

Former MDC Professors Esther Colliflower and Hugh Westbrook Blazed a Trail for Hospice Care in America

hen a couple of faculty members at then Miami-Dade Community College's Life Lab program wanted to offer America a holistic approach to end-of-life care in the mid-1970s, the College's hierarchy didn't flinch at the task at hand: supporting Life Lab as it began a hospice movement

that would change the way millions of Americans spend their last days. Then an experimental concept practiced in just one program in America, hospice would become a revolutionary way for millions of Americans to find comfort in the face of death.

Yet even before hospice began its long and rewarding journey, its founders, former professors Esther Colliflower and Hugh Westbrook, were acting on their own social conscience. The two first met in Miami in the 1970s and teamed up to oppose Anita Bryant's campaign to repeal Dade County's gay rights ordinance by joining Clergy and Laity Concerned, a group that opposed Bryant's use of religion to justify her anti-homosexual stance.

As a Methodist pastor, Westbrook's activism provoked a backlash from his more conservative church superiors. The district superintendent of the Methodist church threatened to transfer him to Central Florida to get him out of the controversial gay rights debate. The impending move was a de facto pink slip.

"I refused to go," Westbrook said, "but it meant I no

longer had a job."

Colliflower, who was associate dean in the College's Life Lab program at the time, stepped in to help. In the summer of 1976 she hired Westbrook as a parttime faculty member in Life Lab's interdisciplinary, competency-based studies at the Wolfson Campus, an innovative program founded in the early 1970s by Dr. McGregor Smith that gave students credit for life experience and allowed them to design course work around their own interests. The progressive, student-centered approach inspired Westbrook, a Duke University-trained minister. "Coming from the community, and not trained as an educator, I looked at [Life Lab] and I said, 'boy this is really the meaning of community in community college." The downtown campus was involved in the life of the city in a unique way."



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Westbrook and Colliflower worked with a diverse group of MDC students that included women joining or returning to the work force and veterans returning from the Vietnam War. The collaborative curriculum broached previously taboo topics, like adult sex education. Westbrook and Colliflower found that Life Lab students shared their interest in issues of death and dying, issues that were being reconsidered by activists and social workers in the 1970s.

The two developed a curriculum around the nascent hospice movement, one that Westbrook says focused on "life affirmation and personal death awareness." The classes explored the psychological and spiritual elements of dying, including issues raised by psychiatrist Elisabeth Kubler-Ross, whose groundbreaking work, "On Death and Dying," was published in 1969. Among their first students were fire fighters and EMTs who had never before reflected on the implications of their efforts to preserve the lives of others.

Hospice advocates believed dying patients needed an interdisciplinary form of care that addressed not only their physical ailments, but also their social, spiritual and intellectual needs. This holistic approach also extended to the needs of the patient's loved ones. Its mission was to preserve the patient's quality of life and empower the patient to define that quality on his or her own terms. Popularized in England, the holistic approach to hospice had its first U.S. presence at Yale University in 1974.

Soon after they developed the hospice curriculum at MDC, Colliflower and Westbrook were invited to a meeting of the Dade County Mental Health Society, which took place at the old Vanderbilt mansion on Fisher Island. They realized they wanted to go beyond simply studying hospice.

"We decided that, rather than just teach it or do

research, we wanted to start a program that would actually care for dying people," Westbrook says.

When it came time for the small group sessions, Westbrook and Colliflower made a sign on poster board that advertised their interest in developing a program on death and dying and hung it on a banyan tree outside the mansion. About 30 people wandered over to join them, a group that would later winnow down to six committed participants.

Back on Wolfson Campus, the meeting attendees launched into planning mode, consulting students and faculty about the possibility of starting a hospice. "After our little bout on the island, we came back and had a series of brown bag lunches at the College," recalls Colliflower. "We'd gather round and say, what does this mean; what do we need to do?"

Although organizing volunteers to care for the terminally ill was an inherently risky proposition, both Westbrook and Colliflower say current College president Eduardo Padrón – then academic dean – and MDC administrators never wavered. "They took a great risk with us," remembers Colliflower. In fact, Westbrook said the present-day hospice industry, which serves nearly a million Americans per year, was made possible by the College's unwavering commitment to its faculty and staff. "Had it not been for MDC's willingness to support Esther and me, hospice never would have gotten started," notes Westbrook.

In May of 1978, Westbrook and Colliflower initiated the model for today's hospice care when they were approached by Emmy Pilhour, the wife of the dean of the drama department at the University of Miami. Pilhour was terminally ill and wanted a way to die with dignity. "She said, 'If you'll help me stay out of the hospital, I'll teach you what my needs are as a dying patient'," recalls Colliflower. "I thought it was a wonderful challenge."

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Westbrook and Colliflower set up an organization, Hospice of Miami, a volunteer-run service that provided care for patients while soliciting input from them about their needs. Although the hospice volunteers set out to help Emmy in her final days, Colliflower believes the woman gave more than she received. "She took us under her wing, and she was a tremendous teacher," says Colliflower about the woman who courageously helped launch the hospice movement. "She had a great sense of humor. She was a person who was very brave, in the best sense of the word."

Despite this headway, Hospice of Miami's volunteers relied solely on their own professional licenses. Some were nurses and nurses' aides; others were students of social work or psychology, or professionals in those fields. What they were doing was so new it was unregulated. They realized they needed some guidelines. Enter Carrie Meek, then a newly elected member of the Florida legislature and fresh from the MDC faculty. She brought a licensure package to the legislature, which passed by a wide margin and became the nation's first regulation to govern hospice licensure. The win gave hospice care a legal definition.

Nonetheless, hospice faced skepticism and even outright opposition from both patients and the health care industry. "Physicians were wary of it. Hospitals weren't too happy. Home health care thought we were crazy and thought we were replicating their services – which we weren't – and patients and families were very wary because they thought this meant there's no hope," Colliflower explains.

Yet hospice was as much about life as it was death. The idea was to let patients control their own life, as much as possible, right up until the end of it. Sometimes that meant helping them plan a birthday party or tracking down long-lost friends to say good-bye. Other times it

meant palliative care that soothed physical pain while friends and family gathered to heal emotional wounds. The needs of a hospice patient, Colliflower says, continue to be as unique and varied as the patients themselves.

The emphasis on spiritual and emotional care clouded the issues for those new to the hospice movement. Hospice volunteers encountered cynicism: "There was a time in the development of hospice when people tended to look at it as do-goody people who were not professional but just supportive," Colliflower recalls.

Hospice of Miami worked to change the image, emphasizing skilled care as well as compassionate support. In April 1978, Colliflower left MDC to work full time on getting hospice off the ground. "It was a hard sell," Colliflower says. "It didn't happen overnight."

But eventually the movement did take off. In 1982, using the model that MDC faculty had developed, the federal government included hospice care in its Medicare reimbursement program.

With regulations and Medicare reimbursement in place, hospice gradually became part of the end-of-life vernacular – and an industry in its own right. Hospice of Miami became VITAS, which now operates 25 locations in eight states, from Florida to California, has revenues of \$420 million and cares for an average daily census of more than 8,000 patients and families. In 2003 Westbrook and Colliflower sold the company, the nation's largest for-profit hospice corporation, to Roto-Rooter in a \$410-million-dollar deal.

Both Westbrook and Colliflower continue to be active in end-of-life care on a personal and political level, helping to fund and direct both the Foundation for End-of-Life Care and Duke University's new Institute on Care at the End of Life. It's heady stuff, but neither founder forgets hospice's purpose – or its roots. "It all started back at Miami Dade," Colliflower says.