



SERIOUS ILLNESS IS NOT FUNNY BUT FUNNY THINGS HAPPEN

by Allen Klein, MA, CSP

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A couple of years ago my father-in-law was very ill. Once, when he came home from the hospital, it was his and my mother-in-law's wedding anniversary. I suggested that they invite a few friends over for dinner and I would cook a turkey.

Jimmy managed to get out of bed to join us. He enjoyed the meal but the strain of feeding himself and the presence of guests were obviously tiring him. Noticing this, and knowing that he could not hear very well, my mother-in-law wrote a note and passed it to me to give to him. I read it and got hysterical. She remembered what she just wrote and laughed out loud too.

The note said, "Happy Anniversary dear. Do you want to go to bed?"

Jimmy read what his wife had written, looked up across the table, and with a twinkle in his eye and a smile on his face slowly said to her, "I would love to dear, but we have company."

It was only a brief moment of levity in his difficult last days, but it was a moment that was long remembered after he was gone.

Looking for humor in the not-so-funny world of serious illness may seem like a disrespectful thing to those who are suffering, however, situational humor which inevitably arises during stressful times is very appropriate. Laughter is a powerful tool in powerless situations. It can give hope and an upper hand to patients, who are experiencing both physical and mental loss, as well as to caregivers who cannot change that loss.

The safest way to find that laughter is to first establish a rapport with the patient. Then look for humor by listening to what the patient jokes about. Above all, do not go into a patient's room with a battery of jokes. First, jokes can be offensive, and second, when you enter the room of someone who is ill, you have no knowledge whether they will be receptive to your kidding around.

The best way to find humor when someone is seriously ill is to listen to what they are saying. The patient is the one who will often give you the laugh-lines.

One example comes from a friend of mine who had AIDS. One day I walked into his house and found a Star of David, a Crucifix and a picture of Buddha on the wall.

"Rick", I said, "you are a Quaker, why do you have these opposing religious items around?" Rick, who never missed a moment for some levity, replied, "Well, you never know who's right. I'm covering all bases!"

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