A TRANSPERSONAL APPROACH TO CARE OF THE DYING

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PART I: A CAREGIVER'S PERSPECTIVE

*If you can find a friend to go with you who is steady, careful, and mature, together you can overcome all hardships with mindfulness and joy.*  
-The Buddha (in Chopel, 1985, p. 163)

Early life experiences with death and dying led me into the nursing profession where I experienced much pain and suffering by overly identifying with my patients. I was surrounded by constant grief, pain, and death in the emergency room where I worked. Many of the patients who we triumphantly saved—from such events as overdosing, stabbing, gunshot wounds, myocardial infarction, or sometimes, even old age—would return just months later and die. Death education had not been part of my nursing education. I understood little about my own personal death beliefs, even less about anyone else's.

The pain that resulted from being unable to cope with my own responses to loss, grief, and change was severe. In an attempt to escape the pain, I began to adopt the customary attitude that many healthcare professionals display—aloofness: I distanced myself from the anguish of my patients and their families. By focusing on the disease, carrying out nursing functions dictated only by physical signs and symptoms, and relating to nurses and doctors rather than to patients, I was able to protect myself from feeling too much empathy. Or so I thought. But, the cold-hearted aloofness generated a new dissatisfaction—a disturbing feeling of being unkind. I had made myself unavailable to human beings at a time when they most needed my genuine, compassionate consideration. The Western medical model generally regards the body as a machine that can be fixed. When modern science and technology are unable to

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repair the machine, the body becomes a failure and is removed from sight. Death is
denied; literally covered up. In an emergency room, however, no amount of death
denial can disguise the fact that death can appear at any time, to anyone.

When my brother was pronounced terminally ill, many of the conditioned beliefs I
held about myself as an aloof nurse, capable of maintaining a necessary and appropri­
ate distance from a patient, suddenly seemed useless. This time, dying was happening
to someone I could not distance myself from; this time a confrontation with my own
fear of death was unavoidable. Now I would have to respond to terminal illness and
death at a much deeper level than I was prepared for. I began desperately to search in
many quarters for explanations. Within the psychologically rich Tibetan Buddhist
tradition of death and dying, I found certain insights and applications that enabled me
to start developing an attitude of receptivity towards the inevitability of change and
death: a far cry from my earlier distancing strategy.

According to Tibetan Buddhist psychology, the transformations that are possible in
life can lead a person to a deep-seated appreciation of change and the recognition of
impermanence-which generates a liberating sense of freedom, Glimpses of imper­
manence and explanations about the meaning of life and death are deftly offered
through such means as the Tibetan Buddhist death meditation and the theory of the
stages of dying. Both of these applications helped me to overcome much of my own
death denial and its unavoidable consequence-the suffocation of spontaneity when
interacting with patients who are suffering and dying.

Working in the hospice context, following my work in the emergency room environ­
ment, also helped to provide me with a new model for being with patients who are
dying. A dying patient wants to be accepted as a human being, not treated as an object
with a terminal illness-a medical failure hidden from view. The dying require
understanding and compassion from their caregivers; most want to experience death
with peace and dignity. Transpersonal studies have influenced some hospice
caretakers like myself to be more aware of such events as deathbed visions and the
near-death experience, phenomena with commonalities expressed by many people
across different cultures (Carr, 1993). More generally, the transpersonal dimension of
death and dying opened me to the idea that a broader vision of life, death, and their
interrelationship was possible.

Applications such as comeditation, visualization, and education in death awareness
have existed for centuries within the Tibetan Buddhist psychology of death and dying.
Today, these same themes are being rediscovered by modern Western society
(Coberly & Shapiro, 1997). Tibetan Buddhism advocates cultivating an awareness of
impermanence by confronting personal mortality and realizing that it is only the
condition of the mind that is of value when life ends, Thus, developing an understand­
ing of the meaning of impermanence, and the potential of the human mind during life,
during death, and after death, can be a catalyst for reevaluating the meaning of life and
death. Tibetan Buddhism posits that the mind is the forerunner of all, that it is the
condition of the mind that has determined the past, determines the present, and will
determine the future. In this view, the mind can be trained in positive ways to enhance
the possibility for a positive future, both now and in the next life. Thus, “if the here
and now of being born a human is resolved as a problem of existence, there is no

longer fear of the future" (Lauf, 1989, p. 16). From this perspective, recognizing the certainty of impermanence, of change, and of death, can also bring to light the source of all renewal and transformation.

Elisabeth Kubler-Ross (1969, 1975, 1981) and Cicely Saunders (1980) were pioneers in the development of a more humane environment for the dying. They recognized that the dying have unique needs that were not being met by medical personnel trained to believe in the material, mechanistic model of the world—wherein progress is exalted and loss is denied. The dying needed something more than they were getting. Some dying patients ask for hospice patient-centered care simply because they want better pain control or want to have more individual attention for their physical needs, but there are other patients who also seek a deeper connection with their caregivers. Given an opportunity, they may even want to discuss life and death, and explore the meaning of personal and transpersonal experiences that arise in their confrontation with mortality. Unfortunately, most caregivers are unfamiliar with their own personal feelings about death, and have little information about the transpersonal dimension of death and dying. Caregivers with a lack of death awareness understandably feel awkward and incompetent about relating with the dying and entering into a genuine dialogue with them.

