



TRICYCLE TEACHINGS

Dying & Death

A TRICYCLE E-BOOK

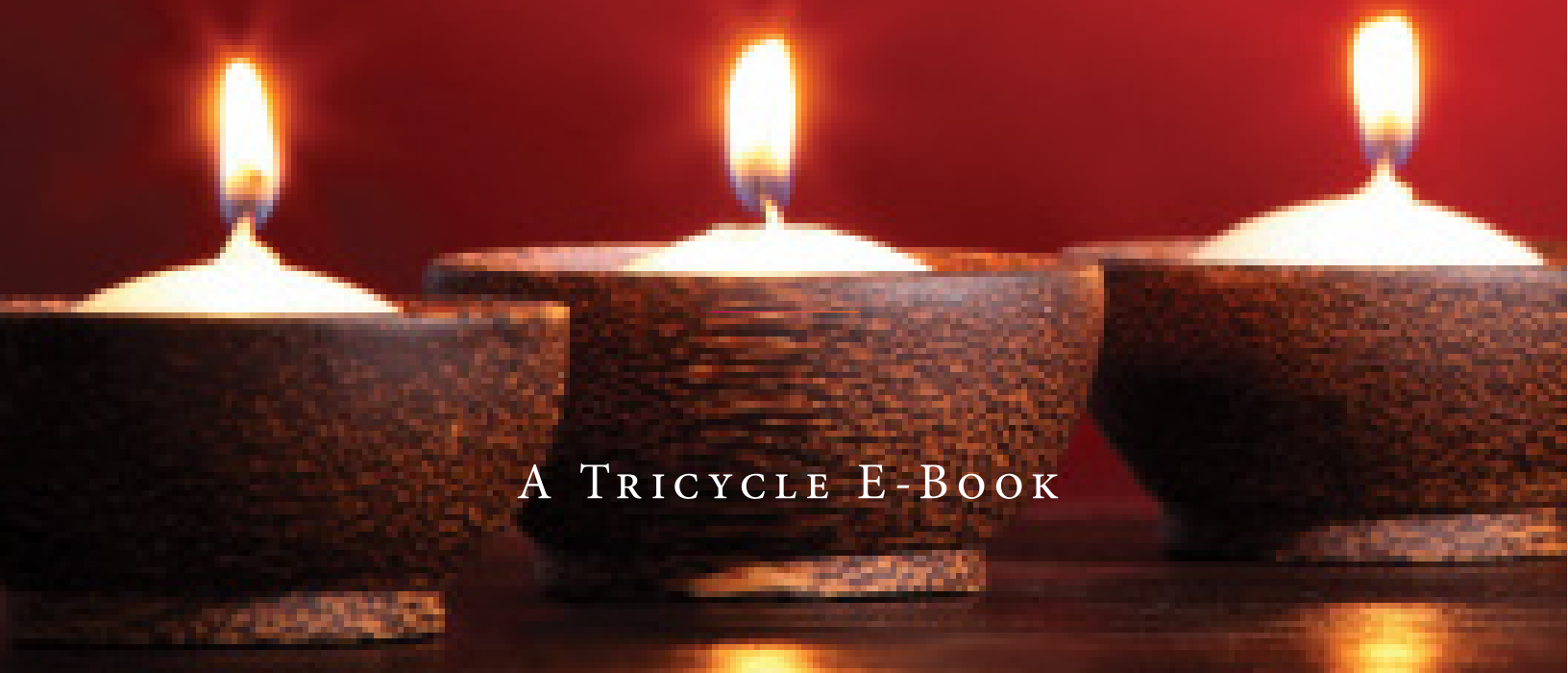


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DEATH POEMS

FUSE YAJIRO

A warrior named Fuse Yajiro grew ill in the spring, and by autumn he was dying. He wrote this poem:

Before long
I shall be a ghost
but just now
how they bite my flesh!
the winds of autumn.

After writing this poem so full of nostalgia for life, Fuse Yajiro recovered somewhat and lived on for another month. Something must have changed his mind about death, for in a mood of greater detachment, he wrote another death poem:

Seen from
outside creation
earth and sky
aren't worth
a box of matches.

Excerpted from *Japanese Death Poems: Written by Zen Monks and Haiku Poets on the Verge of Death* compiled by Yoel Hoffman © 1998.
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ONLY THE PRACTICE
OF DHARMA CAN HELP
US AT THE TIME OF
DEATH

Understanding the reality of death.

LARRY ROSENBERG

Throughout our lives, our body has been our closest companion. At times it has seemed to be who we are. We have spent hours washing and cleaning and clipping and oiling and combing and brushing, taking care of our body in all kinds of ways. We have fed it and rested it. We might have had differing attitudes toward it, sometimes loving it and sometimes hating it. But now this closest companion, which has gone through everything with us, will no longer be here. It will no longer take oxygen. It will not circulate blood. This body that for so many years was so full of vitality will be lifeless. It will be a corpse.

The first Panchen Lama says it well: “This body that we have cherished for so long cheats us at the time when we need it most.”

It is also true that this will not be the last change it will undergo. As a physical phenomenon, the dead body, if not cremated, will decompose,

and it is common in Buddhist practice to consider the stages of change and decay in order to bring the reality of death home.

Buddhist monks sometimes actually visit the charnel grounds to contemplate these other forms, to see our final fate, and there is a whole series of charnel ground meditations as well. The *Mahāsātipaṭṭhāna Sūtra*, the Buddha's main teaching on what to be mindful of in meditation, offers some guidelines as to how to practice with dead bodies at various stages of decomposition. For our purposes, visualization of these stages is more practical.

As with other contemplations, we first calm the mind with breath awareness; then through words and visualizations we create each stage and contemplate it. It is important to make a connection between the image and our own body. One traditional formulation is: "Truly, my body is of the same nature as the body being visualized. It won't go beyond this nature. It is of the same lawfulness." Our bodies don't belong to us but to nature. And nothing in nature has a stable form.

Reflecting in this way helps us come to terms with the nature of the body. We view it with wisdom, see that it can't be any other way. If fear or resistance comes up, we see that too with nonjudgmental awareness, watching it arise and pass away.

Ajaan Suwat taught me a version of this practice that I found extremely helpful. In his approach, you would start out by visualizing an inner organ of the body that you can easily picture, then watch what happens to it after death as the body goes through its stages of decomposition. When you reach the last stage—when everything is ashes and dust—visualize it re-forming to its starting point. Finally—and I found this crucial—focus on the mind that is aware of all this. See that it is completely separate. This understanding keeps the charnel ground contemplations from becoming overwhelmingly depressing.

Both of my parents instructed me to have them cremated when they died. My father died first, and I placed his picture and the urn with his ashes on the home altar where I meditate each day. In addition to my daily vipassana practice, I would find some time in most sittings to look at his picture and remind myself that the urn contained all that was left of his body and that I was not exempt from the same process. Such reflections sometimes aroused a powerful sense of how unstable my body is.

As I write these words, my mother's ashes now rest in an urn on the same altar. I am carrying out the same practice with her, and it is proving to be equally rich. Such teaching is the last gift that my extraordinary, generous parents were able to give me.

As with many deep truths, people tend to look at the death awareness meditations and say, Yes, I know all of that. I know I'm going to die someday. I know I can't take it with me. I know my body will be dust.

And as with other things—as with the law of impermanence itself—I would say we know it and we don't know it. We know it in our heads but haven't taken it into our hearts. We haven't let it penetrate the marrow of our bones. If we had, I can't help thinking we would live differently. Our whole lives would be different. The planet would be different as well.

If we really faced our fear of death—and these contemplations will bring it up, again and again—our lives would ultimately be lighter and more joyful. I don't propose death awareness to depress us. It enhances our ability to live more fully.

If we understood the reality of death, we would treat each other differently. Carlos Castaneda was once asked how we could make our lives more spiritual, and he said: Just remember that everyone you encounter today, everyone you see, will someday have to die. He's right. That

knowledge changes our whole relationship to people.

During death awareness practice groups that I've led in Cambridge, I have asked people to leave the building after lunch, to walk around town, and to know that everyone they see will die; everyone is their brother or sister in death. It is a wonderful thing to do, especially after a period of death awareness meditation. It gives you a whole new attitude toward people you encounter.

Finally, life is a great teacher and death is a great teacher. Death is all around us, everywhere. For the most part—following the lead of our culture—we avoid it. But if we do open our hearts to this fact of our lives, it can be a great help to us. It can teach us how to live.

