Thinking back to your childhood, I’m sure each of you has engaged in the simple fun of spinning in a circle. Your feet began shuffling as you pushed yourself to spin rapidly and erratically. Depending on your mood, you either shut your eyes tightly for the rush of possibly colliding or you kept them wide open to experience the thrill of losing focus.

Spinning and spinning. Faster. Now you’ve opened your eyes and continued spinning for a few more seconds.

Unable to maintain your balance, you fell to the ground and stared up at the sky - waiting for your focus to return. Your eyes feel as if they’re swirling around and flicking back and forth.

During this activity you’ve changed your perspective of the environment around you. While small scale and basic, the act of pushing yourself to experience a new viewpoint taps into the human need to connect. Either to connect to one another or an intangible idea, this publication provides a moment for you to step back into your childhood when everything was new and nothing was concrete.

Take the time to open your mind and view another person’s perspective on death, life, courage, service, dreams.
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TAROT REDEALTED
The art and transformation of card reading

STORY BY BECCA FREIMUTH
Photos by Jake Parrish
SITTING IN THE BACK OF STONE MOON, a store in downtown Bellingham, Jordan Langen takes a deep breath and plants her feet on the ground, straightening her posture. She watches as her client shuffles a handful of 78 laminated cards decorated with earthy colors and dreamy characters. She begins to concentrate on the energy in the room.

Langen, 28, a professional tarot card reader, begins to feel the tension build. Is the client nervous? Stressed? Slowly the cards are passed over to Langen, and she deals them into a clearly memorized pattern on the table.

"Are you ready to begin?" she says.

Over the past four decades, the culture surrounding tarot cards has revolutionized. What once was considered witchcraft and a farce has now become a tool for making life decisions and finding inner wisdom.

"When I do tarot, it’s like opening a big set of doors and I am able to express all the emotions I feel," Langen says.

She compares a successful reading to people at a party. With different personalities, the cards come together to form relationships with other cards. Good readers are able to read the personalities and see how they combine, Langen says.

When Laura Abernathy, 60, began using tarot cards at the age of 18, four main decks were used. As a life coach and founder of the Tree of Life Sanctuary, a spiritual school on Holly Street, Abernathy watched the “negative, evil and threatening” deck

"WE ARE ACTUALLY MORE THAN THE BODY, WE HAVE A FIELD AROUND US THAT WE JUST HAVEN’T LEARNED TO SEE YET."
thousand tarot decks now circulate, many handmade by readers, Abernathy says.

In Helen Farley’s 2009 book, A Cultural History of Tarot: From Entertainment to Esotericism, she discusses the transformation of tarot cards from playing cards for nobility during the Renaissance, into “a diagnostic tool for mind, body and spirit.”

“Scientifically, the origin of tarot is only conjecture which is amazing,” Abernathy says. “It’s like the cards sort of sprung up and it was just a small group of people who used them for spiritual purposes.”

Judyth Sult, an empowerment coach in Bellingham, uses tarot with her clients and relates the old decks to conventional traditions. The unrelatable cards of kings, queens and knights in traditional decks make tarot limiting and up to negative interpretation in today’s culture, she says. Instead, Sult’s deck consists of the dalai lama and wisdom cards: student, apprentice, teacher and sage, which represent growth.

Sult uses the cards to tell a story for her clients, allowing them to walk away from the reading with new knowledge about themselves and direction on where to go next in life, she says.

Langen believes tarot is not mystical, but rather a psychological exercise where emotions and feelings are being transferred into objects.

As a child, Langen found herself making emotional connections with objects instead of other children. She would “put her love” into these items – especially one special heart-shaped ring.

“I am just going to pretend my love is a liquid and I am going to pour it into this gem,” Langen would say. She took this passion and invested it in others through tarot.

While some readers shuffle the cards for the client, Langen has her clients shuffle the cards before the reading. She believes that a person’s energy is transferred into the cards during the shuffle – allowing her to connect with them on a spiritual level.

“I don’t want to claim that I am the all-knowing power and that I am just passing that down,” Langen says. She believes that everyone has power and a tarot reading is combining those powers to create a mutual experience.

When Sult started reading tarot 35 years ago it was built on the old interpretation of fear, fortunetelling and dependency, she says. Due to influential female authors in the 1980s the attitude toward tarot shifted, the cards became more about choices and not fear.

Sult uses tarot as a tool for children to communicate with their parents about what is happening in their lives, whether it’s bullying or the effects of an argument between the parents on the child.

“It opened up an opportunity for the children to talk to them. That to me is revolutionary. That wouldn’t have happened 30 years ago,” Sult says.

Abernathy focuses on the client’s subconscious in order to use tarot as a key to unlock these types of conversations. She believes that the client knows the answers subconsciously and just needs a tool to discover them.

“We are actually more than the body,” she says. “We have a field around us that we just haven’t learned to see yet.”

Abernathy stresses the importance of becoming consciously aware that humans are more than physical beings. The energetic and biochemical part of humans effect beliefs, thoughts and emotions.

“All of this is about helping the human species make the next leap into a new way of being human,” Abernathy says.