Hospice care and education began with a revival of the humanistic concept of artes moriendi, the art of dying: death with dignity for every individual. Recently some hospices have instituted such creative and innovative transpersonal techniques as meditation, visualization, and prayer to assist a patient who seeks help in surmounting inner confusions and discomforts brought about by facing death. But generally, although both lay and professional caregivers today are increasingly being required to meet the needs of the terminally ill, many of them lack the knowledge and skill to interact effectively with the dying—either at a personal or transpersonal level. A lack of death education, evaluation of personal death beliefs, or awareness of the transpersonal dimension can leave caregivers feeling unprepared, frightened, and understandably unwilling to communicate with the dying in deeply meaningful ways. Death education, including experiential education in developing death awareness, needs to be an integral part of caregiver preparation (Coberly, 1997; Coberly & Shapiro, 1997). With such preparation, caregivers can begin to understand their own personal death beliefs and familiarize themselves with practical experiential techniques appropriate for the dying trajectories of patients.

The future of transpersonal hospice care and education lies in the willingness of those who participate to explore their own personal death beliefs and experiences and to develop open-mindedness towards the death beliefs and experiences of others. Caregivers who have cultivated a worldview that enables them to be open to more than just one of the many different dimensions (e.g., individual, cultural, transpersonal) that contribute to a dying trajectory are often able to find the common threads that bind together the human condition. The awareness that humans, regardless of their individuality, share death as a common destiny nurtures empathy and compassion and opens the door to inner exploration and the transpersonal dimension.

Hospice is not necessarily a place in the external world, but rather a changing and evolving concept of life that resides within the heart. The hospice concept dignifies
death by individualizing it for each patient. Today, however, even more than this is being demanded. Hospice is increasingly being called upon to understand and participate in the transpersonal dimension that is undeniably apparent during many dying trajectories. Transpersonal hospice care and education are crucial if the emotional, mental, and spiritual needs of the dying are to be effectively met.

Educated caregivers can become a source of light for terminally ill patients who are facing the great abyss of the unknown. Most people hope for a peaceful and dignified death, yet each individual will have different and unique needs to fulfill that hope. The terminally ill may sometimes exhibit similarities in the physical aspects of dying, such as those described in the Tibetan Buddhist stages of dying, but there are also vast emotional and spiritual differences among individuals. The Western mechanistic medical model is primarily designed to fix patient problems according to established protocols. This has been an effective, often remarkable, strategy for the treatment and cure of many diseases, but it has not been as appropriate and helpful to the dying person. In the emotional, mental, and spiritual domains, every dying person will have a unique and individual death, with needs that cannot be predetermined. Thus, an effective and responsible caregiver is required to have great knowledge, flexibility, and skill in meeting patient needs as they unfold in the moment. How is a caregiver to acquire such flexibility and skill?

According to Tibetan Buddhism, the less obscured mind sees more light in the bar do *2 state between death and rebirth; an open-minded caregiver may also discern more freely the transpersonal dimension in the bar do of dying. Open-mindedness develops from the recognition that impermanence and change are inevitable, and that trying to control or impede change is often useless. Unencumbered by preconceived ideas that may have developed as a defense against feeling the pain of life, a caregiver with skillful means, upaya, * is better able to meet not only the physical needs of patients but also the psychological and spiritual ones.

Caregivers who develop both an inner understanding of their own personal death beliefs, and an awareness of phenomena that transcend the personal and lie in the realm of the transpersonal, are more likely to exhibit confidence in life and a centered presence during death and dying that comforts, grounds, and brings solace to patients, to their families, and to other caregivers. Skillful means in interacting with death and dying are derived from within by achieving self-understanding and by personally experiencing the transpersonal dimension, an awareness of the overarching unity that is present in human existence.

CAREGIVER-PATIENT RESONANCE

*Only in the clarity of our own nonjudgment, compassion, and nakedness can we notice the mirror the dying person holds up before us.*

-Sharp (1996, pp. 133-134)

Guenther (1997) points out that "inner" hearing, by its very innemess, "can dissolve separation, and that "in the act of listening the experiencer not only opens himself up to another presence, but also allows himself to be affected by this presence." When
The caregiver-patient relationship is not only receptive to change but is also fertile ground for transformation. Trust and harmony between a caregiver and a patient provide a sense of physical and psychological comfort and safety. When empathetic conditions prevail, the unusual, and often, transpersonal experiences, that can appear during the bar do of dying can be acknowledged and accepted as normal events that arise out of the greater depths that human awareness is then capable of. Many dying people seeking a more meaningful dimension to their lives find it in the realm of transpersonal experience. A well-educated caregiver, who is neither frightened nor estranged by a lack of appreciation for the transpersonal, can empower the patient by legitimizing his or her experience of dying. Legitimizing transpersonal experiences during death and dying may also increase the frequency with which they occur.

