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When I was 40, I took a 63-year-old friend into my home to live with me. Well, to say I invited Dale to live with me would not be accurate. It was never his wish to share an address with anyone, being "a monkish sort of man," in his estimation. It may also be inaccurate to say I took Dale to *live* with me. Truth is, I took him so that he would not die alone.

Dale and I had been students together in seminary. The rest of us thought of Dale as the old guy, since most of us were in our 20s and he was nearly 50. But Dale never seemed old. He ran marathons, chopped his own wood, and spent his free time hiking in the wilderness. He'd been everywhere in the world and spoke seven languages, including ancient Coptic. Rather than old, this guy seemed ageless.

A decade after we were classmates, Dale and I both ended up returning to work at the seminary where we'd studied together. It was great to renew our friendship, this time as colleagues.

It was during a summer break from sessions that I received a call from the registrar saying that Dale was in the hospital. He'd had a stroke, caused by a brain tumor. He was partially paralyzed, unable to speak, and not expected to live. Would I go with her to see him?

In the ICU, as we stood over his bed, Dale opened his eyes. It was impossible to know if he recognized us. He lifted his one viable hand and touched his throat.

"He keeps doing that," the nurse told us. "I think he wants to speak."

"He wants his cross," I wagered. Dale always wore a tau cross at the spot where his fingers rested.

I searched in the drawer at his bedside and found the cross, positioning it around his neck over the many wires and tubes encircling him. Dale curled his large hand around that cross and held on tightly. It was in that moment that I knew Dale was still there, still himself. And that I would not leave him for the rest of his journey. If he could trust that cross, so could I.

It wasn't quite so simple, of course. Dale had outlived most of his family. One remaining brother was out of range, working a private mine somewhere in the Southwest. My first task was to gain power of attorney, the second to get authority over Dale's medical decisions. My friend couldn't speak. Someone had to speak for

him.

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It took weeks to get the proper paperwork and to see his doctors. It was then I learned arrangements were already being made to consign Dale to indigent care: a low-budget nursing home where he'd receive no further treatment. This would mean death within weeks.

Having pored over Dale's medical coverage, however, I understood that he had rights to a range of therapies and treatments. He could even choose from several hospitals and nursing homes, including Stanford, where they specialized in the kind of brain cancer afflicting him.

So I stood in more lines, gripping more forms, trying to gain access to the administrator who could make this happen. When I finally got in front of this person, the size of her desk and her well-appointed office told me this was the last court of appeal. If she wouldn't sign the forms, Dale, who'd been employed his entire life, would spend his final hours dying as an indigent.

The administrator was not unreasonable. "Of course, Dale can receive further treatments for the cancer, as well as the three therapies: speech, occupational, physical. But those services are available locally. He doesn't need to go to Stanford. The difference in level of care would be about 5% — hardly cost-effective."

"Five percent," I countered. "If someone's aiming a laser at my brain, 5% more accuracy matters. Five percent more attentive nurses, 5% more advanced equipment, 5% more experienced doctors: I think I would want that."

The woman stood up, bracing her hands on her desktop with an air of finality. "Your father will get very good treatment at our local hospital," she concluded with real gentleness in her voice.

"He's not my father," I corrected. Then I too stood up. "But if he were your father, would it make a difference to your decision?"

The idea seemed to stun her. She sat down, picked up a pen and tapped it a few times, not meeting my eyes. When she looked up again, she said quietly, "If it were

my father, I'd want him at Stanford." And she signed the papers authorizing the transfer.

Dale received the expert care he would have sought for himself. And a few months later, he was actually able to tell me that himself.

I pondered for a long time the impact of the word father on that fateful conversation. How it flung open a door that had seemed impenetrably locked. What a father is to me may not be the same as to you. Yet we all agree what a father ought to be. We all know what family is supposed to mean — even if our particular experience of that unit was far from perfect.

When Pope Francis says the fate of the globe rests on our embracing a "family feeling" for each other, I suspect he's talking about situations like these as much as grand diplomatic alliances. I need to respond to others as if they were family. I need to shoulder responsibility for the world's pain as if it had something to do with me, which it does.

Dale and I lived together for 18 months. We shared glorious meals and fascinating conversations. We traveled together — he and I and his wheelchair — to say goodbye to all the people he loved. I held onto his hand when he died. And because of our time together, the meaning of family has been transfigured for me.