As Langen finishes her last reading for the day, she shuffles through her handmade deck of tarot cards. She realizes she is part of something bigger than herself and is no longer static as a person. With tarot, Langen hopes to encourage other people to tune into their energy and connect with life on a higher level.
ONE STEP LEADS TO A PLUMMET THROUGH
the air — only the quick tug of a cord separates a
slam from a gentle fall.

Thrill seekers of all ages looking for a dose of
adrenaline flock to skydiving locations throughout
the United States each year. But, for those instruct-
ing newbies five days a week, the view from
above is a little different.

Jordan McElderry, director of student operations
at Skydive Snohomish, Inc. has dived 5,392 times and
took his first plunge in 2004.

At this point, “It’s really just kind of a drop in the
bucket,” he says.

McElderry works five days a week and manages
about 20 instructors. Previous to his management
position, he worked as an instructor for six years.

While McElderry is used to taking the plunge, he
says it is important for people to prepare and learn
how to skydive incrementally.

“You have to break it down,” he says. “[It’s] easier
to swallow.”

Those jumping for the first time learn about in-
plane preparation, spotting expectations, specific
skills during free fall and layout — piece-by-piece,
he says.

For 23-year-old Blayde Lawson, skydiving is about
the fun.

In a matter of months, Lawson has completed
28 jumps since he took his first jump last year at
Skydive Snohomish.

Now, Lawson is training to get his license so he
can jump on his own. The license is issued by the
United States Parachute Association and allows him
to jump from any drop zone in America, he says. He
invested $2,500 in the class, and is studying at Sky-
dive Snohomish. The class moves at his own pace,
from two months to two years.

With each jump, Lawson says he avoids the fear
and hesitation of hurling through the air by thinking
logically. In the classes required to earn his license,
participants learn numerous computations in order
to safely land.

Out of an estimated 3.2 million jumps in 2013,
there were a reported 24 fatalities in the United
States — that is .0075 fatalities per 1,000 jumps, Ac-
cording to the United States Parachute Association.

While the training can take some time, he finds
comfort in the statistics and safety measures he’s
learned, he says.

McElderry helps students understand how to
unlock their thought processes during these intense
situations, he says.

For McElderry, “That’s the fun of being an instruc-
tor,” he says. “There are very few things that can feed
you with that type of energy.”

Photo courtesy of
Skydive Snohomish
FINDING BRAVERY
Overcoming loss and promoting suicide prevention

People have a hard time talking about it — a subject often hushed for fear it may ignite similar thoughts in others. Even when caught up in the tragic aftermath of suicide, opening up to others can be one of the hardest things to do.

For Ian Vincent, a Western alumnus who lost two of his friends to suicide in his first two years at the university, opening up was the only way he could find peace.

“Openly talking about what’s bothering you surprisingly does a lot to help,” Vincent says. “You never really realize that until you’re actually doing it.”

Each year, nearly 1,100 students commit suicide on college campuses in the United States, according to the National Institute of Mental Health. Statistics can help analyze suicide on a larger scale, but when the causes are as different for each person as we are as individuals, addressing the issue can be intensely complicated.

Western’s new suicide prevention program B.R.A.V.E., Building Resistance and Voicing Empathy, encompasses all of the university’s resources into one program. B.R.A.V.E. focuses on helping students who are dealing with depression and suicidal thoughts by giving them the tools to support each other, according to B.R.A.V.E.’s pamphlet.
Vincent began volunteering with B.R.A.V.E. after graduating in spring 2013. He was drawn to the program because of its focus on peer education, helping students recognize signs of depression and thoughts of suicide in others, he says.

After losing his friends, Vincent went through a period of depression as well as suicidal thoughts, he says. "Being a student, being friends with them, your first reaction is to put a lot of blame on yourself and kind of look at what more you could have done, and family members experienced this too,” Vincent says.

Once he opened up to counselors and friends, he found that the thoughts he was wrestling with were relatable to others going through similar struggles and he felt compelled to help them, he says. "Originally I was really put off to the idea of going to talk to a counselor about my issues,” Vincent says. "'But I found it really helpful.'

When he was first deciding whether or not he wanted to become more involved with suicide prevention he met someone who ended up helping him make the decision. "We were in class and our professor asked us, 'What do you want to do after you graduate?'” Vincent says.

Vincent told his professor and the class he wanted to go into suicide prevention because he’d not only dealt with his own depression and suicidal thoughts, but had also lost two of his friends to suicide. Two months after sharing his story, a student from that class contacted him and asked if they could meet up.

"We went out to grab a beer, and I think after 10 minutes of just chatting, all of a sudden he threw out that he himself was dealing with suicide and was literally seconds away from doing it,” Vincent says. "’Then [he] thought about what I had talked about in class and realized he doesn’t want to be in that state anymore. He wanted to be able to talk about what he went through.’

The student was struggling with his recovery from a heroin addiction, Vincent says, but was able to share with him how he was feeling. Vincent recalled the classmate telling him, "’You being able to go into class and talk about that, I’ve thought about that every since you’ve done that.’"

"It really changed my mindset on things and at that moment I realized, ‘OK, I really need to stick with this,’” Vincent says.