A caregiver and a patient apprehend existence from different perspectives: one is dying, the other is not. Yet, together these two individuals have the power to create the conditions necessary for a relatively painless, mindful, and even transcendent dying trajectory, should that be what the patient desires. Being synchronized with one another is facilitated through open-mindedness and sensitivity on the part of the caregiver who, by listening with compassion, receptivity, and nonjudgmentalness can provide the patient with the psychological space and legitimacy to experience and express whatever is being experienced. If the patient wants to discuss death, the caregiver is not afraid to do so. If the time is right for the patient, a discussion about death can be a healing experience for both patient and caregiver, especially if it is allowed to unfold naturally and with complete acceptance. For many dying people, every moment becomes very precious, and every discussion can become intensely meaningful when a patient, who asks, is encouraged to examine the beliefs that form his or her understanding of what is happening. The resonance possible between a patient and caregiver is an open-minded, spacious relationship capable of evolving into a mutual journey of transpersonal learning, understanding, and transformation.

The Patient As Teacher

Patients themselves have much to teach caregivers about the human condition and the bar do of dying. Every patient is an individual microcosm with a unique set of conditions, circumstances, and experiences from which a caregiver can learn. The patient who has the courage to describe the course of distress and disease that he or she is experiencing, expands the caregiver’s understanding for future patients. Many dying people drop the masks they wore while engaged in worldly pursuits because the approach of death brings to the fore deeper issues. Caregivers have the opportunity to learn from patients how priorities can change when death is acknowledged as inevitable. Patients can provide “hands-on” experience far beyond formal death education taught in medical and nursing curricula. In the words of Sharp (1996), it is important to let” ... these patients teach and give care instead of always being cared for” (p. 40).

Some dying patients begin to see life through such a different lens that they lose their fear of being open and honest with others. What imagined harm can come from a relationship whose impermanence is so clearly predetermined? When hidden agendas
and fears of betrayal no longer undermine trust, a relationship between patient and caregiver can exist within a unique framework of openness and honesty. Patients can give caregivers a great gift—the opportunity to learn how to talk honestly about death. A patient who wants to talk about death opens up the possibility of an exciting release and a potential transformation for both the caregiver and the patient. It is an opportunity, a treasure seldom otherwise available in our death-denying culture. To an open-minded and nonjudgmental caregiver, the patient can be an invaluable guide:

Being with someone who is dying is like looking into a very clear and detailed mirror of our own individual process. If we have the understanding, courage, and patience with ourselves, we can see our own fears, defenses, guilt, anger, attachments, desires—all of it—surface to the foreground of this living mirror (Sharp, 1996, p. 134).

The Caregiver As Teacher

If bodies were machines, and separate from the mind, would it matter who the caregivers were? A broken engine is fixed in a fixed way; sensitivity and openness are not required for a strictly mechanical approach. But the body is not a machine, and data from the field of psychoneuroimmunology increasingly indicate that the mind influences the condition of the body in extraordinary ways. For example, meditation has been shown to reduce blood pressure (Carrington, 1993) and visualization has been shown to produce measurable changes in the immune system (Ader & Cohen, 1985, 1993). Though dying bodies may be unfixable- incurable—many dying patients have the potential for great healing (i.e., the achievement of inner peace and well-being) even in the face of death. Indeed, as Levine (1982) states: "Many people say that they have never been so alive as at the time they are dying" (p. 59). A caregiver, who is aware of the potential healing power that certain transpersonal techniques have, can introduce them to a patient who asks for help. A skilled caregiver has "ability informed by empathy" (W. Hanrahan, personal communication, April 25, 1997) and does not lead patients down a predetermined path but rather guides each patient towards the fulfillment of his or her own path.

The informed caregiver who has cultivated empathy and compassion is able to interact effectively with the dying, and, in so doing, teaches everyone concerned that it is possible to remain hopeful, courageous, and unafraid even in the face of life's greatest, unknown closing. At times it may be appropriate for the transpersonal caregiver to use some transpersonal techniques with a particular patient, but the defining characteristic of a transpersonal caregiver, we believe, is not technique, but a transpersonal stance or presence.' The transpersonal caregiver is an individual relatively free of ego-bound fears and preconceptions—one who remains open-minded, compassionate, and receptive. The transpersonal caregiver provides an open, nurturant, and fertile environment to help actualize the fullest experiential and cognitive potential of the patient's dying trajectory.

Empowering the Teacher Within

In the Tibetan Buddhist system there is an inspiring and culturally rich metaphor that we find useful in conceptualizing our understanding of transpersonal care of the dying.
It is the idea of the discovered treasure, *gter rna*. The origin and multi-level meanings of the term are discussed in Part II. One who finds that it is within his or her own deepest awareness that the source of all self-knowledge resides, has discovered the greatest *gter rna* buried in the human mind. This recognition is a fulfilling treasure of empowerment because it turns the mind's attention away from the external and towards its internal sources. As with the physical body, all materializations are transitory— their arising and passing have only relative value. Once the deceptive substantiality of the external world is perceived, internal resources are more likely to be activated and a wider range of possibilities can appear. Trusting in the inner wisdom gained from personal experience, rather than only in the knowledge gathered from secondary sources, can strengthen a person's self-reliance and enhance one's ability to function fearlessly and courageously in any situation—including facing death and dying.

I (see Footnote 1) experienced an inner teaching very profoundly once when I was the hospice nurse for an elderly Japanese man, Kazu, who was dying at home of cancer. He was surrounded by loving caregivers: his wife, two sisters, and four daughters. I visited him twice a week to assess his condition and assist in any way I could with health-teaching, drug re-ordering, liaisoning with the physician, and sharing information. Kazu and I developed an understanding that went beyond the daily routine of case management, and one day he told me, in a confidential whisper, that his time to die was very soon. He said he was afraid to leave because he did not want to disappoint his caregivers who were constantly planning their future with him, and reminding him, "Next summer, Kazu, we go to Vegas, yeah?"