Larry Rosenberg is founder and guiding teacher of the Cambridge Insight Meditation Center in Cambridge, Massachusetts, and author of *Breath by Breath: The Liberating Practice of Insight Meditation*. This is an excerpt from *Living in the Light of Death: On the Art of Being Truly Alive* (Shambhala Publications, June 2000) by Larry Rosenberg with David Guy. Copyright © 2000 by Larry Rosenberg. Used with permission from Shambhala Publications, Inc.

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BIRTH AND DEATH

Eihei Dogen (1200–1253) left Japan to study in China and then brought Zen Buddhism back to his own country. The seminal philosophical force behind Japanese Soto Zen, Dogen Zenji is revered today for the clarity of his insights, for his passion, and for his poetry. The following fascicle is from *The Treasury of the True Dharma Eye*, Dogen's most significant work.

EIHEI DOGEN

“**B**ecause a buddha is in birth and death, there is no birth and death.” It is also said, “Because a buddha is not in birth and death, a buddha is not deluded by birth and death.”

These statements are the essence of the words of the two Zen masters Jiashan and Dingshan. You should certainly not neglect them, because they are the words of those who attained the way.

Those who want to be free from birth and death should understand the meaning of these words. If you search for a buddha outside birth and death, it will be like trying to go to the southern country of Yue with your spear heading toward the north, or like trying to see the Big Dipper while you are facing south; you will cause yourself to remain all the

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more in birth and death and lose the way of emancipation.

Just understand that birth-and-death is itself nirvana. There is nothing such as birth and death to be avoided; there is nothing such as nirvana to be sought. Only when you realize this are you free from birth and death.

It is a mistake to suppose that birth turns into death. Birth is a phase that is an entire period of itself, with its own past and future. For this reason, in buddhadharma birth is understood as no-birth. Death is a phase that is an entire period of itself, with its own past and future. For this reason, death is understood as no-death.

In birth there is nothing but birth and in death there is nothing but death. Accordingly, when birth comes, face and actualize birth, and when death comes, face and actualize death. Do not avoid them or desire them.

This birth and death is the life of buddha. If you try to exclude it you will lose the life of buddha. If you cling to it, trying to remain in it, you will also lose the life of buddha, and what remains will be the mere form of buddha. Only when you don't dislike birth and death or long for them, do you enter buddha's mind.

However, do not analyze or speak about it. Just set aside your body and mind, forget about them, and throw them into the house of buddha; then all is done by buddha. When you follow this, you are free from birth and death and become a buddha without effort or calculation. Who then continues to think?

There is a simple way to become a buddha: When you refrain from unwholesome actions, are not attached to birth and death, and are compassionate toward all sentient beings, respectful to seniors and kind to juniors, not excluding or desiring anything, with no designing thoughts or worries, you will be called a buddha. Do not seek anything else.

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“Birth and Death” is excerpted from *Moon in a Dewdrop: Writings of Zen Master Dogen*, translated by Kazuaki Tanahashi. Translation copyright © 1985 by the San Francisco Zen Center. Reprinted by permission of North Point Press, a division of Farrar, Straus and Giroux, LLC.

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AGING INTO DYING
AND DEATH

Longtime Zen practitioner, haiku poet, and secretary of the U.K. Network of Engaged Buddhists, Ken Jones offers wisdom on aging and death. The following is an excerpt from a pamphlet—*Ageing: The Great Adventure*—that grew out of a series of workshops Jones conducted.

KEN JONES

Buddhist writer Larry Rosenberg maintains that “we’re not really afraid of dying—we’re afraid of the idea of dying.” The discussion of ideas about dying has become quite fashionable—though they are not usually recognized as no more than ideas. The Tibetan Book of the Dead and its famous variant, Sogyal Rinpoche’s Tibetan Book of Living and Dying, have become bestsellers. At any public meeting on Buddhism you can be sure of at least one question about rebirth.

In meditative inquiry, it is important to distinguish between ideas and personal experience. Buddhist ideas about death are an expression of the experience of highly evolved yogins, raised in or living in traditional, spiritually saturated cultures. Such ideas can sustain faith. They are also valuable in that they may contain specific meditation and visualization instructions, which in gifted and advanced practitioners can lead to altered states of consciousness.

However, it is all too easy to forget that these are mere ideas, which

we may have made into fascinating and consoling mind pictures. They then become, in effect, evasions, in that they make it more difficult to sustain a don't know mind, empty and open to receive whatever gifts of insight may be offered. The ancient Chan scripture *On Trust in the Heart* warns us that, of death and all the grave and constant concerns of life, "the more you think about it, the more you talk about it, the further from it you go. Put an end to wordiness and intellection and there is nothing you will not understand. For what can words tell of that which has no yesterday, tomorrow, or today?"

Similarly, many centuries later, the great Zen master Dogen, who emphasized death as the central concern of practice, urged us not to analyze it or speak about it. "Just set aside your body and mind, forget about them, and throw them into the house of Buddha; then all is done by Buddha."

If we ask ourselves questions like "What is my death?" and "Where do I go after I die?" we may be able to come up with some interesting ideas. But in the shadow of death, we shall need more than fascinating explanations to sustain us. Our salvation lies in sustaining holy ignorance, the open, receptive mind of bare awareness. This requires faith, courage, and determination, because when we penetrate beyond ideas about dying, we uncover what we really fear, and with good reason—our feelings about dying.

From "Ageing: The Great Adventure; A Buddhist Guide" © 2003 by Kenneth Henry Jones. Reprinted by permission of Pilgrim Press, Abingdon, Wales.

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THE LUCKY DARK

A guide to allowing a gentle and meaningful death
for our loved ones and for ourselves

JOAN HALIFAX

I grew up in the South, and one of the people I was closest to as a girl was my grandmother Bessie. I loved spending summers with her in Savannah, where she worked as a sculptor and artist, carving tombstones for local people. Bessie was a remarkable village woman; she often served her community as someone comfortable around illness and death, someone who would sit with dying friends.

And yet when she herself became ill, her own family could not offer her the same compassionate presence. My parents were good people, but like others of their generation, they had no preparation for being with her as she experienced her final days. When my grandmother suffered first from cancer and then had a stroke, she was put into a nursing home and left largely alone. And her death was long and hard.

This was in the early 1960s, when the medical establishment treated dying, like giving birth, as an illness. Death was usually “handled” in a clinical setting outside the home. I visited Bessie in a plain, cavernous room in the nursing home, a room filled with beds of people who had all been effectively abandoned by their kin—and I can never forget hearing her beg my father to let her die, to help her die. She needed us to be present for her, and we withdrew in the face of her suffering.

When my grandmother finally died, I felt deep ambivalence, sorrow, and relief. I looked into her coffin in the funeral home, and saw that the terrible frustration that had marked her features was now gone. She seemed at last at peace. As I stood looking at her gentle face, I realized how much of her misery had been rooted in her family's fear of death, including my own. At that moment, I made the commitment to practice being there for others as they died.

Although I had been raised Protestant, I turned to Buddhism not long after my grandmother's death. Its teachings put my youthful suffering into perspective, and the message of the Buddha was clear and direct: Freedom from suffering lies within suffering itself, and it is up to each individual to find his or her own way. But Buddhism also suggests a path through our alienation and toward freedom. The Buddha taught that we should practice helping others while cultivating deep concentration, compassion, and wisdom. He further taught that enlightenment is not a mystical, transcendent experience but an ongoing process, calling for intimacy and transparency; and that suffering diminishes when confusion and fear change into openness and strength.

My grandmother's death guided me into practicing medical anthropology in a big urban hospital in Dade County, Florida. Dying became a teacher for me, as I witnessed again and again how spiritual and psychological issues leap into sharp focus for those facing death. I discovered caregiving as a path, and as a school for unlearning the patterns of resistance so embedded in me and in my culture. Giving care, I learned, also enjoins us to be still, let go, listen, and be open to the unknown.

As I worked with dying people, caregivers, and others experiencing catastrophe, I practiced meditation to give my life a spine on which to hang my heart, and a view from which I could see beyond what I thought I knew. I was grateful to find that Buddhism offers many practices and

insights for working skillfully and compassionately with suffering, pain, dying, failure, loss, and grief—the stuff of what St. John of the Cross has called “the lucky dark.” That great Christian saint recognized that suffering can be fortunate, because without it there is no possibility for maturation.