In 2013, Western received a $294,948 grant to put toward suicide prevention from the Substance Abuse and Mental Health Services Administration — an agency within the U.S. Department of Health and Human Services.

The creation of the B.R.A.V.E. program was a multifaceted effort that involved on-campus collaboration from the Student Health Center, Counseling Center, Ethnic Student Center, Veterans Services, Associated Students and Associate Dean of the Woodring College of Education Karen Dade, says assistant dean of students at Western, and overseer for the grant project, Michael Sledge. The program was also created with help from To Write Love on Her Arms, a nonprofit movement centered on helping people struggling with suicide, depression and anxiety.

Since then, Western’s resource centers have been working with B.R.A.V.E. to build a better system for students to recognize suicidal symptoms, Sledge says.

Dr. Farrah Greene-Palmer, Western’s suicide prevention grant project manager, who has a doctorate in clinical psychology, recently started working at Western as head of the B.R.A.V.E. program. Her main goal is to change the perspective on how people address suicide. This includes helping students when they are in emotional distress and not waiting for a crisis point, she says.

"People are used to going to a medical doctor, you know, if you have flu symptoms or heart symptoms, you need to go see a doctor,” Greene-Palmer says. "’People don’t always think about, ‘Oh I’ve been sad for a really long time, maybe I’m having these other symptoms more than just regular sadness, and maybe I should go talk to someone.”

Greene-Palmer has been researching suicide since she was in graduate school at the University of Hawaii at Manoa. She studied suicidal thinking in children and adolescents, and its relation to anxiety symptoms, she says. Her focus is on figuring out how to identify the symptoms before they become a serious problem. Her research also involves identifying protective factors and how to enhance them.

"I’m really interested in the idea that some people think about suicide, and it never gets to the point of attempt,” Greene-Palmer says. "’So focusing on what’s protecting them against that even though they are at risk.”

The grant is being used to change bystander behavior — educating students on how to help others who may be struggling with suicidal impulses, Greene-Palmer says.

It has four sections: screening, gatekeeper training, outreach messages and men’s resiliency. Each of these sections is centered on what can be done to more efficiently reach students. In addition, B.R.A.V.E. is reaching out to at-risk identity groups including LGBTQ students, Native Americans, veterans and men.

Since Vincent began volunteering with B.R.A.V.E., he has been put in charge of organizing a few of their outreach events. For Movember, the month of November designated by B.R.A.V.E. as men’s mental health month, Vincent decided to base events off the American Cancer Association’s “no-shave November.”

His goal was to bring attention to men’s mental health with a mustache competition, fashion show, two-day mental health fitness fair and the Walk of Hope 5k.

"Don’t forget about the individual in front of you
Suicide is the second leading cause of death among college students, according to the American College Health Association. New programs and initiatives, such as Western’s B.R.A.V.E program, raise awareness to this issue that often times goes unheard.

in favor of statistics,” Greene-Palmer says. “Statistics are really helpful when we think about large prevention activities but, while they give some insight into trying to work with an individual, they’re not the whole story.”

For those torn between talking with someone, and keeping the pain to themselves, Vincent suggests just looking into what Western has to offer.

“Dealing from my own experiences, trying to just handle things yourself and ignoring the issue never helps,” he says. “It just continues to get worse and worse for you.”

They sat down at a bar: two students with little connection besides the class they shared at Western. One had a dream of helping people struggling with suicide; the other had been dealing with the nightmare of being seconds away from committing suicide.

In the next few minutes, one opened up to the other and sparked a foundation for healing.

RESOURCES FOR STUDENTS:

B.R.A.V.E.

VU 506

National Suicide Prevention Lifeline
1.800.273.TALK(8255)

Counseling Center

360.650.3164
Old Main 540

Office of Student Life

360.650.3706
Viking Union 506

Student Health Center

360.650.3400
2001 Bill McDonald Pkwy

Prevention & Wellness Services

360.650.2993
Old Main 560

University Residences

360.650.6565
Edens Hall

Associated Students

Viking Union

Emergency

Call 9.1.1
PULLING UP THE LONG GRAVEL DRIVEWAY, riders arrive for their weekly sessions with Julia Bozzo, director and creator of the Northwest Therapeutic Riding Center in Bellingham. As they walk past the modest yellow house where Julia and her husband reside, a friendly dog leads them to a covered arena behind the house. Rolling pastures surround the property as chickens and livestock chatter in the background.

This setting is a full-time job for Bozzo. Since opening the nonprofit in 1993, she and her husband have expanded the program from the original one rider and horse to the current program of seven horses and up to 100 sessions each year.

Therapeutic riding is good for brain development because it produces adrenaline, Bozzo says. People with disabilities may have less of an opportunity to experience these types of risk activities elsewhere.

“A lot of people with autism respond to pressure and rhythm. It also calms down the firing of the neurons and allows them to learn,” Bozzo says. “This is in addition to learning to ride the horse.”

Bozzo was born loving horses and has always been drawn to them, she says. She

▲ Joe is led around a barrel by a volunteer during a riding session.

▲ Volunteers assist Joe and a fellow rider as they learn to weave through barrels.
took lessons when she was a young girl and bought her first horse with money she earned from a paper route at the age of 12. Eventually, Bozzo studied animal science at graduate school and continued to pursue her passion for horses.

