better with themselves, friends and relatives, and the larger world.

Process oriented coma workers believe that even in the deepest coma, patients have an incredibly rich inner life and that helpers can aid with the experience of that inner life. This can benefit client, family, and staff by helping to make comas less disturbing and shorter.

You can help by carefully observing what is spontaneously transpiring in clients' processes and by amplifying what is already occurring. You can learn to relate better in this way by practising the training exercises presented in this manual. I wish you good reading, good work and godspeed.

ETHICS AND FEEDBACK

As people approach death they often enter more or less remote states of consciousness for varying periods of time. These states may appear painful for the one dying and usually cause grief in loved ones. However, we who do coma work believe these states can present opportunities for deep inner experiences including: completing unfinished business, exploring the meaning of life, and making spiritual connections.

Whatever is happening is potentially meaningful and may possibly be brought to greater awareness and made more useful. By doing coma work we help people complete their inner work. If they complete their inner work, they can come out, and use information from both inner and outer experiences to make decisions. As helpers we can assist people to gather the information they need to make life and death choices.

Working with those in coma can be invasive if done thoughtlessly. Dear reader, please, heed these precautions: Introduce yourself, ask permission to communicate, and pay attention to feedback.

I believe people in coma always communicate everything. We need to be astute enough to pick up their cues and reactions to our input.

If you attempt to communicate with someone in coma, they may show no change in their communication pattern. This lack of response indicates negative feedback. This is a time to try something else.

Try various interventions offered later in this manual. Use the ones you feel comfortable with. If after several attempts you receive no response from your client, say good-bye for the time being.

People in coma states are both extremely sensitive and extremely powerful. If they don't like what you are doing they can stay inside or go further away. By being aware, you can learn when you are staying in or out of direct contact with them.

You need courage, awareness and caution to communicate with someone in an extremely altered state. Trust your intuitions and your body feelings. Be willing to experiment with interventions but respect your personal comfort limits. If you feel uncomfortable or tired then you can assume your client probably feels the same. Try other interventions or stop for one or two hours. Be persistent with your communication and be sensitive to feedback from your client and yourself.

For everyone's safety: information in this manual is meant for use with medical supervision.

OUR DEEPEST BELIEFS

EXERCISE #1

This exercise is meant to enhance consciousness of our deepest positive beliefs about helping people. These beliefs are keys to how and why we feel and act. They are cross-cultural and spiritual. They provide inspiration and staying power in difficult helping situations.

Examples of deep beliefs: helping others; life has meaning; developing spiritual connections; people have a deep need to communicate; people always communicate what they need.

- 1) Think of your deepest positive beliefs about working with people.
 - 2) Write them down (revise the beliefs as needed).
 - 3) Carry them with you.
 - 4) Remember or read your belief statement when you feel depressed or burned out after working with people.
 - 5) If you are prevented from following your beliefs in one direction, search for and follow another direction to fulfill your beliefs. For example: One of my deep beliefs concerns wanting to help people. A client of mine was in intensive care. I could not spend much time with him. I was blocked from following my belief. I found another way to help by teaching his relatives how to use coma work techniques.
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BIAS AGAINST COMA

Western culture tends to hold a bias against inner work and altered states. Extreme inner states such as coma receive little acknowledgement for possible positive value. People often try to pull individuals out of these states before completion of inner work.

Coma forms one end of a wide spectrum of naturally occurring inner states. We often go into states on the milder end of the spectrum: while driving our cars; listening to music; sitting through boring meetings; when we are scared or angry; when we meditate.

Process Work approaches altered states by actively supporting what is happening in these states. One part of the coma patient needs to go deeper into trance to find new information; another part is afraid or does not know how to go deeper. Stasis results. Coma persists until the client gains new information and completes enough inner work. Completion allows a spontaneous return to a more normal state of consciousness.

Coma work can help people move through spiritual revelation; fear, anxiety and paranoia; confusion and agitation; physical pain; drug states; mental and emotional distress; issues in relationships; major life decisions. Helpers need not know personal details of their clients' lives. Supporting events as they transpire helps more than interpreting or analyzing the personal content of clients' processes. The exercises and diagrams on the following pages illustrate possible scenarios for comatose people's experiences.

INNER WORK

Exercise #2

Based on the work of Arnold Mindell.

This exercise shows how to do one style of inner work or "coma work" with yourself.