Through the millennia and across cultures, the fact of death has evoked fear and transcendence, practicality and spirituality. Neolithic grave sites and the cave paintings of Paleolithic peoples capture the mystery through bones, stones, bodies curled like fetuses, and images of death and trance on cave walls.

Even today, whether people live close to the earth or in high-rise apartments, death is a deep spring. For many of us, this spring has been parched of its mystery. And yet we have an intuition that a fragment of eternity within us is liberated at the time of death. This intuition calls us to bear witness—to apprehend a part of ourselves that has perhaps been hidden and silent.

Giving care to a dying person and his or her family is an extraordinary practice that puts one in the midst of the unknowable, the unpredictable, the breakdown of life. It is often something that we have to push against. Physical illness, weakness of mind and body, being in the crosshairs of the medical establishment, losing all that the dying person has worked to accumulate and preserve—all these issues can be part of the hard tide of dying. A caregiver can be there for all of that, as well as for the miracles and surprises of the human spirit. And she can learn and even be strengthened at every turn. As we give care, we can enter onto a real path of discovery—if only we let ourselves. Whether caregivers are family or professionals, they walk a path that is traceless, humbling, and often full of awe. And like it or not, most of us will find ourselves on it. We will accompany loved ones and others as they die.

If we are fortunate, we will be present for our own death. A dying person can meet the precious companions of truth, faith, and surrender. Grace and space can enter that person like a river flowing into the ocean or clouds disappearing into the sky. For practicing dying is also practicing living, if we can only realize it. The more truly we can see this, the better we can serve those who are actively dying and offer them our love without condition.

. Years ago, when I visited Biosphere 2 in Arizona, I asked the scientist taking me around why there were wires tied to the trees and attached to the Biosphere's frame high above us. He explained that since there was no wind in the Biosphere, the trees had nothing to resist. As a result, they had grown weak and needed to be held up. Like our body and bones, we need something to resist against to make us stronger.

How then can we let the process of dying tear us apart and, by so doing, strengthen us? How can we truly be with dying, this invisible road of initiation that will open for all of us?

A spiritual practice can provide stability, which is as important for caregivers as it is for those of us actively dying. It can give us a refuge, a shelter in which to develop insight about what is happening both outside ourselves and within our minds and hearts. It can cultivate wholesome mental qualities, such as compassion, joy, and nonattachment—qualities that give us the resilience to face, and possibly transform, suffering. And a spiritual practice can be an island, a place where opening to uncertainty and doubt can lead us to a refuge of truth.

One dying woman described the experience of her meditation practice as being held in the arms of her mother. She said she wasn't escaping from her suffering when meditating; rather, she felt met by kindness and strength. As she let go into her pain and uncertainty, she realized the truth of not-knowing in that very surrender. This experience gave her much greater equanimity.

Our own feelings can be powerful and disturbing as we sit quietly with a dying person, bear witness to the emotional outpouring of grieving relatives, or struggle to be fully present and stable as we face the fear, anger, sadness, and confusion of those whose lives are going through radical change. We may want to find ways to accept and transform the heat or cold of our own mental states. If we have established a foundation in a contemplative discipline, then we may find stillness, spaciousness, and resilience in the storm—even in the storm of our own difficulties around dying.

Following the breath for a few moments is the best way I have found to settle the mind and body and prepare for any more complicated or potentially arousing practices. Often I use the breath as the object of my attention, because this very life depends on it. Furthermore, you can discover your state of mind by the quality of your breath—is it ragged or tight, shallow or rapid? Often you can calm yourself by regulating your breathing. Whenever things get fraught or scattered, you can always return to the breath for as long as you need to ground yourself again.

A meditation practice offers us the sister gifts of language and silence, gifts that often come to us arm-in-arm to help. Language brings crucial insights, while silence is necessary for tapping into that deep concentration, tranquillity, and mental stability within us. Contemplative strategies using language and silence prepare us both for dying and for caregiving. Some involve silence, focus, and openness, while others involve nurturing a positively oriented imagination, or cultivating wholesome mental qualities.

Often we feel that silence and stillness aren't good enough when suffering is present. We feel compelled to do something—talk, console, work, clean, help. But in the shared embrace of meditation, a caregiver and dying person can be held in an intimate silence beyond consola-

tion or assistance. When sitting with a dying person, I try to ask myself: What words will benefit this person? Does anything really need to be said? Can I know greater intimacy with her through a mutuality beyond words and actions? Can I relax and trust in being here without my personality mediating our tender connection?

One dying man told me, “I remember being with my mother as she was dying. She was old like I am now and was ready to go. I used to just sit with her, hold her hand . . . will you hold mine?” So we sat together in silence, with touch joining our hearts.

Where silence can hold a great intimacy, communication and words can serve to provide wisdom. We may rely on the gift of language—whether prayer, poetry, dialogue, or guided meditation—as a way to reveal the meaning in moments and things. Listening to the testimony of a dying person or a grieving family member serves the one speaking; it all depends on *how* we listen. Maybe we can reflect back in such a way that the speaker can at last really hear what he has said. And bearing witness like this also gives us, as listeners, insight and inspiration. Language can loosen the knot that has tied a person to the hard edge of fear and bring one home to compassionate, heart-opening truths.

Learning about death isn’t only for the dying—it is also for those who survive. Indeed, dying is not an individual act. A dying person is often a performer in a communal drama. Like our last will and testament, a legacy that materially benefits our survivors, we also leave a legacy of how we experience our death. And the bulk of that legacy comes from how we transition through the ultimate rite of passage—how we are able to be with our own dying.

Several years ago, Martin Toler, along with many other miners, died in the Sago Mine accident in West Virginia. Slowly dying in the thickening air of the mineshaft, the oxygen wicked up with every breath, Toler

used what precious little energy he had left in his life to write a note of reassurance to those closest to him—and to the millions of us who later heard about it, too.

From deep inside the earth, Toler addressed the entire world, beginning his note: “Tell all—I see them on the other side.” He promises his kin to meet them in eternal life, in the place that is deathless. He expresses for all of us the deep human wish that our connections will transcend the event of separation we suffer at the moment of death. “It wasn’t bad, I just went to sleep,” the note continues, and scrawled at the bottom, with the last of his ebbing strength, are the tender, unselfish words “I love you.”

I have often sat by the bedside of dying people with their relatives close at hand, waiting for those last words of love and hope. Being on the threshold between life and death gives an aura of mystery and truth to the final utterances of the dying. We feel we can somehow penetrate the thin veil between the worlds through the words of the dying one; those so close to death might know what we all long to know.

Toler’s last words honor the noblest lessons from our human connections: that life is sacred and relationship holy. Through the darkness, he reached out, not only to his family, but to the rest of us through his abiding and compassionate words. For, as the Buddha told his cousin Ananda: The whole of the holy life is good friendship. Our relationships—and our love—are ultimately what give depth and meaning to our lives.

What message do we want to leave behind when we die? When the poet Elizabeth Barrett Browning died, she uttered the word “beautiful.” “I am not in the least afraid to die,” exclaimed Charles Darwin. And Thomas Edison said only, “It is very beautiful over there.” These wise people on the threshold of death carry a message to the rest of us that

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death is our friend and not to be feared. What have they seen that we wish we could know? What is this mystery that all of us will enter?

All of these last words teach us how we can give over our spirit to the experience of dying—and how we may live in the meantime. They are testaments to the power of the human heart to transcend suffering and find redemption by encountering death fearlessly, and even beautifully. Thus, we come to understand the truth of impermanence, the intense fragility of all that we love, and that in the end, we can really possess nothing. Yes, we may meet each other on “the other side.” Yet we may also ask ourselves: Can we meet each other now? Knowing that death is inevitable, what is most precious to us today?

We cannot know death, except by dying. This is the mystery that lies beneath the skin of life. But we can feel something from those who are close to it. Martin Toler said, “I love you.” He said, in effect: Everything is okay. In being with dying, we arrive at the natural crucible of what it means to love and be loved. In this burning fire we test the practices that can hold us up through the most intense of flames. Please, let us not lose our precious opportunity to show up for this great matter—indeed, the *only* matter—the awesome matter of life and death.

EXERCISE

How Do You Want to Die?

In teaching care of the dying, I often begin by asking questions that explore our stories about death, including the legacies we may have inherited from culture and family. Looking at our stories may reveal to us what we believe will happen when we are dying, and open new possibilities for us.