Joe, a young rider who was diagnosed with autism, has been attending the Northwest Therapeutic Riding Center for three years. His grandparents began taking him when he was 6 years old.

“This is one therapy that we see being good for him,” says Paulene Moa, Joe’s grandmother. “He has to pay attention and learn new things. It gives him a lot of confidence. He’s been waiting two long years to ride like he is now ... that’s a wonderful thing.”

Moa says her grandson’s favorite thing to do at the riding center is to trot with his favorite horse Kurt. When Joe first started riding two years ago he had two spotters on each side and today he is riding by himself. Moa says the therapy has helped him overcome much of his disability with improved communication and direction.

Each lesson is tailored to individual riders, says 23-year-old volunteer Jordan Bennett.
Therapeutic riding sessions are designed to help people with disabilities build confidence and horsemanship by creating a connection between humans and animals, while teaching responsibility.

“The thing about horseback riding is that it’s the only activity that simulates a human walk,” Bennett says. “Some of our riders can’t walk very well and when you put them on a horse they are getting that natural gate.”

Bennett, a Western student studying kinesiology, started her internship last June and has continued to volunteer in hopes of getting certified to become an instructor. She has always been drawn to horses and saw the riding center was a way to interact with them while helping others.

“I was looking for something where I could work with horses,” she says. “I have never been involved with therapeutic riding before this.”

Anybody can volunteer at the center, she says, even if someone has not had a lot of experience with horses.

Throughout the year, instructors schedule seven weeklong sessions. Volunteers come three days a week to help the riders learn how to groom, mount and ride the horses around the arena. While riders generally come to the center with the intention to improve their disability, Bennett says the overall goal is to have fun.

Riders come to the center with a wide range of physical and mental disabilities, ranging from autism to hip problems.

“I think [horse therapy] is more holistic, meaning when you ride the movement of the horse goes through your whole body,” says Bozzo. “There is a connection with the whole animal and it encompasses many, many aspects of many, many therapies. For example, it can be good for your respiratory system.”

Bozzo believes horses’ abilities to help people with disabilities makes them some of the most amazing animals in the world, she says.

“I really enjoy putting together all the moving pieces in the organization — the volunteers, the horses, the riders, the families, the staff and the donors,” Bozzo says. “When everyone works together, we create life-changing experiences for members of our community.”

Bozzo’s main goal is for people to understand the value of the horse-human relationship.

To accomplish this goal she wakes up at 6 a.m. and begins her day feeding the horses, cleaning their stalls and preparing them for lessons. She recruits volunteers, prepares all the horses for the riders, answers emails, attends board meetings and tends to the horses for the evening. For Bozzo, there is always work to be done, but this is work she thoroughly enjoys.

As she leads the horses out of the arena and ends the day’s last lesson, the setting sun glows over the barn, leaving a sense of tranquility and calmness for riders and animals alike.
Erin Aldag spent her summer volunteering at a hospital in Huancayo, Peru. 

The story is about a pre-med student named Erin Aldag, who volunteered at a hospital in Huancayo, Peru, to observe procedures that would not be possible in the United States due to strict privacy laws. Aldag observed operations such as an eight-finger amputation, a gallbladder removal, and non-medicated births.

Unlike operating room protocol in Peru, the United States requires patient and surgeon consent in order to observe operations, according to Rebecca Noel, a registered nurse in Whatcom County. 

“In most teaching hospitals, they allow students in [operating rooms] as long as the surgeon and the patients are OK with it,” Noel says.

However, with the privilege of watching an operation, students must fill out paperwork before observing surgeries in the United States.

In the United States, strict privacy laws protect patient identity and health information. Because similar laws don’t exist in Peru, Aldag was able to observe several operations, including an eight-finger amputation, a gallbladder removal, and non-medicated births.

Aldag’s time in Peru validated her desire to go forth with medicine, gave her an appreciation for the United States health care system, and cultivated a newfound love for traveling.
IN PURSUIT

STORY AND PHOTOS
BY DANIELLA BECCARIA
OF
PERFECTION
The life of a young ballerina
Syvertson warms up at the barre during her Wednesday evening ballet class. Classes are usually 90 minutes long and begin with barre exercise.

“Five minutes until curtain,” someone says over the intercom as nerves tense and hearts race. For Delei Syvertson, a 15-year-old girl aspiring to be a professional dancer, the seconds before stepping onstage are filled with a nervous excitement that changes with each role she performs.

“It’s like all adrenaline,” she laughs. “You have to pee really bad for 20 seconds and then it stops.”

Syvertson started dancing when she was three or four at Dancing for Joy in Bellingham. She began with contemporary and jazz, but eventually found her way to ballet after her mom suggested it. At first she hated ballet, but after she transitioned to the Northwest Ballet Theater in downtown Bellingham she began to fall in love with it.

Outside of school Syvertson spends around 16 hours dancing each week. Sometimes balancing school and ballet can be difficult, especially when she has less free time than her friends at school, she says.

Director of Northwest Ballet Theater John Bishop cast Syvertson as Lucy, one of the lead roles, in his original production of Dracula. She felt this role helped her strengthen her technique and partnering skills.