- 1) Relax in a comfortable posture, close your eyes, go inside.
- 2) Notice what you experience.
- 3) Notice whether you *mainly* see/hear/feel/move.
- 4) Focus your full awareness on the experience. This will usually intensify your experience.
- 5) Notice when you change modes of perception or channels. For instance from seeing to feeling, or from hearing to moving.
- 6) Continue for about five minutes or as long as you like.
- 7) After stopping, notice any change in your thoughts and/or body feelings compared to before you started the exercise.

People doing inner work often have problems focussing and maintaining their self awareness. Similarly those in coma often require support for awareness of their perceptions.

Static Coma

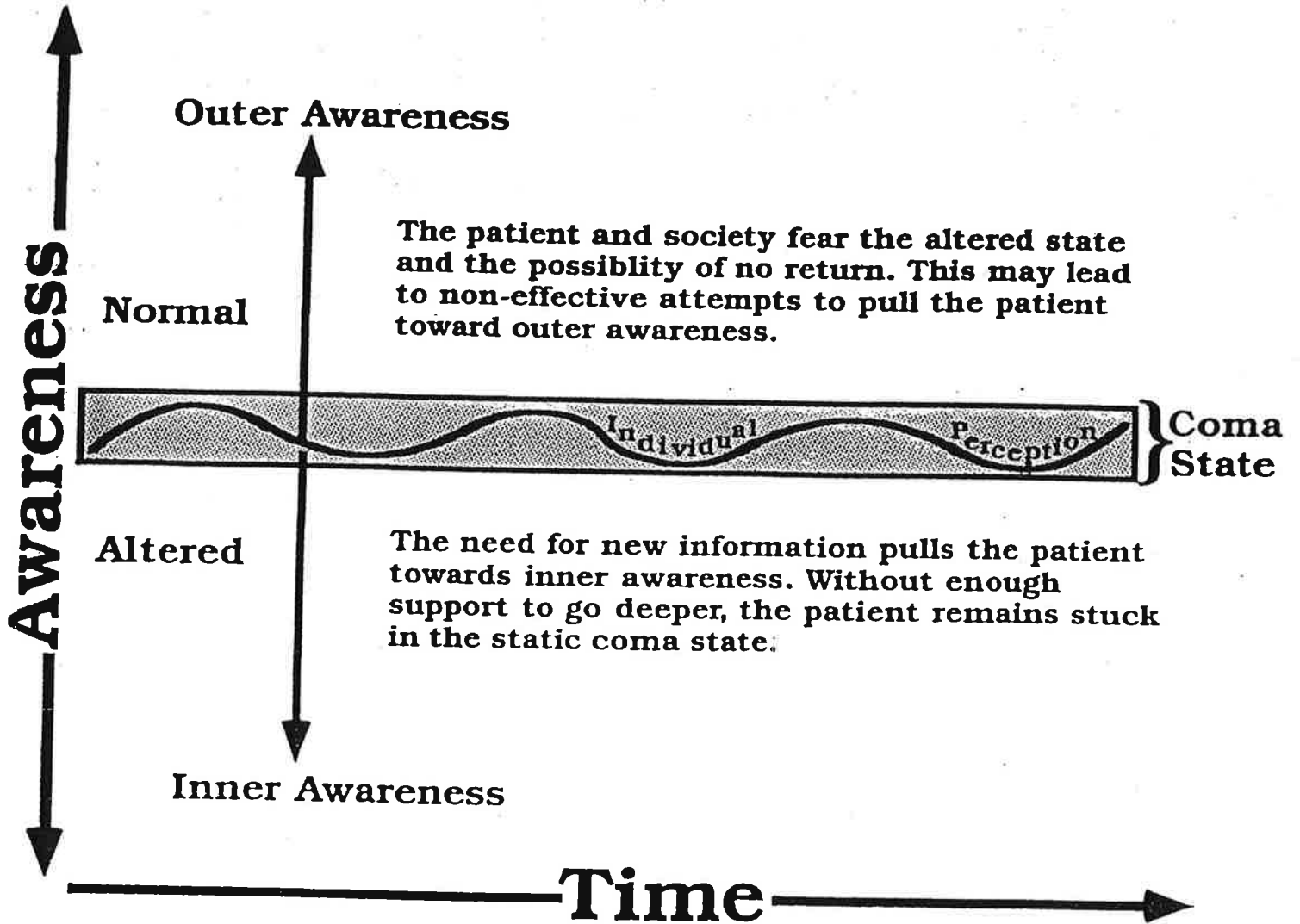
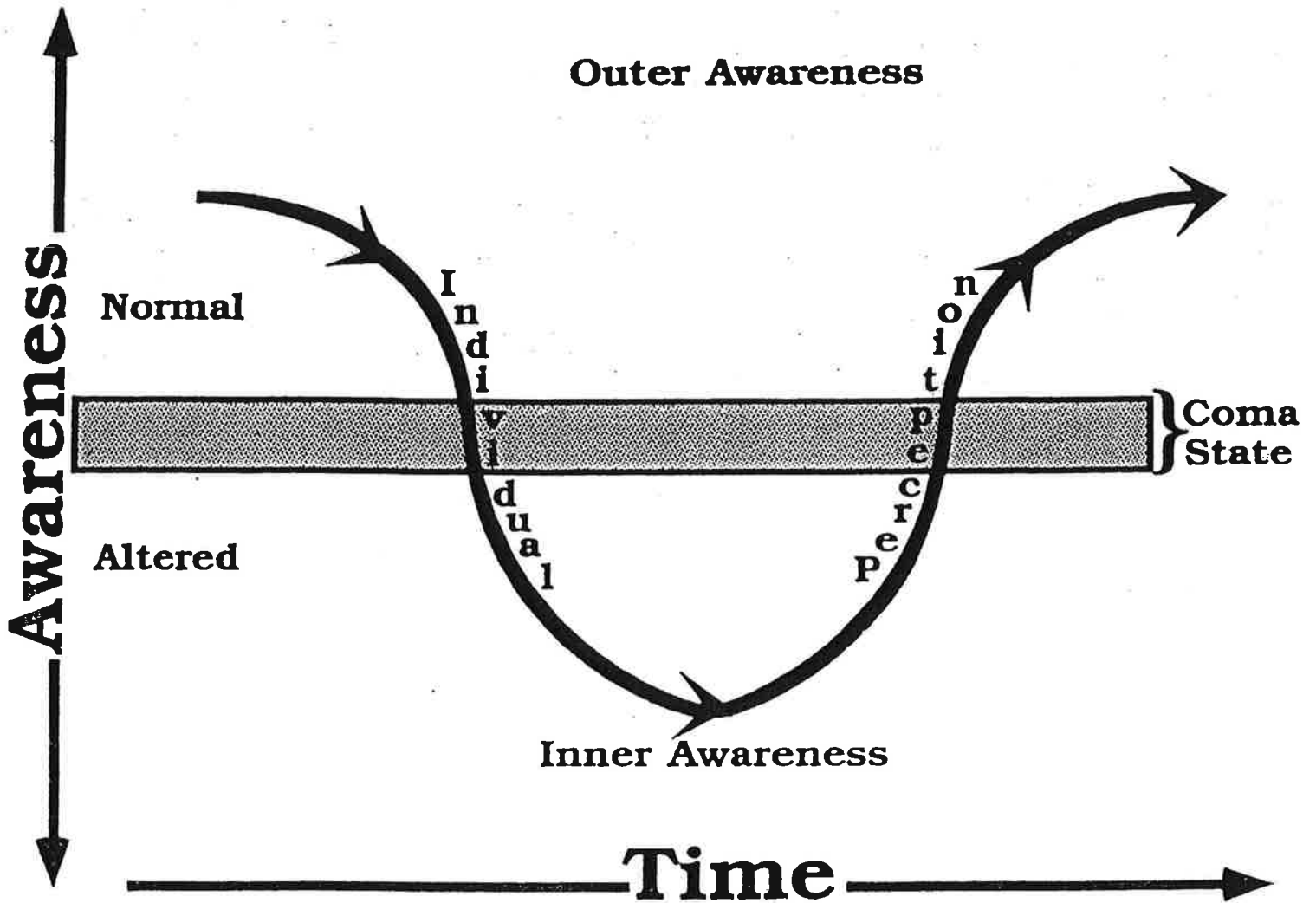


