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Death Teaches Us About Life

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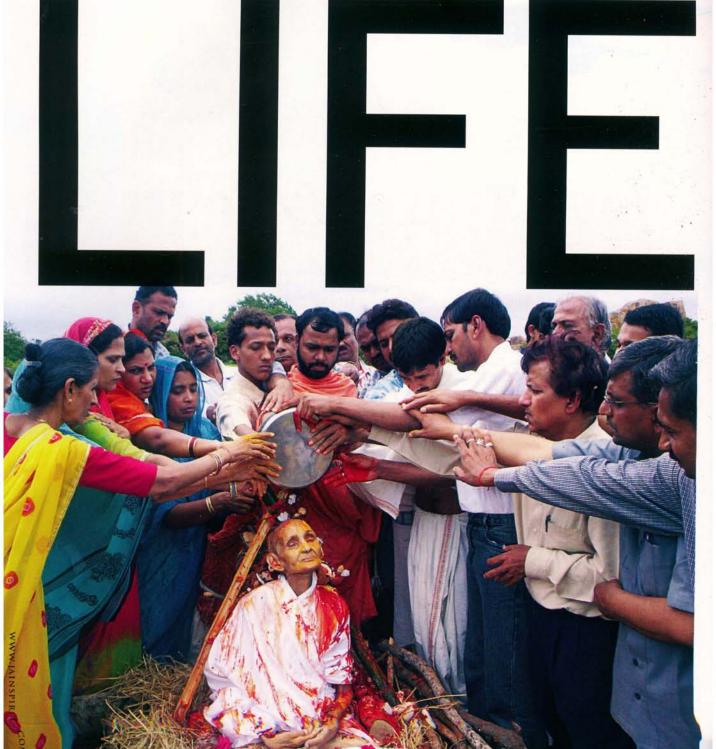
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DEATH TEACHES US ABOUT



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CHRISTOPHER KEY Chapple explains the science of fasting unto death

or the Jain community fasting to death celebrates a life well lived and emphasises the key aspects of Jain philosophy. First, it demonstrates a willingness to devote oneself in an ultimate sense to the observance of non-violence. By not eating, no harm is done to any living being. Second, it functions to burn off residues of karma that otherwise would impede the soul and cause further bondage. Like the Vedic practice of tapas, it purifies the soul by releasing the fetters of past attachment (nirjara).

In How We Die: Reflections on Life's Final Chapter, Dr. Sherwin B. Nuland of Yale University Medical School tells the story of Miss Hazel Welch, a 92-year-old resident of a convalescent home in Connecticut. One day, Miss Welch collapsed; she was diagnosed with operable peritonitis. Initially, she refused the operation, stating she had been on the planet long enough and did not wish to go on. Dr. Nuland talked her into the operation, and though her chances of surviving the operation were one in three, she did in fact live through the surgery. Her recovery proved agonizing. She required a breathing tube for nine days and, as Dr. Nuland writes, "she spent every minute of my twice-a-day visits staring reproachfully at me." As soon as she returned to her convalescent home she arranged with her trust officer from the bank that handled her estate to draw up papers assuring that she would, in the event of a future health failure, receive no more than nursing care. "She wanted nó repetition of her recent experience and emphatically said so in her written statement." Two weeks later she had a massive stroke and died in less than a day. Somewhat ruefully, Dr. Nuland writes that he wished he had abided by her wishes the first time and agreed not to perform the initial surgery. However, he also notes that his colleagues of the hospital's weekly surgical conference would disapprove, would retort with a

remark such as, "Does the mere fact that an old lady wants to die mean you should be a party to it?"

Nuland points out that eighty percent of American deaths occur in the hospital. As French historian Philippe Aries has noted, "Our senses can no longer tolerate the sights and smells that in the early nineteenth century were part of daily life, along with suffering an illness... the hospital has offered families a place where they can hide the unseemly ... the hospital has become a place of solitary death." Though he offers no easy solutions, Dr. Nuland presents the stark reality and pervasiveness of an alienated and fundamentally unhappy death process in America.

By contrast, I want to describe the death of Mrs. Vijay Bhade, a Jain woman suffering from sarcoma (cancer) in West Virginia. She was raised within the Jain community in India and was married to a Jain physician. Her struggle with illness led her to pursue treatment according to Western medical practices. She also applied an attitude toward death and dying, learned from and encouraged by the philosophy of Jainism and the traditional practice of sallekhana. Modern cures were sought but when these proved futile Mrs. Bhade actively pursued death in the traditional manner of gradually letting go, first of solid food, then liquids, then water. Her goal was to make a conscious transition into death. She died at home, surrounded with family and friends.

Dr. Bhade commented that the passing of his wife was a beautiful experience. At the age of 43, stricken with sarcoma, she underwent six months of treatment to no avail. When it was seen that nothing more could be done, she explained to her three children (aged 17, 15, 13) that she was leaving. During the last week of her life she took water and juice only. In the beginning of the week, she took a morphine drip for a time, but then decided to do without it; when she stopped the morphine,

she no longer experienced pain. On the morning of her death, she called her friends and relatives at 4 a.m. and asked them to come to the house. She took a bath and did pooja. She asked for forgiveness of everyone (ksama) and talked with her family members. She chanted the Namokar Mantra, the Samadhi Marana, the Bharat Dharana, the Namo Siddhana and the Arhanta Siddha. Later in the morning she died alert and conscious. Those gathered were thrilled to witness the peacefulness of her passing.