Syvertson hopes to attend a dance program at either the University of Washington or Cornish College of the Arts.

Even though she is constantly busy with school and ballet, Syvertson can’t imagine her life without dance, she says.

“Dance is my life.”
During dress rehearsal for Dracula, Syvertson laughs with her friends who are like family to her. “They’re like my sisters,” she says. “They’re always there for me and they care.”

Syvertson takes the hand of her director, and fellow performer, John Bishop during dress rehearsal for Dracula.

During dress rehearsal for Dracula, Syvertson laughs with her friends who are like family to her. “They’re like my sisters,” she says. “They’re always there for me and they care.”

Tiptoeing carefully onstage, Syvertson breaks in new pointe shoes just 20 minutes before her opening performance of Dracula at McIntyre Hall in Mount Vernon.

Careful not to singe her fingers, Syvertson burns the end of her pointe shoe ribbons to prevent them from fraying.
THE FUNERAL DIRECTOR PASSES OUT FELT-tipped pens as friends and family approach their loved one’s casket to sign their last goodbyes. What was once a clean, bleached-oak surface is now a rainbow-colored whiteboard covered with “I’ll miss you” and “be good buddy.”

Ed Wahl, 74, is reliving one of the most memorable gravesite ceremonies he has experienced. “To me, that was extremely satisfying to watch,” he says.

Wahl has been an embalmer and funeral director in the death care industry for more than 50 years. After high school, his 17-year-old self was fascinated with the mortuary business. At that time, it was a very secretive business, he says. Today, Wahl continues to help people through the grief of loss at Moles Farewell Tributes in Bellingham.

Death care industry workers observe various rituals surrounding death and grief. Often, their perspectives of life and death evolve the more they observe this process.

“It’s the little things, like I won’t hang up the phone with a loved one without saying ‘I love you,’” says Brian Flowers, a funeral director at Greenacres Memorial Park in Ferndale.

In his six-and-a-half years as a funeral director, Flowers has seen a trend in how people manage grief and death.

“[In this country as a whole], we’re afraid of death terribly and we try to deny it and sweep it under the carpet and ignore it and sanitize it,” Flowers says. “We let professionals handle it and we don’t engage in the realities and power and importance that death has.”

One way Flowers helps people confront grief is to empower the families with funeral director jobs they can do themselves, such as closing the casket at the end of the ceremony.

During one ceremony, Flowers let the father use the shovel to bury his son. In the middle of winter, the wind howled and picked up dust from a foot-and-a-half of snow as the family and friends walked in procession carrying the casket by a hand-drawn cart. They approached the gravesite behind a six-foot berm in the meadow as the son was propped up on a custom casket created by his father.

Flowers and other employees lowered the casket into the ground and stepped back as friends and family dropped one thousand paper cranes into the grave. The father began to bury his son, with tears trickling down his face. After digging for 45 minutes, he approached Flowers, shook his hand and said, “Thank you, it’s been a pleasure.”

From initial death to burial, the body goes through a three-step procedure including disinfection, pre-viewing restoration and preservation. As an embalmer and funeral director, Wahl participates in the entire process.

In addition to frequently observing the grieving
113 calls per year and has three full-time and four part-time employees, according to the NFDA.

The challenge for Troy Cummings, a park technician at Bayview Cemetery in Bellingham is dealing with other people’s varied ways of grieving and remaining accepting to the differences.

“You really have to be a middleman, even though in your head you have an opinion of what you believe,” he says.

Cummings, 48, observes ceremonies from all backgrounds, including Muslim, Jewish, Christian, Buddhist and non-religious. The major part of his job is making the park presentable and approachable. He coordinates burials, installs headstones, maintains water lines and digs graves. One of the largest stones he has installed is the “Sitting Angel,” 5-foot tall, 3-foot wide gray headstone that displays a hand-carved angel sitting over the gravesite.

Even though the Bayview Cemetery maintains a 60-40 average ratio of burials to cremations, the cremation rate in the United States continues to rise. In 2012, the cremation rate was 43.2 percent,
and is projected to increase to 48.8 percent by 2017, according to the Cremation Association of North America. Flowers views this increase as a transitional period in United States culture.

“We’re in a place in our culture where we’re trying to figure out new rituals,” Flowers says. “It’s fascinating participating in that process and trying to craft those new rituals for families.”

People are tending to cremate remains because it can be more private and can have a do-it-yourself aspect, he says. Spreading the ashes at a favorite location, loading them into shotgun shells, mixing them into tattoos or shooting them into orbit in space are some new rituals people are conducting.

Helping others through a difficult period of life by removing the burdens of paperwork and administrative technicalities helps families heal, Flowers says. Workers in the death care industry often view themselves as guides that simplify this emotional time, making it easier for people to process the event and move on.

After many years in the business, Wahl has observed firsthand the evolution of how the general population views the cemetery environment.

“Every morning, there [are] people jogging through the cemetery,” he says. “It’s becoming a park rather than a place to be feared.”

In many cases, the modern-day funeral has become a celebration of life, rather than a time to dwell on death.

