

**Catégories:** Nouvelles,

**Catégories:** ,,

## **Die Well, Live Fully: A Global Conversation**

This webinar launching Plenna and its new website took place on 24 September 2025

It addressed three themes addressing death and dying:

- Its value as part of life
- Navigating differences across languages, cultures, and borders
- Making it accessible and engaging using digital tools

See the recording: <https://www.youtube.com/watch?v=-zRt968ZReA>

Panelists:

Natacha Madaule – Director of palliative Genève, one of Switzerland's foremost palliative care organizations, championing holistic, patient-centered support for individuals and families facing life-limiting illness.

Michael Hebb – American cultural entrepreneur, chef, speaker, and storyteller. He founded Death Over Dinner in 2013 which has helped break death taboos – now held over 100,000 times in 30 countries.

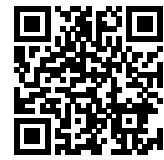
Ayman Abdelmohsen – Chief of the Sexual and Reproductive Health and Rights Branch, UNFPA, and a medical doctor and public health specialist with almost 30 years of international professional experience.

Mio Urade – Japanese medical ethicist and founder of the Japan Thanatophobia Association, with Nozomi Ichikawa – a cultural entrepreneur with over 20 years' social sector experience in community and well-being. Mio is a Board Member of, and Nozomi co-founded, Death Fes: a festival to foster public dialogue and innovative approaches to life and death.

Richard Smith – Former editor of the BMJ and co-chair of The Lancet Commission on the Value of Death, which outlines a “realistic utopia” for end-of-life care with five guiding principles to rebalance medical and communal involvement in dying.

Moderated by David Sunderland – Chair of Plenna

Summary



---

## Speakers & key takeaways

- **Natacha Madaule (Palliative Genève)**

- WHO-aligned palliative care: improves quality of life, reduces suffering, starts early (even at diagnosis), supports families.
- Switzerland's cultural mosaic (4 languages; Protestant/Catholic/Romansh differences) shapes rituals and attitudes.
- Assisted dying exists (Dignitas/EXIT). Its *availability* often reassures people; many register but ultimately opt for palliative care.
- Trend toward de-tabooing death via public campaigns, schools, and emerging eco-burials.

- **Michael Hebb (Death Over Dinner)**

- Created a free, beautiful, non-hierarchical ritual to build “death literacy” before crisis; >2M participants worldwide.
- Forest metaphor: the more you know the “night forest” (death), the less terrifying it is.
- Localised editions (Jewish, clinical with Cleveland Clinic, Brazil; many community variants). Gift model—no trademark, free to adapt.

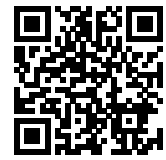
- **Mio Urade & Nozomi Ishikawa (Death Fest Japan)**

- Death Fest launched in Shibuya; rapid growth (~2,000 attendees last year; ~4,200 this year).
- Principles: neutrality, diversity, psychological safety. Using death as a doorway to well-being.
- Japan is exploring how to discuss assisted dying (not legal); interest is high.

- **Ayman Abdelmohsen (UNFPA)**

- Personal view from Egypt: religious fatalism can mask preventable maternal deaths.
- UNFPA's “three zeros”: end unmet need for family planning, preventable maternal deaths, and gender-based violence.
- Emphasis on skilled midwifery, functioning systems, reliable supply chains, and the importance of death/life literacy.
- Raises the economics of dying vs palliative care; invites more study.

- **Richard Smith (Lancet Commission on the Value of Death)**



- Diagnosis: in high-income countries death is over-medicalised, unfamiliar, and often hidden; paradoxically, many LMICs lack basic palliative care (e.g., morphine).
- **Realistic utopia (5 elements):**
  1. Address social determinants of death/dying/grief.
  2. Understand death as relational/spiritual, not merely medical.
  3. Build community networks/compassionate communities.
  4. Normalize everyday conversation and storytelling about death.
  5. Recognize death's value (gives life shape; "great equaliser").
- Assisted dying debates can consume oxygen; systems change is needed (Kerala cited as community-led model).
- Festivals work (London example drew thousands), but funding is hard.

## Q&A / discussion highlights

- **Assisted dying:** In Switzerland, legality increases *literacy* and *agency*; many sign up but don't use it. UK debate is intense; Canada's MAID (based on unbearable suffering) normalized quickly. Netherlands: legal 25 years; still complex, requires solid health system and strict criteria.
- **Economics:** Evidence suggests earlier palliative care improves outcomes and lowers costs; end-of-life spending is high (~10%+ of budgets on ~1% who die annually); concern that expensive late-life treatments crowd out broader determinants of health.
- **Culture change tools:** Death festivals, cafés, guided dinners, family workshops (e.g., Geneva's) break taboos and prepare families.
- **Note of caution:** Some clinicians feel conversations are getting harder, and even hospices risk re-medicalising death.

## Outcomes & next steps

- Plenna invites visits and sharing of the site; seeks support, donations, and partnerships

## Core message

A little preparation and open conversation go a long way—for individuals and families, and for societies learning to “die well” so we can “live fully.”



---

Plenna décline toute responsabilité quant à la teneur de ce document. Nous ne pouvons pas garantir l'exactitude des informations fournies par d'autres organismes et nous ne sommes pas responsables de l'utilisation que vous faites des informations figurant dans ce document ou relatifs à ce document.

**Date:** 2025-09-25

**Translation disclaimer:** Content originally written in English.