We begin with a very direct and plain question: “What is your

worst-case scenario of how you will die?” The answer to this question lurks underneath the skin of our lives, subconsciously shaping many of the choices we make about how we lead them. In this powerful practice of self-inquiry, write it all down, freely and in detail—how, when, of what, with whom, and where you’ll die. Imagine your worst-case scenario. Take about five minutes to write from your most uncensored, uncorrected state of mind, and let all the unprescribed elements of your psyche emerge as you write.

When you are finished, ask yourself how you feel, how your body feels, and what emotions or sensations are coming up for you, and give yourself a few minutes to write down these responses as well. It is crucial at this point to practice honest self-observation. Then take another five minutes to answer a second question: “How do you really want to die?” Again, please write about this in as much detail as possible. What is your ideal time, place, and kind of death? Who will be there with you? And a second time, when you have finished, give some attention to what is happening in your body and mind, writing these reflections down as well.

If you can, do this exercise with someone else, so you can see how different your answers are. Your worst fears may well not be shared by others, and your ideas about an ideal death may not be someone else’s. My own answers to these questions have changed as time has passed. Years ago, I felt that the worst death would be a lingering one. Today I feel that it would be harder to die a senseless, violent death.

At a divinity school where I taught several classes on death and dying, one-third of the class answered that they wanted to die in their sleep. And in other settings where I have posed these questions, more people wanted to die alone and in peace than I would have guessed. Quite a few wanted to die in nature. Among the thousands of responses I have received to this question, only a few people said they wanted to die in a

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hospital, although that is in fact where most of us will die. And almost everyone wanted to die in some way that was fundamentally spiritual. A violent and random death was regarded as one of the worst possibilities. Dying painlessly and with spiritual support and a sense of meaning was considered to be the best of all possible worlds.

Finally, after exploring how you want to die, ask yourself a third question: “What are you willing to do to die the way you want to die?” We go through a lot to educate and train ourselves for a vocation; most of us invest a great deal of time in taking care of our bodies, and we usually devote energy to caring for our relationships. So now please ask yourself: What are you doing to prepare for the possibility of a sane and gentle death? And how can you open the possibility for the experience of deathless enlightenment at this moment and when you die?

BEING WITH DEATH

Four Basic Practices for the Caregiver

No matter how busy you are, you can bring simple contemplative elements into your being-with-death practice that will help you fearlessly follow the dying person’s lead. Here are four basic practices to help you be with dying:

1. SHARE PRAYER

Sharing prayer or another contemplative practice with a dying person also serves the caregiver’s well-being. When you find yourself caught up in the events around you or in your own hope and fear, slow down. Even stop. Cultivate the habit of attending to your breath continually; use the breath to stabilize yourself.

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2. SAY A VERSE

You can also use words to generate a state of presence and self-compassion when you are with a dying person. For example, every line of the following verse is like medicine to me. I use it in my own practice, and share it with other caregivers and dying people. On the inhalation say to yourself, “Breathing in, I calm body and mind.” On the exhalation: “Breathing out, I let go.” Inhalation: “Dwelling in the present moment.” Exhalation: “This is the only moment.” I learned a version of this from the Vietnamese Zen teacher Thich Nhat Hanh many years ago. It has been a good friend since.

3. COME TO YOUR SENSES

Another way to connect to the moment is to use your senses. Let them take you beyond your story into a bigger picture where you can follow the lead of the dying one and stay open and fearless. Look out the window at the sky for a moment. Listen attentively to the sounds in the room. Touch the dying person mindfully. Take a few sips of cool water. Breathe deeply and relax the tension in your body as you exhale. Remember why you are doing this work.

4. PRACTICE MOTHERLY LOVE

Tibetan Buddhists say that we have all been one another’s mother in a previous lifetime. Imagining every being as your mother isn’t always easy for many of us who have conflicted relationships with our mothers. But I can imagine a being who has given me and others life, protection, nourishment, and kindness. When I’m giving care to a dying person, I try both to give and receive kindness as if I were the dying one’s mother and to see the dying one as my mother, saying silently to myself, “Now it

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is time for me to repay the great kindness of all motherly beings.” Thinking of all beings with motherly love is a good reference point when I have fallen into automatic behavior, am feeling alienated, or am having trouble opening my heart.

Joan Halifax is a Zen Buddhist priest who heads the Upaya Zen Center in Santa Fe, New Mexico. Her books include *Shamanic Voices: A Survey of Visionary Narratives*, *Being with Dying: Cultivating Compassion and Fearlessness in the Presence of Death*, and, most recently, the photography book *Seeing Inside*.

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LIVING THE LIFE
YOU WISH TO LIVE

Stephen and Ondrea Levine, counselors and meditation teachers,
sit down with psychotherapist Barbara Platek to speak
about easing the transition from life to death.

ROGER JACKSON

Drawing on their roots in Vipassana meditation techniques, Stephen and Ondrea Levine have helped thousands approach death with equanimity and an open heart over the last 30 years. Now, they are learning to bring the same openness to their own lives—Ondrea is living with leukemia and lupus, while Stephen lives with a neurological degenerative condition. Some years ago, the Levines retired to the mountains of New Mexico to deepen their practice in the silence of the woods. Returning to an initial passion, Stephen has devoted much of his energy to poetry, and his collection *Breaking the Drought* channels his healing and insight into verse. In the following interview, the Levines speak with psychotherapist and author Barbara Platek about death, dying, and conscious living.

Why is it important for us to think about dying?

Stephen Levine: Because we are all going to die. If we could bring that reality into our heart, that would be a practice unto itself. The last time

Ondrea and I spoke with the Dalai Lama, he asked us what were working on. I told him we were writing a book called *A Year To Live*, which explores the practice of living as if the present year were our last. He wondered whether people who started this practice would run amok. In other words, if they imagined the end was coming, wouldn't they just grab a lady or a guy and a bottle of tequila and head for the beach? And that's what we thought as well. But the truth is, when people know they are going to die, that last year is often the most loving, most conscious, and most caring— even under conditions of poor concentration, the side effects of medication, and so on. So don't wait to die until you die. Start practicing now.

You actually spent an entire year doing this formal practice—living as though it were your last. How did the experience affect you?

SL: One of the things one notices in getting older or doing the year-to-live practice is how vain we are. We are so attached to how we appear in the world, in relationships. Simple embarrassment so often guides the way we interact with others. But when we do this practice of turning mindfully to the idea that we are going to die, we stop delaying our lives. We start catching up with ourselves.

Part of this process involves attending to the fear of death. When it is simply my fear, or my pain, we feel terribly isolated. But when it becomes the fear, the pain, there can be an expansion, an opening. If, when we are on our deathbed, we can think of ourselves as one of the ten thousand people who are dying, we can have a more universal experience, and this frees us from the terrible isolation of our suffering.

Ondrea Levine: I think the greatest benefit of the year-to-live practice is the opportunity it provides to reassess our priorities. When we worked

with people on their deathbed, we would often hear the following three complaints: I wish I had gotten divorced earlier; I wish I had taken a job for love of the work, not money; I wish I had played and enjoyed myself more. So the beauty of the practice is that we can evaluate our lives even before we are on our deathbed. If we are not living the life we wish to live, how can we change that now, while there is still time?

I can say this, because I have cancer. And I know that once you get that diagnosis, no matter how much you already know, something happens, everything becomes much more real. Ironically, it brings greater permission to be fully alive. I find it very exciting.

We have so few guides or myths to help us through the dying process. And yet the fact that we die is intimately related to our experience on this earth. Rather than honor or acknowledge what is essentially a great mystery, we are almost, as you put it, embarrassed by it somehow. How can we overcome this feeling?

SL: I think we are embarrassed by how much pain we have been in throughout our entire lives. Because we are embarrassed, we don't share this truth with one another. Of course there is fear there, too. We have fear around dying. That is natural. But the embarrassment is just that—embarrassment. We need to have mercy on ourselves. We all feel embarrassed. Actually, when we do speak about these things, when we do share our embarrassment, we experience relief. The holding back is what is hard.

We have seen people die without ever telling their families what was the matter with them, without ever sharing a single doctor's appointment, without ever even giving their loved ones a sense that they were near death. We need to be able to trust relationships. If two people can share their embarrassments, what a bond that creates.

You suggest that much of our fear of dying is actually a fear of pain or of losing control. Death, you say, is perfectly safe.