▲ Flags blow in the wind at a memorial for military veterans at Bayview Cemetery.
LIFE ON THE STRAIGHT EDGE

Modified life for a wider mindset

STORY BY KATELYN DOGGETT
Photos by Jake Parrish
IN A DIMLY LIT ROOM FILLED WITH a crowd of rowdy teenagers and young adults, five men take the stage. The lead singer grabs the microphone roughly. He begins yelling almost inaudible lyrics at the impatient crowd whose faces are masked in shadows. The next 46 seconds spark a worldwide subculture known as straight edge, which will continue for years to come.

“I’m a person just like you, but I’ve got better things to do than sit around and smoke dope,” shouts Ian MacKaye, lead singer of the hardcore punk band Minor Threat. While thrashing his body around during a performance of the band’s 1981 song “Straight Edge,” MacKaye helped create an idea that would ignite a lifestyle for many.

Being straight edge is a self-declared, intentional choice where adherents limit substances they put into their body, says nine-year straight edge Spencer Adams of Seattle. While limitations vary within the culture, most straight edge individuals refrain from consuming alcohol, tobacco and recreational drugs. For some, the lifestyle includes forgoing engagement in promiscuous sexual activity, avoiding caffeine, practicing veganism and rejecting prescription medications.

After getting in trouble for doing graffiti at the age of 13, Adams, now 22, went through a “personal renaissance” in which he thought about who he wanted to be, deciding to avoid mind-altering substances, he says. “In eighth grade a bunch of my friends and I were hanging out in a basement and stealing beers from one of their parents,” Adams says. “I remember being uncomfortable and revolted by the idea of it. That might have been the moment where I wanted to avoid all of it entirely.”

Some people draw X’s on their hands with black marker to represent being straight edge, a tradition derived from the practice of bartenders drawing marks on underage hands to signify they are too young to drink, Adams says.

There are magazines, clothing companies and bands dedicated to the straight edge lifestyle; adherents can go to these for inspiration and to find comfort knowing there are others living similar lives.

For hardcore punk fan Ted Kornegay, 20, music influenced his decision to live a straight edge life avoiding alcohol, drugs and caffeine. In middle school and high school Kornegay listened to bands that identified as straight edge, he says. He remembers the moment he first heard Minor Threat’s song “Straight Edge” and thought it embodied the meaning of being punk rock — thinking for yourself and making your own decisions.

Music still remains an essential part in many straight edge lives, but it has grown beyond the punk scene, Adams says. He likes that the hardcore scene provides music with a message, but that he chose to disassociate himself with that scene and made the choice to live his life without drugs and alcohol independent from the movement.

For self-declared straight edge Western Washington University student Dalainee Viernes, 19, the decision to abstain from alcohol stems from a history of substance abuse and is about taking control of her mental health. She was diagnosed with major depression during the summer of 2014, and alcohol is known to lead to or worsen mental health issues, she says.

Being straight edge has unintentional benefits, Adams says. If someone doesn’t drink, that’s more money in his or her pocket, Adams says. The average college student spends nearly $900 per year on alcohol, according to the University of Pennsylvania.

About 80 percent of college students consume alcohol, and half of those students engage in binge drinking, according to statistics found by the National Institute on Alcohol Abuse and Alcoholism. Also, around 51.9 percent of individuals age 18 to 25 have used marijuana in their lifetime, according to the 2013 National Survey on Drug Use and Health. Despite these statistics, straight edge individuals still avoid drinking after they are of legal age to do so.

The straight edge movement is about self-respect and utilizing one’s ability to make a conscious decision of rejecting the societal norm of intoxication, Kornegay says. While straight edge people keep their bodies free of harmful substances, it’s not merely about the health benefits.

“I started on a lot of introspection and soul searching really early because I was idle,” Adams says. “I’m four years ahead of a lot of
people who started drinking in high school.”

Seeing his peers become involved with alcohol helped Kornegay realize he wasn’t interested in living that way. He considered himself straight edge for eight years until October 2013 after starting at Western. After experimenting with drugs and alcohol, he hit a breaking point in August 2014. He realized that by drinking and getting high he didn’t feel like himself anymore, arousing the decision to live a sober life again, he says.

Likewise, Viernes considered herself straight edge during her four years of high school, but took a yearlong break her freshman year of college at Western until giving up alcohol once again before the next school year. She made the back-and-forth switch because she wanted to experiment and believes being straight edge is about a choice of what the individual is comfortable doing.

“Be aware of what you want and know that not drinking is what you want to do, and not smoking is what you want to do,” Viernes says.

Adams encourages taking time to cut out drinking or smoking for a change of perspective but also likes to keep an open mind to things he abstains from. Similar to Kornegay, Adams says he took his first drink of alcohol at the age of 19, but soon reverted back to his straight edge lifestyle and only on very rare occasions has an alcoholic drink.

“When you remove something that you rely on, or are used to, it opens up space to do something else or reflect on that things place in your life,” Adams says.

Not only will those who attempt to go substance free reap the health and financial benefits of what it’s like being straight edge, but the individual may realize what is truly important in their lives without the crutch of alcohol, Adams says.