I quietly said into Kazu's ear, "You call me when it is time to go; I will hear you and come and help you." Another cynical voice inside of me said, "Oh right! Now how could that possibly happen? Kazu can't even use the phone." Two days later, as I was turning into the parking lot of the Queen's Hospital in Honolulu on my way to a 9:00 a.m. meeting, I distinctly heard a voice call out my name, "Margie." I thought it over for a moment and decided I must be stressed out or just did not want to attend the meeting. Then I heard it again. This time I distinctly felt it was Kazu's voice, and I followed my inner direction by quickly changing course and driving to his house. The women were very surprised to see me. I told them I was surprised to be there too, and asked "How is he?" "Oh fine, he had some tea for breakfast," his wife replied. I went to Kazu's bedside where he lay with his eyes closed. He seemed so tired and he did not look at me. I lay my fingers gently across his pulse and felt his faint and rapid heart beat. "Kazu," I said, "I am here this morning, and if you want to go now, it is all right, I will help the women. It is okay if you want to leave." While I was talking, his pulse faded, the beats becoming erratic and less vital, and then they just stopped. I was completely shocked, stunned. He was gone. The sisters came up behind me and asked how he was. Unable to register the profundity of what had happened, I stalled for time and tried to prepare them. I said, "He is getting weaker. I do not think he is doing well." The sisters began weeping and then some more of them came into the room. They all stayed clutching one another near the door. His wife sobbed, "Please don't die, Kazu. Oh please don't leave us!"

After about five, long, heavy minutes, I said out loud, "Go in peace, Kazu, the women here all love you enough to allow you to go in peace." With that, each of the sobbing
women was able to gather herself together with a noble dignity that Kazu would have loved. They bathed his body and ritualized his passing on while working through the startling reality of death. The mystery of experiences like this one reminds me, as a caregiver, that remaining open to the teacher/treasure within can allow the transpersonal dimension in caregiving to spontaneously unfold.

THE TRANSFORMATIVE POTENTIAL FOR PATIENT AND CAREGIVER

To create openness like the sky is of great advantage.

-Shabkar Lama (in Dowman, 1994, p. 135)

A profound treasure of the human mind is its potential for transformation. Although most people have the ability to re-vision their mind in positive ways, it is all too easy to remain unaware of having such a powerful tool within our reach. The mind becomes easily preoccupied with preconceived ideas and habitual behaviors so that the existence of the transpersonal dimension remains obscured, unperceived, unacknowledged. How can an individual open more to the transpersonal?

Learning to be open-minded and to listen in a nonjudgmental way can elicit the transpersonal dimension for both a patient and a caregiver. The transpersonal dimension lies at the heart of human experience: by listening mindfully, we may hear its expression and see its manifestation, even in ordinary experience. According to Tibetan Buddhism, most of us have the capacity to perceive the sublime nature of the mind that lies beyond the limits of conventional thinking—to transcend the ordinary mind framework. We have the unique ability to perceive the causes of our own unhappiness, and identify the habitual thinking that blinds us to our deeper experience. In the Tibetan Buddhist view, every thought and image that touches our senses can also guide and nurture us to a deeper understanding. Indeed, the ordinary mind and the finest essence of the mind at its source—the clear light which is seen in absolute purity at the moment of death—are inseparable.

The tradition of Tibetan Buddhism is notable for its detailed literature mapping the dissolution of the body and mind during the proximate stages of dying and the bar do states following death. Our adaptation of this mapping is discussed in Part II. Close to the end of his life, Abraham Maslow (1979) speculated upon whether death awareness generally produces “the transcendent, transpersonal, transhuman” (p. 1261). In the West, we are now just beginning to recognize some elements of the transpersonal dimension that can occur during the dying trajectory accompanying a protracted terminal illness. Transpersonal caregivers, by virtue of their knowledge and setting, are in an auspicious position to help further map out possible transpersonal experiences during the dying trajectory and their genesis. As this treasure of knowledge and understanding unfolds, and is publicized, it may contribute to further legitimizing transpersonal experiences during the dying trajectory, increase their frequency, and nourish the demand for transpersonal guidance and more enlightened caregiving. Thus, transpersonal caregivers have a unique opportunity to make known and available the treasures of the dying. Transpersonal caregivers in the West, like the traditions of Tibetan Buddhism, can serve to demonstrate that both life and death are incomparable teachers.
Powerful experiences can be transformational because they shock our habitual thought patterns and open the way to deeper reflection. When intense suffering occurs, such as when a loved one is dying or we ourselves become fatally ill, it is a towering blow to the ordinary complacency that can so easily come to rule everyday life. Being forced to discard rote behaviors and cliché responses can give rise to inner illumination. Deeply realizing from within that change and death represent not only an end to one thing but also the beginning of another, can give birth to a more enriching perspective on life. In a larger perspective, life consists of nothing but change, a continual unfolding of death and rebirth. Constant little deaths follow upon one another's footsteps. Recognizing the inevitability of change is possible at any moment, but the hectic activities and diversions of the external world can conspire to veil our awareness of impermanence and its implications. In the hospice experience, however, the inevitability of change and death is less shrouded. Here caregivers and patients encounter the ongoing challenge of facing death-impending loss is no longer a vague, abstract possibility. It has suddenly become a definite probability. It often forcefully renders those involved to be present in the moment. For some, sudden, enforced living in the present transforms them into beings with a radiant serenity and peace from within that can be palpably felt by others.