SL: Yes, people are mostly afraid of the negative things they have heard or learned about death. First of all, we have much better pain medication than we ever had before. It really can be adjusted to provide relief and comfort. So that aspect—dying in pain— has been mitigated to a certain degree. There is less of that extreme discomfort to face. But we are afraid of the images and ideas we have created about death.

OL: People are also afraid of the embarrassment of having someone bathe them or wipe their ass. They are concerned about this level of exposure, this lack of control. Most of us never have this experience in the course of our lives. So this can feel humiliating, and the thought of it can cause great concern. That's why it is helpful to have a best friend or a nurse we can trust. We have heard people say that as soon as they can't wipe their own ass they are going to kill themselves. They usually don't—but that just shows how deep the concern can be.

How useful are the Buddha's teachings as you now deal with Ondrea's cancer and your own illness?

SL: They are everything. That's what we are saying. If we do a practice, then when we come to a hard place we have something to build on. Love is the bridge.

How do you face the prospect of losing each other?

OL: It is sad. We cry. We are everything to each other. That's what keeps me eating well, taking supplements. As much love as we have, we know we will have to face the other side of it— which is horrible pain. But if we are not willing to go for the love because of our fear of the pain—well, we're never going to get the love we seek. When one of us dies, it is going

to break our hearts.

But you know, we have had the experience of people coming to us after they were dead—people come in dreams and in meditations. In fact, if someone you love has died, talk to him or her. Hear their voice in your head and tell them all the things you wanted to say. Don't be too rational, try it. Some part of us believes we will still be able to be in touch. Who knows? All we know is that we will love as well as we can.

What advice would you give to someone who is currently facing death— either her own or a loved one's?

SL: Be mindful. Be loving. Practice forgiveness.

OL: Don't put off anything. Any dream you have, anything that you always wanted to do—do it. I can't tell you how many doctors have said to me, "Stop thinking about it." Of course I can't stop. The mind is going to think, "I am going to die." But when those thoughts come up, we can go to the body, go to sensation— breathe in and out of the heart.

We are going to go through a lot. If you think you are going to die with angels around, God bless. But if you have one good friend who can be with you, that is a true blessing. We have heard of so many people dying alone.

What is the greatest lesson about living you have learned from the dying?

OL: Follow your heart and be as present as you can. Don't think that life is going to happen when you retire. Live your life now. Enjoy it now. You know that wonderful line from John Lennon: Life is what's happening while we're busy making other plans. Don't wait to live your life.

SL: Buddha said that we could look the whole world over and never find anyone more deserving of love than ourselves. That is what we should be working with. There is no one more deserving of love than you.

7

GOOD DEATH

Mercy, deliverance, and the nature of suffering

PATRICIA ANDERSON

*“Your mind state at the
time you draw your last breath
is crucial, for upon this hinges the
subsequent direction and
embodiment of the life force.*

*Only with a disciplined and
spiritually prepared mind can
you hope to resist the pull
of old patterns of craving and
clinging as your final energies
are slipping away. The
impulses of thought, feeling, and
perception all gather together
in this last breath with
great potency ... “*

—Philip Kapleau Roshi

So exactly which last breath is the roshi talking about here? The last breath taken before lapsing into coma or vegetative state? The last breath taken before being placed on a respirator? Or the last breath taken when a court orders the respirator removed, one year later?

Dying in the midst of modern technology is a complicated matter. Western medicine's tendency toward aggressive treatment has joined with our cultural antipathy toward death to create an extraordinary situation: afraid of being caught alone and suffering in an impersonal technological nightmare, people are fighting for the "right" to die.

Euthanasia is an ancient issue. There have always been instances in which people killed either themselves or another as a humane act to end suffering. In this country, in the early part of the century, the act commonly evoked euphemisms such as putting a sick animal "to sleep." After World War II it became associated with concentration camps, murder, and Nazism, acquiring a stigma that persisted for years. In fact, euthanasia means "good death." Of course, what is "good" and what is not depends on your point of view.

The current debate covers a spectrum of possibilities from "allowing death to occur" to "causing death to occur." The phrase "passive euthanasia" is sometimes used to describe the removal or refusal of life-sustaining treatment, allowing "nature to take its course"—even though the means to intervene are at hand. (Many argue that this is not euthanasia at all, as it is not killing but rather not-interfering.) "Active euthanasia" describes causing death directly by some active means, such as the administration of a lethal injection.

For the Buddhist, euthanasia raises new and demanding questions in the light of traditional teachings. Theoretically, you can wind up in a situation where the precept against taking life and the commitment to compassionate action appear to be at odds. Contemporary practitioners are dealing with dilemmas that simply didn't exist until very recently.

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In the West at the beginning of this century most of us died before the age of 50, from infectious disease and injuries we didn't know how to treat, in our own home, with familiar caregivers in attendance and our loved ones at our side. After we died the family bathed us, watched over us, and buried us, with the help of friends and the community.

Today we live longer and die longer. Lingered degenerative conditions are "managed" by high-tech medicine, in big institutions with schedules to maintain. If our family can arrange to get to our side, they're either bewildered or extremely nervous. After we die, a business concern "takes care of it."

These changes have come together to make death, as often as not, a decision rather than an event. In one form or another the question of "pulling the plug" has become commonplace. Seventy percent of us will find ourselves involved in a "negotiated" death, required to make a decision whether to undertake, or not to undertake, some medical procedure that will prolong the process of dying.

Of course, anyone would choose to maintain life as long as recovery or healing takes place. The problem arises when death is postponed without any chance of healing or rehabilitation, or when treatment becomes a painful invasion, making the last days before death a nightmare of suffering and confusion.

This concern has engendered living wills and medical proxy legislation, best-selling books on "self-deliverance" and physician-assisted suicide, and proposals to legalize euthanasia or mercy killing. For many, to champion the right of the individual to "choose" death is to protest the manner in which we die today. From a Buddhist point of view, all this confusion and its attendant suffering is the result of a misunderstanding about the nature of death and dying.

BIG DEATH, BIG DIFFERENCE

“From the tantric perspective the point of actual death is tied not to inhalation and exhalation but to the appearance of the mind of clear light. “ —Jeffrey Hopkins

The differences between Buddhist and secular approaches to euthanasia are grounded in dissimilar views about the very biology of the dying process. Basically, Buddhism and Western medicine see death very differently. In Highest Yoga Tantra, one of the most advanced Vajrayana teachings, there are particularly detailed descriptions of the dying process, wherein the experience is shown to be a complex interaction of physical, metaphysical, and spiritual events. Based on a medical model that presupposes an intertwining relationship between consciousness and physiology, this teaching delineates the changes that take place as we die.

Speaking very simply, during the dying process gross levels of consciousness, which are dependent on various physiological elements, dissolve as those elements deteriorate. More and more subtle levels of consciousness are revealed as grosser consciousness dissolves, until conceptuality ceases and eventually the dying person loses all awareness for a brief period.

There follows the revelation of the most subtle consciousness of all. This quintessence has many names, depending upon the school and the sutra or text, some of which include: the clear light, buddhanature, the welcoming light of spontaneous presence, ultimate transcendent knowledge, or awareness resuming its essence. But, as pointed out by Tsele Natsok Rangdrol in the classic 17th-century Tibetan text *The Mirror of Mindfulness*, “The general teachings common to all systems know it as

the luminosity of the first bardo.” (There are many ways of interpreting “bardo,” but most commonly it describes the state between death and rebirth. *The Tibetan Book of the Dead*, for example, describes the various stages, or bardos, that exist between this life and the next.)

The dawning luminosity is nothing less than ultimate truth revealing itself, and for Tibetan Buddhists this defines the moment of death.

For Western medicine, the moment of death is more of a legal matter. In 1980, the President’s Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research established the “Uniform Determination of Death Act.” It reads: “An individual who has sustained either (1) irreversible cessation of circulatory and respiratory functions, or (2) irreversible cessation of all functions of the entire brain, including the brain stem, is dead.”

This definition allows for a kind of “purgatory” status, in that the brain itself can be very badly damaged and the brain stem can still function. Thus people with no “cognitive” powers can continue to breathe, their hearts can pump blood throughout their bodies, and they can maintain sleep-wake cycles for as long as you force nutritional fluids into them intravenously. This macabre predicament has generated lawsuits and legislation. For example, Karen Ann Quinlan “lived” this way for nine years *after* she was taken off a respirator.