As Kornegay is rocked from side to side — in a sweaty crowd at a punk show, his mind remains clear and steady. He may be one of the few sober people who isn’t drinking a beer, or taking a hit from a joint, he says, but he finds himself aware of his surroundings. Enjoying life and music not masked by a dazed illusion.

“Life’s too short to spend it not mentally present,” Kornegay says. “I’ve learned that over time, alcohol and drugs are just another distraction from what life has to offer.”

**According to statistics found by the University of Pennsylvania**

**According to the 2013 National Survey on Drug Use and Health**

**According to the National Institute on Alcohol Abuse and Alcoholism**

**According to Centers for Disease Control and Prevention (CDC)**
As a 7-year-old in day care, Tonya Kniest could not stand to hear the other children cry. Although she wasn’t cognizant aware of it at the time, Kniest says it was around this age that she first knew she wouldn’t have children. In her mid-twenties, she realized this feeling was normal. Now at 38, Kniest’s feelings toward being childfree have grown stronger.

Whether a personal choice or due to circumstance, more women are choosing not to have children. Childfree lifestyles have increased among all ethnic groups in recent decades, according to a 2010 Pew Research study about new family types.

In 1980, 10 percent of women ages 40 to 44 had no biological children, and by 2008 that number grew to 18 percent. The study also notes that Americans’ attitudes toward childless women have become more approving. In 1988, 39 percent disagreed that “people who have never had children lead empty lives,” according to the General Social Survey. In 2002, 59 percent disagreed.

Kniest connects with other childfree friends online, which is how she discovered the Bellingham Non-Moms group on social networking site Meetup.com. Founder of Bellingham Non-Moms, Amber Oelschlager was inspired after reading an article by Lauren Sandler in Time magazine, titled “The Childfree Life: When having it all means not having children.” The article detailed another Meetup.com group called non-moms. She instantly connected with the sentiment and, in August 2013, created the group to meet similar women.

Oelschlager, 34, says as women have become more independent, the number of childfree women has increased. Children emotionally, financially and physically change a woman’s life, which is something childfree women evaluate, Oelschlager says.

“When I was younger, I would probably have said I wanted children, but when I was 18 I don’t think I knew the responsibility of life,” Oelschlager says.

Today, the Bellingham Non-Moms group has approximately 60 members across a spectrum of ages from their 20s to 40s. Meet ups happen monthly and typically include movies, dinners and concert outings.

For Kniest, being a non-mom is the core of who she is. Within the group, she finds security in being around other women passionate about not having children.

“We can sit together and not talk about diapers and babies and all the things that really don’t interest me … it’s really nice, almost freeing,” Kniest says.

Fellow member Catalina Hope loves children, but doesn’t want any of her own. As a young girl, Hope watched her parents struggle while raising her and her many siblings. She swore she wouldn’t do the same.

Hope also observed her friends in the foster care system struggle without parents. While in college, she worked as a mentor for pregnant teens, where she witnessed the responsibility needed to raise children.

“I was learning from other people’s mistakes, basically,” she says.

Today, Hope spends her time with her husband of more than 20 years, and teaches at Whatcom Community College.

Although the Bellingham non-moms share similar perspectives about having children, each woman’s individual reasoning remains unique.
Plopped above Nelda Lautenbach’s twin-sized bed sits a carefully arranged portable desktop. A mobile tablet is positioned in place next to a phone equipped with felt pads to make dialing easier. An arms-length away rests a plastic water bottle with a pill to its side.

For Lautenbach, a resident of Lynden, movement is not always an easy feat. Diagnosed with Amyotrophic Lateral Sclerosis (ALS) in 2011, she has delicately arranged her home to make basic necessities accessible and user-friendly.

It may seem easy — a quick handshake, a single step. But what feels effortless to many is not as easy for those across the globe with ALS, also referred to as Lou Gehrig’s Disease. The disease caught the attention of many in summer of 2014 following the viral success of the ALS Ice Bucket Challenge, which prompted thousands to spread awareness and raise funds for the cause. As a result, the ALS Association raised
people’s eyes and ears,” says Rick Meek, chief development officer for the association’s Evergreen Chapter, which spans to Washington, Idaho, Montana and Alaska.

The widely-acclaimed social media phenomenon required an individual to pour a bucket of iced water on themselves following a nomination. Videos were typically posted to Facebook or Twitter, and nominees were encouraged to donate to the cause.

As a result, the ALS Association generated $113 million from July 29 to Aug. 28, Meek says. Regionally, the Evergreen Chapter brought in about $100,000 in that same time period — “And the number is still growing,” he says.

The ALS Association estimates that up to 30,000 people in the United States have ALS at any given time. The disease progressively degenerates nerve cells and motor neurons located in the brain and spinal cord. Over time, ALS patients lose the ability to control muscle movement, which may lead to complete paralysis and eventually death.

The disease is not contagious and can strike anyone, according to the ALS Association. While there is medication on the market intended to prolong life, there is currently no cure or treatment that stops or reverses symptoms.

LOOKING IN

When 68-year-old Lautenbach stopped feeling like herself about four years ago, she knew something was wrong.

“I always had a little twitch in my stomach,” she says.

“What’s wrong with me?” she wondered.