PART II: APPLYING THE TIBETAN BUDDHIST PSYCHOLOGY APPROACH TO CARE OF THE DYING

Relieving a saddened mind is the divine religion of the Excellent.

-Gendun Chapel (1992, p. 127)

Imagine that you are waiting nervously for the outcome of some diagnostic tests. You already know that there is something wrong, but it can't be serious. The physician finally walks in and points out large, ominous shadows on your lung x-ray and speaks authoritatively: "I am sorry, but we have to consider it malignant until proven otherwise." The room suddenly begins to spin. It must be a mistake. The physician, unable to look into your eyes, appears unyieldingly solid and uncompromising. You feel very alone-isolated with the diagnosis. All your plans and expectations instantly change. Long-standing, cherished assumptions about life begin to unravel. What has been taken for granted-for so long-dissolves into a new, unknown future suddenly beginning to unfold. The illusion of fixed circumstances, of permanence, is perforated. Life is now tenuous; nothing is certain.

A person who has been given a terminal diagnosis is usually intensely shocked-a current of panic reverberates through all one's psychological bonds. It is "coming face to face with your mortality in a visceral way" (Cochran & Zaleski, 1995, p. 26). Facing death can be terrifying, but the confrontation with death can also catalyze an intense awareness and appreciation of the present moment.

Receiving a terminal diagnosis is a devastating event, but, according to Tibetan Buddhism, an existential glimpse of the truth of impermanence, the ceaseless process of change, is the greatest treasure-a treasure that can be discovered when a sudden and unwelcome change interrupts a person's rote beliefs about an assumed future or set of circumstances. Recognizing the inevitability of death and the changing, imper-
manent nature of life can be the catalyst for precipitating a transformation and a shift in priorities. Understanding deepens, and life takes on new meaning. In the Tibetan Buddhist view, careful and continual analysis of the inevitability of death and its relationship to life will contribute to the development of an unwavering understanding of impermanence and the correlative redemptive value of the present moment. Each moment of life is considered an opportunity wherein an individual can condition his or her mind in either negative or positive ways—and it is the condition of the mind, and the quality of the karmic imprints there, that impel the direction of an individual’s future destiny.

In Tibet, a treasure discoverer (Tib. gter ston*)6 is the prophesied revealer of a hidden treasure (Tib, gter ma*). The ancient gter ma tradition developed out of an even earlier Tibetan custom of burying politically sensitive material to preserve it from destruction by enemies. Most gter rna are scriptural teachings that have been hidden or buried for use at some later time when a gter stan would unearth them (Cabezón & Jackson, 1996). Some gter ma are religious objects and statues that have been discovered in a physical hiding place, such as in the ground or a monastery wall. Most gter ma are instructional texts that have been discovered buried in the ground or heard spoken from trees, walls, caves, or the sky. And some gter ma have been discovered buried in the mind of the treasure discoverer, the gter ston (Dudjom Rinpoche, * 1991). The concept of gter ma exemplifies the metaphoric creativity of Tibetan Buddhism in introducing new teachings: a recognized gter ston, at a propitious time, is able to bring new material to light. The gter ma tradition allows for innovation when a new vision is required in response to changing situations.” The concept of gter ma breathes life and flexibility into existing teachings, allowing them to be constantly rediscovered and revitalized. We find the metaphor of gter rna to be useful and inspirational in characterizing the potential treasures to be revealed in the contemporary Western context of adopting a transpersonal approach to caring for terminally ill patients.

One example of written gter rna, the bar do thos grol chen mo*(lit., The Great Book of Liberation Through Understanding in the Between), is said to have been composed in the 8th or 9th century by the Indian scholar, Padmasambhava* (Tib, mtsho skyes rdo rje), transcribed by his wife, Yeshe Tsogyal, and buried for use at a later time. The bar do thos srol chen mo manuscript was unearthed by a gter ston in the 14th or 15th century. Padmasambhava is said to have written hundreds of gter rna, however, the bar do thos grol chen mo is the treasure best known in the West because portions of it were translated into English by Evans-Wentz (1927, 1949, 1957) and published as The Tibetan Book of the Dead?

Much of the Tibetan Buddhist psychology of death and dying is based on the teachings found in the bar do thos grol chen mo. In the West, the Tibetan Book of the Dead has become an important gter ma—a text filled with jewels of Tibetan Buddhist wisdom that describe why it is of central importance to confront the problem of death and to gain an understanding of the nature of the human mind (Evans-Wentz, 1967, 1968; Fremantle & Chogyam Trungpa, 1987; Thurman, 1994).

Tibetan Buddhism offers one of the most relevant, accessible, and practical psychologies of death and dying available from a transpersonal perspective. Though but one
among a variety of possible transpersonal approaches that could be useful for caregivers to the dying in the West, Tibetan Buddhist psychology is replete with explicit, practical methodologies, and the applied work of some Tibetan teachers in the West, such as Sogyal Rinpoche (1992) and Longaker (1997), is beginning to take root.