Such radically different approaches lead to radically different ideas about what makes a “good” death. There is the assumption in the West that it is good to die while unconscious or otherwise unaware that death is coming. Dying in one’s sleep is seen as a great blessing, and people will often say, “Well, at least he never knew what hit him.” This wasn’t always the case. In fact, when the Judeo-Christian influence dominated Western culture, a sudden death was considered a disaster. (“From fire, flood, and sudden death, O Lord preserve us,” is an old English prayer.)

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Having time to prepare properly was believed critical to assuring a beneficent outcome. Only with the advent of scientific materialism do we see the notion that it is better to be unaware of one's death. And indeed, if death is the linear end of material existence, why not soften the blow?

For the Buddhist, death is seen as a critical phase of a cyclical process, and is to be entered into with as much awareness as possible. It is considered important to die knowing what is going on.

Obviously, if you believe consciousness is extinguished at death, you will treat the experience differently than if you believe that consciousness is changing, and that those changes can be influenced by the circumstances of the dying process.

Active euthanasia usually involves a lethal injection or overdose precipitating unconsciousness and leading to respiratory failure: being completely unconscious at the moment of death is the goal. According to the Tibetan model, there are a number of additional stages in the dying process that occur *after* external respiration has ceased. A heavily drugged state clouds the experience of these stages and negatively influences everything that follows. And, for the Buddhist, everything follows.

MERCY AND DELIVERANCE

“Buddhism holds that because death is not the end, suffering does not cease thereupon, but continues until the karma that created the suffering has played itself out; thus it is pointless to kill oneself—or aid another to do so—in order to escape.” —Philip Kapleau Roshi

The most widely known proponents of active euthanasia are Derek Humphrey, who wrote the bestselling *Final Exit*, a book that describes

ways to “do-it-yourself,” and Dr. Jack Kevorkian, who during his career as a physician assisted a number of deaths with the use of a device the press labeled a “suicide machine.” These men are at the forefront of a movement in support of legalizing physician-assisted suicide, or mercy killing.

The argument in support of legalization says, in essence, that euthanasia is ultimately a matter of autonomy and self-determination. When individuals facing death wish to end their lives as a rational alternative to pain and suffering, they should be allowed to do so or aided to do so, with no moral or other judgment. This argument illuminates the differences between Buddhist thought and secular philosophies. Whether it concerns a matter of self-deliverance or mercykilling, the ethical stance in support of active euthanasia is incompatible with Buddhist tradition and belief. Buddhism teaches that it is improper to take life, including one’s own, that every such act has its consequences, and that the nature of suffering is such that its consequences will almost certainly include more suffering in the long run.

In fact, Buddhism teaches that the very attempt to avoid suffering creates ever more suffering—and the current euthanasia dilemma is a good example of this problem. The unexamined effort to halt physical deterioration has created circumstances fraught with emotional, psychological, and spiritual suffering (as well as continued physical suffering, since our attempts to stop deterioration do not avoid physical pain and often exacerbate it).

Misunderstanding the nature of suffering and ignoring the reality of impermanence in an effort to “defeat” death, modern science has added new levels of anguish to the dying process. In our single-minded rush toward “optimum health,” we don’t have time to care for or comfort the dying. Now, as a solution to this additional suffering, it is suggested that

we provide lethal injections as a quick and easy remedy for the messy and problematic business of dying. From a Buddhist viewpoint, this approach adds to the problem.

PAIN AND AN UNCLOUDED CONSCIOUSNESS

“The bardo of dying is said to be painful because the process of passing away usually involves pain and suffering. Although the death process might sometimes be very quick and we may think that nothing much is felt, some pain is certainly involved. Even if one dies in a coma or during a faint, the mind still experiences subtle pain during what is called the interruption of the life-force.”

—Chökyi Nyima Rinpoche

Shakyamuni Buddha taught that all suffering can be overcome by understanding its true nature. This is a profound and subtle process. It can take a while.

In the meantime, compassion is key. If an individual is in such physical agony that it dominates their entire awareness, they cannot be expected to have a conscious death experience. In his book *The Tibetan Book of Living and Dying*, Sogyal Rinpoche says:

The Buddhist masters speak of the need to die consciously with as lucid, unblurred, and serene a mental mastery as possible. Keeping pain under control without clouding the dying person’s consciousness is the first prerequisite for this, and now it often can be done: everyone should be entitled to that simple help at this most demanding moment of passage.

While the indiscriminate application of medical technology can

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cause great difficulty for the dying, the advances made by that same technology, when used intelligently and attentively, can make a very positive difference. Pain management and palliative care is a new field, offering treatment that does not heavily sedate the mind and obviate the possibility of a clear experience. Specialized attention to pain and symptom control is most readily available through hospice care, a program providing assistance for those who wish to discontinue curative treatment. Many Buddhist teachers strongly encourage this kind of care as an alternative to the option of active euthanasia. That this kind of care is hard to come by is a disheartening comment on the priorities of our culture.

LIFE SUPPORT OR DEATH SUPPORT?

“To use life-support mechanisms when a person has no chance of recovery is pointless. It is far better to let them die naturally in a peaceful atmosphere and perform positive actions on their behalf. It is not a crime to stop it, since there is no way in which the person can survive, and you are only holding onto their life artificially.”

—Dilgo Khyentse Rinpoche

What is sometimes called passive euthanasia is more and more commonly practiced as people rebel against the mindless application of medical technology. In deciding whether or not to withdraw or withhold life-sustaining treatment, the bottom line is the same in both the Buddhist and the secular view: given Western medicine’s ability to interrupt the dying process, when should we do it and when should we not?

His Holiness the Dalai Lama has said: “From the Buddhist point of view, if a dying person has any chance of having positive, virtuous

thoughts, it is important—and there is a purpose—for them to live even just a few minutes longer. If there is no such chance for positive thoughts, and in addition a lot of money is being spent by relatives simply in order to keep someone alive, then there seems to be no point. But each case must be dealt with individually; it is very difficult to generalize.”

Clearly, context is all. Compassionate practice is less dependent on rigid adherence to precepts than it is relative to the specifics of a given situation. This requires that we pay close attention to the dying person, and that we really take the time and energy to try to perceive what will be the most help.

From a Buddhist point of view, the removal of life-support technology or treatment when there is no hope of recovery and death would otherwise naturally occur, can be considered a compassionate act—not “killing,” but rather “rescuing” the individual from a devastating interference with the profoundly important process of dying. And refusing treatment in order to prepare for death must certainly be considered appropriate. Having been blessed with precious human birth, one is expected to hold onto it, respect and appreciate it, but clearly not to cling desperately to a life that is ending or to flail against the forces of impermanence.

In actuality, however, it can be quite difficult to know whether or not to stop treatment. There is a wide spectrum of care that can be applied at varying stages of illness, injury, and debilitation. Rather than a single decision leading to a clear-cut result, one will often be faced with a series of decisions as circumstances progress and new conditions present themselves. Should resuscitation be attempted? Should a feeding tube be inserted? How long should someone be maintained in coma? What about a severely deformed and brain-damaged newborn, placed on life support and subjected to painful treatment with an uncertain outcome?

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The only possible guiding principle is the need to allow for the unique nature of each case. And unfortunately, institutionalized medicine is not designed for that. We talk a lot about how awful this is when we're sick and trying to get well. It is even worse when we're sick and trying to die.

FACING REALITY

"It is such a terrible rejection, a fundamental rejection of love, that nobody is really willing to help a dying person's state of mind. "

—Chögyam Trungpa Rinpoche

The current euthanasia debate has arisen against a backdrop of cultural necrophobia. Our refusal as a society to come to terms with the fact of impermanence has made death seem an ignominious occurrence, a failure, a shame.

An apt depiction of our samsaric dilemma is the image of a dying patient «attached» to the machinery of Western technology, trapped and alone in the crowded, noisy, and spiritually impoverished environment of the modern hospital.

Enough people have been emotionally and financially ruined, enough lawsuits have been instigated, enough popular concern has been generated to have brought these issues into the public arena. However, in that arena the discussion turns on rights and regulations, on long-term care costs, on the feasibility of «terminal management.» Even when we're talking about death, we don't seem to be able to actually talk about *death*.

Stepping back and seeing the bigger picture is not so difficult. But stepping up to the bedside is another matter. The dread that arises when

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someone we know is dying, the shock or panic we feel when our own life is threatened—in these moments we get a glimpse of something very real, no pretense, no cover-up, no choice. Relating to that very reality, to that suffering, is a fundamental concern of Buddhism. Today in the West, death is the place where that reality can break through our defenses, providing a kind of crucible for practice, for grappling with the precepts; for sorting out for ourselves when to hold on and when to let go.