After spending time online researching her symptoms she started to realize that she could have ALS. She later received confirmation from a neurologist.

“I went, oh no. Oh no. Oh no. Oh no,” she says. Lautenbach admits she completely fell apart.

Now, Lautenbach spends most of her time at home in Lynden. She requires daily care to help her eat, shower and go to the restroom.

“Why this happens? I don’t know,” says her niece and caregiver Kelli Tuttle. “There is no rhyme or reason.”

Tuttle calls herself “the manager” and is at Lautenbach’s home four days a week, helping manage her day-to-day care, she says.

As late as 8 p.m., one of Lautenbach’s caregivers comes to her home to stay the night and prepare her for bed. By 7:30 a.m. the caregiver
“It’s kind of a mantra that I promote with people. About living with ALS, not dying with ALS.”

is out the door. At noon, her sister-in-law stops by to help her eat, and by 4 p.m. someone comes in to help her go to the bathroom and eat. The routine begins again the next morning.

“If you sit here all by yourself all day, it is pretty boring,” she says. “I never thought I’d be laying here not being able to drive my car.”

But despite the challenges Lautenbach encounters each day, Tuttle says she has a remarkable ability to remain positive.

“Nelda has had the best attitude that I’ve ever seen,” Tuttle says. “It is very rare that I see her in a down mood.”

While Lautenbach admits that life with such a physically debilitating disease is not easy, she takes it one day at a time. She says one of her biggest pains is having to trade in a seat at her grandson’s football game for a radio broadcast from home. But at any chance she gets, she praises her grandchildren’s accomplishments.

Although Lautenbach typically remains at home, she is quite often accompanied by friends and family. In fact, being alone seems to be a rare occurrence for Lautenbach, who was raised in the area. The support she has received since receiving her diagnosis has been overwhelmingly positive, she says.

Lautenbach is still in touch with friends from high school, she says. Some of whom she had not seen in 50 years visited her home to help build a ramp leading to her door.

“It’s unbelievable,” Lautenbach says. “One car after the other comes to visit.”

Support is extremely important for those with ALS, says Oliver Ross, full-time North Sound Care Coordinator for the ALS Association’s Evergreen Chapter.

Ross has worked with the ALS Association for about a year and a half and facilitates an ALS support group once a month at St. Luke’s Community Health Education Center in Bellingham.

“It is harder when you are in the community, to not be viewed as just the disease,” he says. “There is an alienation that I feel is just inherent with the disease.”

Ross is a professionally trained nurse and lived in Bellingham for several years. Now, he lives in Everett.

He says the best part of the job is encountering people who are living intentionally.

“It’s kind of the mantra that I promote with people,” he says. “About living with ALS, not dying with ALS.”

Ross got involved with the ALS Association after growing close with someone who had the
After his friend was diagnosed, Ross and two others became his caretakers. Following the death of his friend in 2009, Ross decided to get involved and has dedicated his time to working with the ALS Association. Now, his full-time job allows him to serve locations north of Snohomish County up to Alaska.

LOCAL SUPPORT

On top of donations flooding in from the summer of 2014’s Ice Bucket Challenge, volunteers from across the country have participated in fundraising events to support the ALS Community. The challenge attached a face to the disease and prompted the public to research and educate themselves on the disease, which impacts thousands each year, Meek says.

“Now we can have a conversation,” he says.

In Bellingham, the Evergreen Chapter, one of 38 Association chapters, hosted its annual Walk to Defeat ALS in September and saw a record number of participants. The local chapter brought in $76,917 in the walk, compared to $47,200 — the estimated goal the chapter had originally aimed to hit this year, Meek says.


In the past year, the ALS Association allocated 32 percent of their funding to public and professional education, and the remaining money went to research, patient and community services, fundraising and administration, according to the ALS Association.

Public education tops the list because it’s important, since those with the diagnosis are cared for by loved ones instead of medical professionals. Typically, Meek says, there is no therapy or clinical care and about 90 percent of patients with ALS experience the journey at home.

“It affects a village,” he says. “With any disease, it affects more than just the patient.”

The ALS Association could not survive without its base of volunteers, Meek says. Volunteers not only plan community events and fundraisers, but also support families directly, he says.

Some of the most motivated and committed volunteers have the disease, he says.

“They come to grips to the fact that [ALS] is irreversible,” he says. “Most of them try to build a life around their limitations.”

For Lautenbach, it is important to take in each day at a time. She says she is happy each morning, opens her eyes to a new day, and offers a few words of advice—

“Enjoy your lives and don’t complain,” she says. “Life can just change overnight.”

ALS patient Nelda Lautenbach, 68, uses her BiPAP machine to push air down her lungs. Lautenbach uses the BiPAP machine to help her breathe when she lies down to relieve pressure on her chest.
Under the floorboards of Fairhaven Pharmacy, Gordon Tweit surrounds himself with torn maps, jars filled with mysterious substances, 20th-century cameras and the smell of old, musty books. Tweit gave up his pharmaceutical license in 2013 after 61 years at the pharmacy. Born and raised in Bellingham, Tweit has experienced Bellingham’s transitions for the past eight decades and documented its history below the pharmacy through his preservations.