As a professional caregiver, my (see Footnote 1) search for effective ways to respond to and interact with the dying has been significantly illuminated by the many wise and practical instructions that permeate the Tibetan Buddhist literature on death and dying. Some of the most personally and professionally enriching and psychologically helpful Tibetan Buddhist teachings about death and dying are: (1) the death meditation, with its insightful mandate to look beyond the illusion of permanence; (2) the descriptions of the stages of dying which provide a map to the external and internal signs of death and dying; and (3) the concept of the *bardo* between death and rebirth, which provides a vision of continuity from one moment to the next, and from one lifetime to the next. By providing a map and a framework for understanding the dying trajectory, Tibetan Buddhist psychology can also enhance open-minded and effective communication with dying patients and help both patients and caregivers to overcome the habit of denying death, and its unavoidable consequence—the suffocation of spontaneity when interacting with patients who are suffering and dying.

Today, the in-bed hospice environment available for the terminally ill brings caregivers and patients face-to-face with death and loss on a daily basis. As the demand for small in-bed hospices increases, so, too, will the number of caregivers needed to staff them. These caregivers will be required to interact with dying patients for longer periods of time and in more intimate and meaningful ways. Patient-centered hospice care and education will continue to grow and change in response to the needs of the dying, and appropriate death education, curricula and programs must be developed to meet the needs of the professional caregivers. Tibetan Buddhist psychology is one of a variety of applied transpersonal approaches to death and dying, and can provide some illuminating and useful applications for increasing understanding about the dying trajectory and deepening caregiver-patient interactions.

This discussion is directed primarily to the professional caregivers who serve the dying. They have a unique role, which requires them not only to experience and serve the dying of another human being, but also to undertake the difficult task of evaluating their own belief system about death and dying. Accompanying a person through the dying trajectory can be an arduous undertaking, but the endeavor has the potential for being a richly rewarding experience. Within the context of caregivers ministering to the terminally ill, lie brilliant treasures of compassion, understanding, transformation, and illumination awaiting discovery. These treasures are glimpsed by many caregivers at different times throughout a dying trajectory and often provide the positive energy that sustains morale and fortitude when stress or hopelessness can become overpowering. Typically, in Western medical and nursing practice, the situation of the terminally ill patient is viewed as one of adversity. But extremity can also be a repository of wisdom. Sometimes the meaning of life becomes apparent only in facing death.
Some qualifications about our use of Tibetan Buddhist psychology should also beorne in mind. The Tibetan Buddhist literature about death and dying is vast, and we
draw upon only selected English language resources we think are especially useful,
either as concrete applications that can be adapted to Westerners or in providing
insights about the meaning of life, death, and dying. Our intent, however, is not to
forward Tibetan Buddhism as necessarily more appropriate than other approaches,
and certainly not for all patients. Following a lecture given at the University of
Virginia, the Dalai Lama was asked if he thought it would be effective for Westerners
to use the Tibetan Book of the Dead with dying persons. The Dalai Lama's response
was: "In general, without the preparation of initiation, meditation, and so forth, this
would be difficult. It is necessary to be familiar with the teaching" (Tenzin Gyatso
[The 14th Dalai Lama], 1984, p. 181). In this regard, it should be mentioned that the
techniques and concepts borrowed from Tibetan Buddhism in this study were origi­
nally embedded in a system of other larger values such as the search for self­
realization or enlightenment. Finally, although I found aspects of Tibetan Buddhist
psychology especially helpful in my own professional practice, a transpersonal
perspective is exclusive to no one particular psychospiritual path.

MIND AS TREASURE

*Of all marvels the greatest is the birth of inner Experience and Realization.*

-Milarepa (in Chang, 1989, p. 617)

In Tibetan Buddhism, the significance of the human mind is paramount (Carr, 1993;
Coberly & Shapiro, 1993a, 1993b; Lati Rinbochay & Napper, 1980; Tenzin Gyatso,
1994). Whatever else may appear lasting and constant in the external world will
inevitably pass away, but the essence of the mind is said to remain as a constantly
evolving thread of continuity from one rebirth to the next (Becker, 1989, 1993). At
death, the body-continuum is lost but not the mind-continuum. Because of its
continuity from one life to another and its capacity for enlightenment, the mind is
considered the most valuable inner resource of a human being.

Tibetan Buddhism teaches that the mind has two aspects: (1) enlightened or liberated
mind, at peace, illumined by spontaneity, and endowed with happiness; and (2)
unenlightened or conventionally conditioned mind, wild with contradictory and
impassioned thoughts, clouded by rote beliefs, and subject to suffering (Tenzin
Gyatso, 1992, 1995). Individuals can develop a liberating understanding of the nature
of their own minds through careful scrutiny, and by reflecting upon questions such as,
"What and where is the mind?" or, "Does experience unfold inside or outside the
mind?" Through observation, analysis, and training, the most fundamental nature of
the mind can be known and experienced, and consequently the thoughts that cause
confusion, delusion, and suffering to arise can be tamed and controlled (Thubten
ning of the nature of mind is liberating because it disengages us from all illusions and
consequently from the source of the suffering, fears, and difficulties that make up our
daily life" (p. 17).
**The Mind-continuum**

The most subtle essence of the mind that carries through from lifetime to lifetime has been referred to variously as the awareness-principle, the mind-stream, consciousness, or the mind-continuum—the phrase we have adopted for this study. The concept of an inherently existent soul that remains constant from lifetime to lifetime does not exist in Tibetan Buddhism, but the concept of rebirth of the mind-continuum does. According to this view, the mind-continuum has manifested repeatedly in cyclic existence-samsara (Tib, 'khor ba) since beginningless time (Geshe Rabten & Geshe Ngawang Dhargyey, 1984).