Patricia Anderson is the author of *Affairs in Order: A complete Resource guide to Death and Dying*.

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ON BEING
A TRUE FRIEND

SOGYAL RINPOCHE

A dying person most needs to be shown as unconditional love as possible, released from all expectations. Don't think you have to be an expert in any way. Be natural, be yourself, be a true friend, and the dying person will be reassured that you are really with them, communicating with them simply and as an equal, as one human being to another. I have said, "Show the dying person unconditional love," but in some situations that is far from easy. We may have a long history of suffering with the person, we may feel guilty about what we have done to the person in the past, or anger and resentment at what the person has done to us.

So let me suggest two very simple ways in which you can release the love within you toward the dying person. I and my students who work with the dying have found both these ways to be powerful. First, look at the dying person in front of you and think of that person as just like you, with the same needs, the same fundamental desire to be happy and avoid suffering, the same loneliness, the same fear of the unknown, the same secret areas of sadness, the same half-acknowledged feelings of helplessness. You will find that if you really do this, your heart will open

toward the person and love will be present between you.

The second way, and I have found this even more powerful, is to put yourself directly and unflinchingly in the dying person's place. Imagine that you are on that bed before you, facing your death. Imagine that you are there in pain and alone. Then really ask yourself: What would you most need? What would you most like? What would you really wish from the friend in front of you?

If you do these two practices, I think you would find that what the dying person wants is what *you* would most want: to be really loved and accepted.

I have often seen also that people who are very sick long to be touched, long to be treated as living people and not diseases. A great deal of consolation can be given to the very ill simply by touching their hands, looking into their eyes, gently massaging them or holding them in your arms, or breathing in the same rhythm gently with them. The body has its own language of love; use it fearlessly, and you will find you bring to the dying comfort and consolation.

—from *The Tibetan Book of Living and Dying*

Sogyal Rinpoche is the founder and spiritual director of Rigpa, an international network of Buddhist groups and centers. © 1993 Rigpa Fellowship. Reprinted by agreement with HarperCollins Publishers.

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ON WHAT TO DO WHEN
THE GOING GETS ROUGH

FRANK OSTASESKI

Caregiving from a Buddhist perspective is a recognition that this person's suffering is also my suffering. When I see this, whether I'm the person in the bed or the person making the bed, I have to confront this precariousness. Buddhist practice can help us enormously in continuing to give our attention to what's actually appearing, as opposed to being swept away by the drama of the process.

What are the basic attitudes that might be helpful in being with someone who is dying? One of those that comes to mind is to be completely ourselves. That means to bring our strength and vulnerability to the bedside. And to recognize that people who are dying continue to need very intimate and natural and honest relationships. We can't serve from a distance; this is intimate work, and we have to be part of the equation—so it is absolutely essential that we bring our entire selves to the experience.

It's important that we bring to the bedside the quality of empathy. This is maybe the greatest gift we can give another human being: our

undivided attention. To listen without judgement or agendas. The great psychologist Carl Rogers once described empathy as “looking with fresh and unfrightened eyes.” I think that’s a wonderful way of thinking about how to be with someone.

Also, simple human kindness. When people are sick, details matter. The manner in which we care for someone, the way in which we come forward to offer service, is incredibly important. How can we assist with the simple details? Holding the hand of a frightened patient, doing the laundry, helping someone fill out the insurance forms. Simple everyday activities offered with loving attention that convey acceptance, build trust, and enhance self-esteem. I would add “non-doing” to this list of helpful attitudes. To really have the confidence in our human presence. To slow down and leave a lot of room for silence, to reduce distractions. Don’t miss this moment by waiting for some future event, even the moment of dying.

Part of my task is to try to take Buddhist practice and make it useful and accessible to people who are not experienced with it; to use language that doesn’t create more barriers. There’s a lot of talk out there about conscious dying, but we don’t speak so much about conscious caregiving. For the dying, spiritual support is every bit as important as good pain control. But we rarely extend that kind of support in a meaningful way. And as a result, too many people are dying in distress and in fear.

So what is it to provide this support? I would say first and foremost, it’s about bearing witness. And that means not turning away when the going gets rough, staying present in the territory of mystery and unanswerable questions. Sometimes, depending on the person’s tradition, it means calling a priest to give last rites, or getting a prayer shawl, or helping to write letters of reconciliation. Rarely is it a matter of conducting

existential discussions. Or even introducing formal practices. It's helping people to face directly what's occurring, to work with the paradoxes that they're confronted with.

Probably most important is to become aware of our own bodies and minds. Let's not underestimate this. It's the most essential of all practices—one's commitment to maintain awareness of one's own mind, body, and heart in the middle of this. In doing this, we help to create a calm and receptive environment for the person who is dying. If there is one person in the room who is calm—just one person—it eases the entire experience for everybody.

Frank Ostaseski founded the Zen Hospice Project in 1987. He currently serves as the director of Metta Institute, which he established in 2004, and leads its End-of-Life Practitioner Program. He also conducts workshops and retreats on hospice care throughout the U.S. and Europe.

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ON BEGINNING AT
THE BEGINNING

JUDITH L. LIEF

In working with someone who is dying, there is a tremendous temptation to ignore our own relationship to death and immediately assume the role of the helper. But when we do so, we are losing our common ground with that person. Entering a dying person's world takes courage and empathy. Only by accepting our own vulnerability to death do we overcome the divided perspective of "I (over here) am helping you (over there)." Only then are we in the same boat. So in a sense, we need to be willing to die with that person. Usually we do not want to be in the same boat at all. Although it is embarrassing to admit, we are secretly glad that it is someone else who has cancer and we are the one looking after him rather than the other way around. We find security in the fact that we are not the one who is sick right now. It is hard not to feel that way, even when we are sincerely and earnestly trying to help.

There is no point in hiding that tendency and pretending to have empathy. Instead of feigning benevolence, we could acknowledge that we are afraid of sickness, afraid that the same thing might happen to

us, and we are desperate to distance ourselves from that possibility. We could look into that fear and see how it operates. Beginning at the beginning, we could notice how we enter a sick person's room. What concerns come up in our mind? How do we view that person? How much can we identify with her situation? When do we shut down? Where are we holding back? What are our limits? Being honest about our limitations protects us from becoming patronizing and self-satisfied. When we are more honest, we don't have as much to prove. We accept who we are and go from there. So our whole approach lightens. At the same time, we also relieve the people with whom we are dealing from having to prove themselves to us. So there are fewer barriers; we are less separate. When we approach a sick or dying person, we are simply relating to her as an ordinary human being, in the same category as ourselves.

Working with others gives us constant feedback as to our own state of mind. Spending time with dying people is revealing. It reflects back to us with great honesty and vividness our own current relationship with uncertainty, death, and impermanence. It exposes our shortcomings and cuts through our pretenses. If we are open to this feedback, we can sharpen our understanding of who we are and reawaken our humor. We are reminded over and over again not to take ourselves too seriously. Although we may dream that we are going to be the one who steps in and, just in the nick of time, helps some dying person realize his or her human potential, I doubt whether any of us is going to accomplish that very often. If we have some humor about ourselves, we realize that we, too, are involved in a slow process of growth. We are working with our own states of mind, just as other people are working with theirs. We are also dying, just as they are. We are all in this together.

—*from Making Friends with Death: A Buddhist Guide to Encounter-*

TRICYCLE TEACHINGS: DYING & DEATH

ing Mortality © 2000 by Judith L. Lief. Reprinted by arrangement with Shambhala Publications, Inc., Boston.

Judith L. Lief, a teacher in the Shambhala tradition, has been presenting classes and workshops on a contemplative approach to death and dying, and on the teachings of *The Tibetan Book of the Dead*, since 1976.

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A CAREGIVER'S STORY

TONY D.

Julia was no one's beloved friend. Imagine that. Her family was in Oregon and they didn't know that she had already spent most of her short life trying to kick drugs. And she didn't want them to know. I first met her at an NA meeting [Narcotics Anonymous]. I had been clean for about two years. But Julia kept slipping. Kicking and slipping.

Meditation was part of our NA meeting. Even before that, in rehab, they taught meditation. I started going to a Buddhist center close to the church where we had the meetings. When Julia was clean, she liked to come to the meditations. When she was using, she'd never come. I once asked her why. She told me that meditation was "too naked." But she had a little coral Buddha around her neck, and she never took it off.

