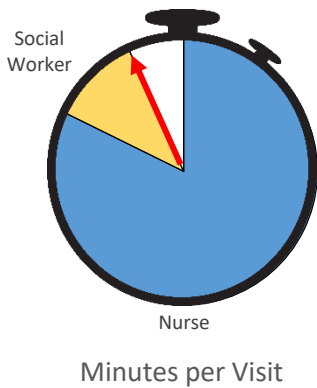


UNspoken TRUTH: 7 IN 10 AMERICANS PREFER TO DIE AT HOME

Considered a taboo topic in many cultures, death and preferences for dying are seldom discussed, but there is broad consensus: most people would rather die in a trusted, familiar setting. And most prioritize pain relief over prolonged life at the end of lifeⁱ.

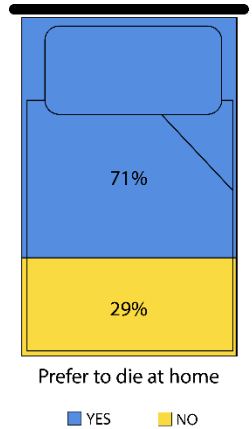
PAIN RELIEF AND PALLIATIVE CARE IS PROVIDED BY HOSPICE. BUT IS HOSPICE ENOUGH?



Hospice services include nursing and social worker visits and clerical and grief counseling services for the dying and their closest relations. Many people believe that hospice includes constant bedside support.

But in 2019, nurse and social work visits *combined* averaged 56.9 minutes during the last seven days of lifeⁱⁱ. So it is unlikely that hospice staff will be present at the time of death. That is, if hospice is engaged at all.

Almost half of all who died that year were not in hospice careⁱⁱⁱ. It is unclear whether these deaths were attended by anyone, whether professional or lay practitioner or loved one.



ATTENDING TO END-OF-LIFE NEEDS HOLISTICALLY

While certainly a beneficial resource, the hospice model does not fulfill all the end-of-life needs of those who are dying. There are spiritual, emotional, and practical needs that deserve attention too, bringing dignity to death.

Death with dignity involves compassionate care that gives space for finding meaning, exercising acceptance, creating and sharing ritual, and envisioning the transition from this realm beyond.

End-of-life doulas are trained to support those dying, and their families, with these end-of-life principles and practices. The end-of-life doula model is a valuable component of an individual's overall care at death.

End-of-life doulas collaborate with clients who are dying, to:

- *Tailor the frequency, length, and purpose of visits*
- *Work on legacy projects to celebrate life meaning*
- *Plan their vigil and post death rituals*
- *Explore existential or interpersonal considerations*

LEARN ABOUT THE ROLE END-OF-LIFE DOULAS BRING TO THE DYING PROCESS

Discover how end-of-life doulas focus on the non-medical aspects of dying and the powerful, positive outcomes that result when doulas attend to the dying, as they strive to make compassionate care a reality for all facing death.

Ellonyia Yenney is an end-of-life doula and death educator practicing in Bettendorf, Iowa and surrounding areas. She speaks frequently to diverse groups about the principles and practices end-of-life doulas apply. [Contact Ellonyia to speak at your corporate gathering or lunch and learn.](#)

Ellonyia Yenney – Of Grave Concern Doula Services



“Dying is not a medical emergency. Instead, dying is a social and communal event. Doulas assist (in a non-medical capacity) with contemplation, communicating, and documenting end-of-life plans no matter where someone is in their life or what stage of health. Consider us an End-of-Life Project Manager so individuals and their families can live their lives to the fullest.”

– Ellonyia Yenney

Ellonyia Yenney holds an MBA from the University of Iowa's Tippie School of Business. She has earned both an End-of-Life Doula and a Companion Animal End-of-Life Care professional certificate from the Robert Larner, M.D. College of Medicine at the University of Vermont.

She is a member of the National End-of-Life Doula Alliance (NEDA) and in 2021 earned her proficiency designation.

Ellonyia is also a member of the International End of Life Doula Association (INELDA).

Ellonyia regularly hosts “Death Cafes” and game nights to help families, no matter where they are in life, have open and frank discussions regarding end-of-life.

She is a hospice volunteer with her two certified therapy dogs, Lola and Tilly. Ellonyia lives in Bettendorf, Iowa, and in her free time enjoys hiking and stitching snarky needlework.



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ii [Federal Register](#) April 14, 2021 Department of Health and Human Services Centers for Medicare & Medicaid Services, p 19713

iii IBID, p 19705