The movement of the mind-continuum from one state of being to the next, "the disappearing here and the reappearing there," is impelled by the karma (Tib.las) that has been imprinted on it throughout innumerable lifetimes (Govinda, 1991, p. 13). Karma is the universally recognizable law that for every action there is a necessary and concordant reaction. In the Tibetan Buddhist view, every action an individual performs, whether positive, negative, or neutral, effects a karmic imprint and becomes a subconscious predisposition towards acting in that same manner again—both now and in future lifetimes. Thus, actions and deeds of the past strongly determine present circumstances, and actions taken today greatly influence the future (Lama Lodo, 1982; Lama Yeshe & Zopa Rinpoche, 1982; Namkhai Norbu, 1986; Tenzin Gyatso, 1985).

At death, the mind-continuum, impelled by its karmic predispositions, separates from the physical body and enters an after-death state where it journeys until it is reborn into another cycle of existence. Positive predispositions can lead to a happy rebirth, negative predispositions, an unhappy rebirth. Consequently, in the Tibetan Buddhist view, it is essential that the mind be tamed and trained during life to cultivate positive thoughts and thereby increase the likelihood of a beneficial rebirth after death.

**Rebirth and the Six Realms**

Rebirth in the Tibetan Buddhist tradition takes place in one of six realms of existence (Bokar Rinpoche, 1993; Chagdud Tulku Rinpoche, 1987; Geshe Rabten, 1984; Lama Lodo, 1982, 1985; Lama Yeshe & Zopa Rinpoche, 1982; Tenzin Gyatso, 1984; Tsele Natsok Rangdrol, 1989) which are said to actually exist, but can also be looked upon as psychological attitudes that appear in everyday human behavior (Fremantle & Chogyam Trungpa, 1987). Three unfortunate, "lower" realms are said to exist: (1) The realm of hell-beings is characterized by violence and aggression: A person is propelled to this realm through the strength of anger and hatred. (2) The ghost realm is characterized by intense greed: A person is propelled here through strong attachments and desires. (3) The animal realm is characterized by ignorance: A person is propelled here by sloth and small-mindedness.

The other three realms are considered fortunate rebirths: (4) The human realm, characterized by both pleasure and pain. (5) The demigod realm, characterized by
jealousy and fighting. (6) The god realm, characterized by comfort and beauty, but tainted by the eventual painful awareness that such happiness is only temporary. Achieving a rebirth in one of the three "higher" realms is accomplished by having a mind-continuum that is impelled by the force of positive karma gained through discipline, compassion, and altruistic actions. But, being born in the upper realms does not guarantee that the mind-continuum finds peace and lasting happiness. For example, in the god realm there is a sense of happiness, since being born in that realm is the result of positive karma, yet this happiness is temporary. Eventually the positive karma is exhausted and there is great suffering when a being realizes that rebirth will take place in a lower realm. Therefore, it is of no long-term benefit to be born in a god realm.

Attachment to permanence and aversion to change affect the mind-continuum negatively in any realm. If attached to the circumstances of an impermanent situation, "even beings of higher realms swing back and forth between hope and fear, and unchanging happiness is impossible to attain" (Chagdud Tulku Rinpoche, 1987, p. 13). Of the three higher realms, human rebirth is considered the most fortunate, because it affords the greatest opportunity to develop positive karma, since a human being has the opportunity to change or redirect his or her mind at any time (Khenpo* Palden Sherab Rinpoche, 1993). A human being also has the greatest opportunity to cultivate nonattachment by realizing the inherent transience of cyclic existence and the disappointment and futility of trying to permanently preserve anyone set of conditions. In any of the realms, attachment strongly determines the karmic tendencies that impel the mind-continuum. Karmic tendencies incline the mind-continuum towards acting in the same manner throughout the bar do of life, dying, death, the after-death state, and rebirth.

The bar do

In Tibetan, the word bar do means "intermediate state"; in the West, however, generally the word bar do is used much more narrowly to refer to the intermediate state between death and the next rebirth. According to some Tibetan Buddhist sources there are six 13 different bar do, or intermediate, states of existence:

1. the bar do of the realm of life (Tib. skye gnas kyi bar do*);
2. the bar do of the dream state (Tib. gnying lam bar do*);
3. the bar do of meditation (Tib. bsam giang bar do*);
4. the bar do of dying (Tib, 'chi kha'i bar do*);
5. the bar do after death (Tib, chos nyid kyi bar da*);
6. the bar do of seeking rebirth (Tib, srld pa'i bar do”).