Over time, there were three of us—not counting Julia—who went to the meetings and then to the meditation. We all knew Julia. We had lent her money, brought her to rehab, listened to her stories, her lies, excuses, denials. None of us really liked her. Even if she had cleaned up her act, I don't think I would have liked her. I certainly never wanted to date her.

When she got really sick there was no one to take care of her. Me and another guy, Daryl, had actually taken bodhisattva vows by that time. We vowed to put other sentient beings before ourselves. We had

made commitments to the path of compassion. Did I know what I was saying? How could I? I could hardly take care of myself. It was Debbie, who came to the meditation with us, but who hadn't taken any vows, who said, in this very matter-of-fact way, "We have to take care of Julia." And Daryl and I just kind of fell into line and said, "Okay."

It was Debbie's idea to talk to the meditation teacher. And he was so happy for us! He said we were blessed to have this golden opportunity. He told us that we would never get Buddha's teaching until we truly understood impermanence. Of course, none of us had to be reminded that AIDS could just have easily picked us.

Debbie was hard on me and Daryl. She kept saying, "You guys don't know anything." And she was right. We were always offering to go to the store, get pizza, do yard work. Me and Daryl, we did not want to be in there.

We made a schedule so that one of us would be around. We were all working odd jobs and shift work. When the teacher came, he was never bummed out. Not with us or with Julia. It was like he had no idea in his head that you are supposed to be uptight and holy and sad and never laugh in the presence of a dying person. And he always brought ice cream. One evening, he said to Julia, "Would you like to meditate with us?" She nodded. So we brought the couch and the pillows into the bedroom and meditated together. Julia said it felt good, so calming, like a "mind massage." Then the teacher said we might want to try that again. That changed things for me. Up until then, I'd been thinking, "I don't even like her, but that doesn't matter." But even I could see the need to keep her far away. Her, and her death. Once we began to meditate, though, the distance between us disappeared. All of a sudden, Julia's sister shows up with her husband. And the sister gets hysterical. She starts crying, "I can't believe this, I can't believe this. How'd this hap-

pen?” She says, “Julia, don’t worry, you’re going to be fine.” Oh boy. Her husband stays in the kitchen with a six-pack. The whole scene suddenly feels like an alley that’s been roped off by the cops after a crime happened. A violation. But see, the sister looked like TV movies. And I saw that this was “normal” behavior. And that it made things worse. Julia knew she was dying. We knew. We didn’t pretend. The sister, she’s like in kindergarten, playing make-believe. “You’re not going to die.” Bullshit.

What I hadn’t exactly understood at that point was that Julia, being so totally herself, made all of us be ourselves too. When the sister showed up, we saw that the only—I mean the *only*—thing we had to give was being there. Her sister brought anxiety, hysteria, denial, and I saw Julia flinch away from that. Even though I think Julia knew that her sister did the best she could.

After that, a hospice worker came and showed us things. Bedpan stuff. Diapers. Morphine —which was dicey. But we did it. The teacher told us to apply the same guidelines as in meditation. Don’t pick and choose. Pay attention to the task, and don’t get stuck thinking about whether you like it or not, whether you want to do it or not. And Daryl and I, we didn’t turn our heads.

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THE LUMINOUS
GAP IN BARDO

Relaxing into uncertainty is to open to hidden possibilities.

FRANCESCA FREMANTLE

Bardo can have many implications, depending on how one looks at it. It is an interval, a hiatus, a gap. It can act as a boundary that divides and separates, marking the end of one thing and the beginning of another; but it can also be a link between the two: it can serve as a bridge or a meeting place, which brings together and unites. It is a crossing, a stepping-stone, a transition. It is a crossroads, where one must choose which path to take, and it is a no-man's-land, belonging neither to one side nor to the other. It is a highlight or peak point of experience, and at the same time a situation of extreme tension, caught between two opposites. It is an open space, filled with an atmosphere of suspension and uncertainty, neither this nor that. In such a state one may feel confused and frightened, or one may feel surprisingly liberated and open to new possibilities where anything might happen.

Such moments as these occur continuously in our life, unrecognized, and this is the inner significance of the bardo states, as Trungpa Rinpoche taught. He spoke of them as periods of uncertainty between sanity and insanity, or between the confusion of samsara and the trans-

formation of confusion into wisdom. “They are the heightened qualities of different types of ego and the possibility of getting off ego.

That’s where bardo starts—the peak experience in which there is the possibility of losing the grip of ego and the possibility of being swallowed up in it.”

Wherever there is the death of one state of mind there is the birth of another, and linking the two there is bardo. The past has gone and the future has not yet come: we cannot catch that in-between moment, yet it is really all there is. “In other words,” Trungpa Rinpoche said, “it is present experience, the immediate experience of nowness—where you are, where you’re at.”

The six bardos are the bardo of this life (or birth), the bardo of dream, the bardo of meditation, the bardo of dying, the bardo of *dharma* (or reality), and the bardo of existence (or becoming). The bardos are distinguished from each other in this way because they indicate different modes of consciousness, just as the waking consciousness differs from the dreaming consciousness. These states can last for a short or long period of time, as long as a whole lifetime in the case of the first one, yet they all share the mysterious and immensely powerful quality of “in-between-ness.” Or we could say that by learning to see these stages of our life as bardos, we can gain access to that power, which is always present, unnoticed, in every moment of existence itself.

The experiences of the six bardos do not exist of themselves; they arise from the open space of the primordial nature of mind. Luminosity is the aspect of mind that gives rise to all these appearances: it is the environment that surrounds them, out of which they emerge and into which they dissolve. It is always present, like the sun in the sky, hidden behind clouds. At the moment, because of ignorance of our real nature, we experience everything as the confused manifestations of samsara.

The sense of self creates a feeling of solidity, like the apparent solidity of the clouds veiling the face of the sun, but at certain moments a gap is opened up, through which we may receive a glimpse of the light of reality.

This gap is brought about by the intensity of emotional experience, which is always accompanied by an equal and opposite reaction, so that we are thrown into a situation of conflict and uncertainty. Two contrasting extremes are present simultaneously. Trungpa Rinpoche described it as being drenched with boiling hot and freezing cold water at the same time. At that very moment there is nothing to do but let go: give up trying to hold on to one extreme or the other, abandon the battle between life and death, good and bad, hope and fear. Then, in that instant of relaxation, there comes a sudden flash of realization. There is always the possibility that in the midst of an everyday situation, or at the height of some emotion, we may suddenly catch a glimpse of its essential emptiness and luminosity: a moment of sacred vision.

Entering the awakened state of mind, even for a moment, is always preceded by an experience, however fleeting, of extreme contrast and conflict. Even on the highest and most subtle levels of attainment, negative and positive continue together side by side, until one makes the leap beyond them both. Deliberately inducing paradoxical situations or being confronted by paradoxical statements, which the rational mind is unable to reconcile, can sometimes shock a person who is ready for it into a breakthrough. Great teachers have been known to precipitate an awakening in their students by a sudden outburst of anger or some other totally unexpected action. There are many stories of this kind in tantric literature, such as when the great siddha Tilopa hit his disciple Naropa in the face with his shoe.

Even in ordinary life, gaps of this kind can occur. It might happen when we are in a state of complete exhaustion, feeling that we cannot

stand it any longer and are just about to tip over the edge into madness. Or it might come at the height of extreme emotion, when our emotional energy reaches its peak and we are suddenly no longer sure what we are doing or what caused it. Suddenly time seems to stop and we feel calm and detached, suspended in a state of absolute stillness. For a moment we enter a different dimension of being, but without training it is impossible to stabilize these experiences and take advantage of the opportunity they represent. To be able to recognize and use such moments of heightened intensity requires the firm foundation of a calm and steady mind, and confidence in the basic sanity and goodness of our own nature.

All the instructions concerning the six bardos have basically to do with allowing that gap to open, by undermining our belief in the ordinary world that we take for granted, and then letting go into the space beyond. The bardo experience is a doorway to awakening, which is always present. In Trungpa Rinpoche's words, "Bardo is a very practical way of looking at our life."

Francesca Fremantle, Ph.D., studied Sanskrit and Tibetan before meeting Chogyam Trungpa, with whom she collaborated in translating *The Tibetan Book of the Dead*. Excerpted from *Luminous Emptiness* © 2001 by Francesca Fremantle. Reprinted by arrangement with Shambhala Publications, Inc., Boston.