On reflecting on the process of seeing his wife die, Dr. Bhade, as a physician analysed the differences between death in his Digambara Jain community in Maharastra and death in West Virginia. He noted that his exposure to death in India was somewhat limited, though in his home community he noted that many choose to fast at what was deemed to be the end of their lives. The munis or Jain monks take up the final fast when they can no longer keep up their vows. For instance, when their sight dims, the monks cannot effectively ascertain that no bugs have entered their food. Due to difficulty maintaining such basic practices of ahimsa, the monks will embark on a terminal fast. In the case of his own family, Dr. Bhade cited the instance of his mother. She experienced heart failure at the age of 74. She was offered but rejected angioplasty and went on a liquid diet. Eventually, she entered a period of total fasting and gave up her life in a fully conscious state.

Many of the younger and middleaged people have left West Virginia, seeking opportunities out of the state. Consequently, many elderly are left behind without a family in close proximity. The adult children en elderly Woo rare Hulds f their Hass Bhade ZIV minal Manager www.jainelibrary.org responsible for the care of their elderly parents generally see them only once a year. Consequently, they are interested in prolonging the life of their parents (perhaps out of guilt, Dr. Bhade surmises) and will agree to extraordinary measures. Dr. Bhade noted: "Terminal death is very painful. It can involve

...

PHILOSOPHY

three to six months of torture. In some cases, families want to do everything possible [to keep the person alive]... Elderly people lying there so helpless with feeding tubes are a horrible sight. In general, in India people do not suffer this way."

is to make people comfortable and that in many instances the prolongation of life with medical technology does not increase a person's comfort. In advocacy of fasting, he stated, "Fasting helps give up the attachment to this life. Desires decrease through fasting." Dr. Bhade's statements evoke basic Jain cosmology.

> Desire, including the desire to live, can be

> an obstacle to one's

ultimate happiness.

one prepares to let

go. By entering

By attenuating desire,

death in a process of conscious prayer, the

transition, according to

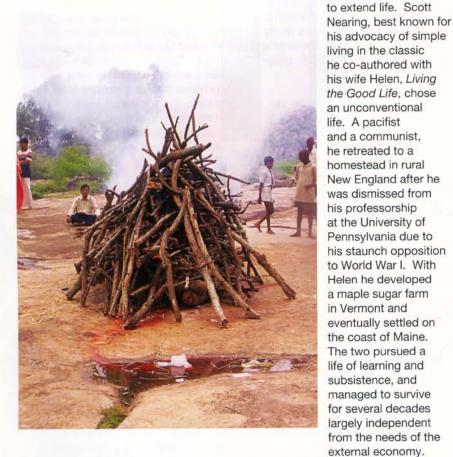
eyewitness accounts,

becomes painless. Not all Americans

extraordinary means

choose to use

"THERE IS AN END TO LIFE. THIS IS THE FIRST STEP. PEOPLE NEED TO UNDERSTAND THIS... WHEN YOU ARE BORN, YOU ARE GOING TO DIE."



Dr. Bhade, for religious, practical and economic reason greater awarene of fasting to dea conversation he end to life. This need to understa are born, you are suggests that the Jain Education International economic reasons, would support a greater awareness of the advantages of fasting to death. At the onset of our conversation he stated, "There is an end to life. This is the first step. People need to understand this... When you are born, you are going to die." He suggests that the role of the physician

They grew their own food, built their own houses and lived healthily on a vegan diet. In his 99th year, Scott Nearing lost his physical mobility. After several months of near-total debility (LaConte), he decided to stop eating. In her book Light on Aging and Dying, Helen Nearing describes the process as follows: "He drifted away and off,

like an autumn leaf from the parent tree, effortlessly and tranquilly. It was a benign and calm departure, well-timed and appropriate. He breathed low; then he breathed no more. He went somewhere else, with active volition. He had practised the art of dving well." One cannot help but notice the similarity between Nearing's passing and that experienced by Mrs. Bhade.

The Jain philosophy of life and death places the human in the centre of the universe. Only from human birth may one ascend to kevala, the realm of ultimate meaning and liberation. For the Jains, the key to entering this realm lies in the purgation of karma through the observance of non-violence. Through observance of a carefully constructed code of behaviour, both lay and monastic Jains aspire to cleanse themselves of karma and advance from the lower rungs of existence (gunusthana) toward liberation. Fasting on a regular basis, particularly during the Paryushan observances of late summer, helps advance a person in this spiritual quest. At the end of one's life, the final act of explation. the final sacrifice of one's body and karma involves the manner of one's death with the ideal passing taking place consciously, at the conclusion of a successful period of fasting. By contrast, the drive to extend human life in contemporary medical practice rather than allowing for a letting go, enforces a holding on to life that, for some, can be guite painful and distracting. In such circumstances, the inevitable passing into death becomes an arduous ordeal. The Jain attitude and approach to death, although controversial, provides an alternative non-violent approach to the ultimate rite of passage.

Christopher Key Chapple is Professor of Theological Studies at Loyola Marymount University in Los Angeles, where he teaches religions of India and Jainism. He has published twelve books, including 'Jainism and Ecology' and 'Reconciling Yogas: Haribhadra's Array of Views on Yoga'. •

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