Diagram 1

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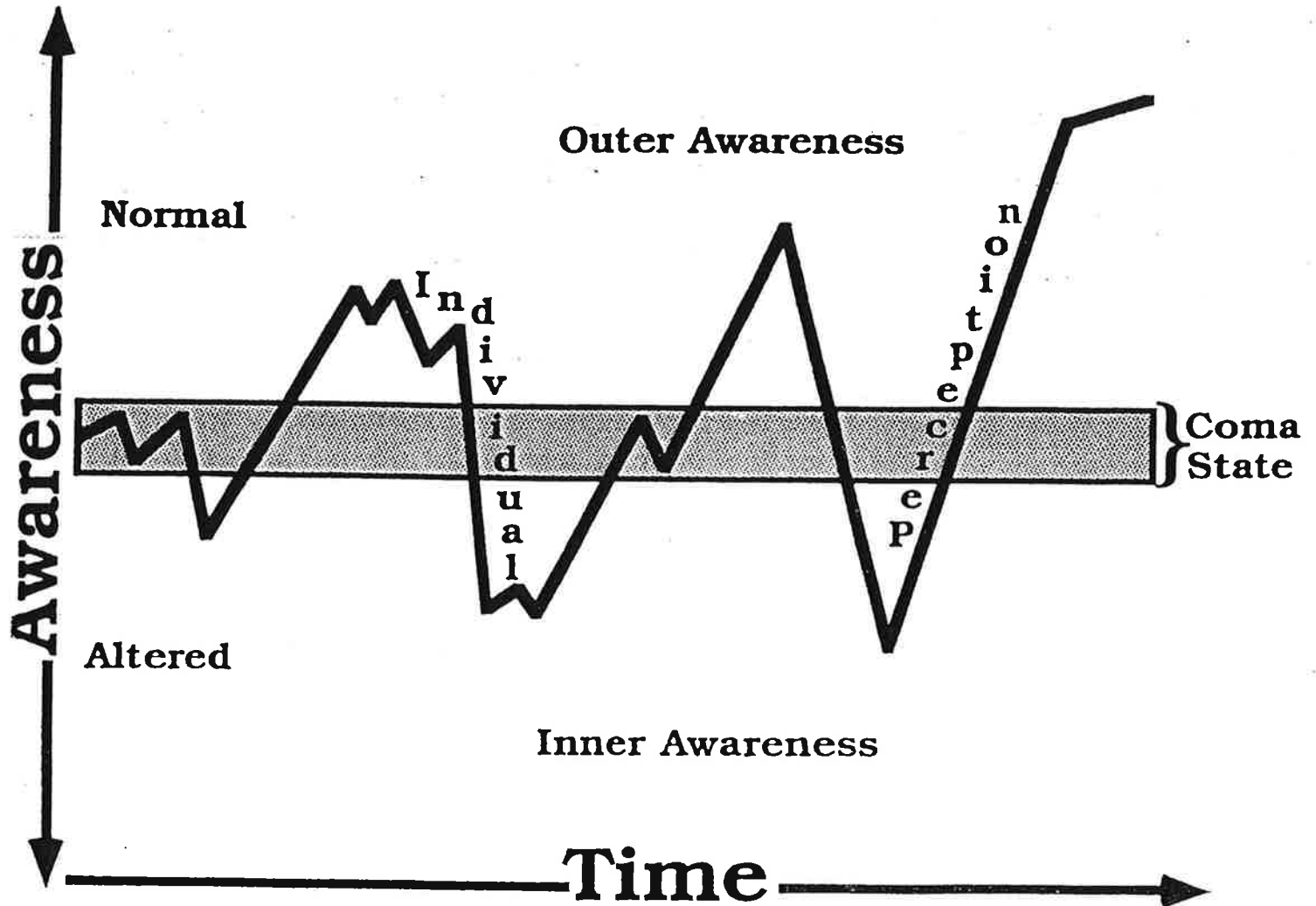
Coma Process



A comatose individual will spontaneously come out of the altered state if they obtain enough information from their inner awareness.

Diagram 2

Ongoing Coma Processes



Often a patient will go through several coma processes over days or weeks. Each time they go through a cycle they gain new information from inner and outer awareness.

Diagram 3

COMA STORY: NATIVE PRAYER

A group of us worked with a ninety year old man. He developed hypothermia from standing out in the cold all day at a rally. We insisted he go to hospital, but he refused. If he was going to die, he wanted to die at home. As we warmed him by the fire, he slipped into a deep altered state.

Three of us worked with him, placing our hands on his body where his cues and our intuitions told us to. About ninety minutes later he regained normal consciousness and thanked us. Then he alertly watched himself on the evening television news. The program showed him standing on the steps of the legislature building, dressed in his traditional attire. He was delivering a Native prayer in the language of his ancestors. Two hours after viewing himself on television, he died peacefully.

We did not need to know the content of the process during this man's deep trance. We only needed to know that he experienced body sensations. We observed his cues that were indicating body sensation work: head down and lower stomach breathing. Then we supported his process with hands-on work, helping him complete his inner experience. He received the information he needed, regained normal consciousness and died with awareness and dignity.