In its larger, metaphorical sense, bar do stands for the intermediate state between any ending and its ensuing new beginning. Thus, between each moment, thought, breath, and feeling, there is a bar do. And, each of the six realms of being is a bar do. The bar do concept is central to the Tibetan Buddhist view of existence as a continual process of ceaseless transformation.
The bar do of the realm of life, the skye gnas kyi bar do, is the intermediate state during which an individual has the greatest potential to condition the karmic predispositions of the mind in positive ways. It is also in this bar do that the mind produces one of the primary delusions of the unenlightened or ordinary mind—identification with the physical body and the conviction that it is permanent (Hopkins, 1984). During the skye gnas kyi bar do, the ordinary mind becomes habitually conditioned to identify with the body: consequently it develops great attachment and commitment to satisfying the senses, thereby creating the karmic tendency to repeat this identification and resultant conditioned behavior from lifetime to lifetime and in the bar do between lifetimes.

The overriding preoccupation of the ordinary mind with the physical self tends to obscure the potentially enlightened mind. According to Tibetan Buddhism, the enlightened mind will become manifest—brought to light—after the ordinary mind is studied and understood, and then tamed, purified, and disciplined towards generating positive actions.

ORDINARY MIND

_We are what we think. All that we are arises with our thoughts._
_With our thoughts we make the world._

- The Buddha (in Byrom, 1976, p. 3)

The ordinary state of mind is made up of thousands of habitual and often limiting thoughts, many of which are negative, and thus lead to unhappiness and suffering. The ordinary mind tends to repeat what it is used to and easily becomes conditioned to negative thought patterns. If subjected to scrutiny, these negative patterns of thinking that appear to be based in "fact" can instead be seen as a series of fickle and unreliable fabrications generated to satisfy the senses. The restlessness of the ordinary mind, which is constantly searching for satisfaction and gratification, obscures the more basic, enlightened nature of the mind. In the words of Tarthang Tulku (1977), while the surface of the ocean has many vibrations and waves "... if you go down just twenty feet, it's very quiet, very calm, very still. It's the same with our minds. In the outer form ... the forces are very active. Go further in and there is stillness" (p. 9).

According to Tibetan Buddhism, an individual has access to either the ordinary mind or the enlightened mind, and it is within an individual's own power to realize either. However, there are four “faults” of the ordinary mind that make it especially difficult for an individual to know or realize the natural, impartial, luminous nature of the mind (Dilgo Khyentse Rinpoche, 1992; Kalu Rinpoche, 1986, 1997; Powers, 1995):

1. In the same way that it is difficult to know the precise expression on one's own face, the nature of the mind is _too close_ (Tib. _nye drags_) to be recognized.

2. In the same way that it is difficult to comprehend the depth of the ocean, the profound capacity of the mind is _too deep_ (Tib. _zab drags_) to fathom.
3. The capacity that a mind has to rest in its own nature of enlightenment seems too easy (lib. *sla drags*).

4. The potential for enlightenment does not fit within the narrow limits imposed by the ordinary mind and is therefore seemingly too excellent (lib. *bzang drags*) to be accommodated.

In identifying with the physical body, the ordinary mind state is preoccupied with the senses and the fulfillment of the passions generated by the senses. As the Buddha states, "There is no fire like desire, no provocation that can equal hate, no suffering like this heap of flesh..." (in Chapel, 1985, p. 105). Negative thoughts such as hatred, greed, ignorance, jealousy, and pride arise in the ordinary mind state in direct proportion to the degree of attachment experienced. If the mind is greatly attached to having circumstances remain unchanged, it may experience extreme suffering when, inevitably, conditions do change. Because of its habit of grasping at permanence, the ordinary mind can all too easily become addicted to wanting circumstances to remain the same. And when, of necessity, circumstances eventually do change, being wrenched away from one's accustomed situation can give rise to great suffering.

*Addiction to Security: Illusions of Permanence*

In the West, the desire for security and commitment, and the attachment to not wanting circumstances to change, can cultivate the deceptive view that life can be more or less fixed. Even those able to acknowledge that the change we call death is inevitable are likely to feel that it will not happen for a very long time. Death is looked upon as an event in the far distant future. Some people are able to ignore the simple truth of impermanence by disguising it in a mounting abundance of possessions or activities, or hiding from it in a compelling series of addictions. Material objects may offer some reassurance—buying and possessing things can inspire a temporary sense of security, stability, and durability which helps to maintain a feeling of permanence. Habits of mind, and preconceptions that reinforce a permanent view of the world tend to predominate in the attempt to maintain the illusion of fixity. From the Tibetan Buddhist perspective, the outcome of believing in irrevocable security and permanence will ultimately be disappointment and suffering. Why? Because, "impermanence is not itself suffering. Human beings suffer because they fail to realize that all things change. Desiring constancy, they think their hopes are betrayed when they fail to find stability in a world that cannot offer it" (Mizuno, 1987, p. 14).

In the Tibetan Buddhist view, nothing is permanent because all things are related; they originate and exist in dependence upon one another. Any form or condition is the coming together of specific circumstances, yet these circumstances are always subject to change. The appearance of a cloud is an illustration of dependent origination (Tib. *rten ’brel*). A cloud forms from the coming together of certain elements such as water, air, heat, and wind. The cloud form appears in the sky as though permanent, even if only temporarily, yet the cloud is constantly in flux as the elements that compose it shift and change. When the elements disperse altogether, the appearance of the cloud disappears completely. Tibetan Buddhist psychology also applies the principle of *rten ’brei* to death. Dying is the process of the dissolution of the elements
that compose the body, and death is the dispersing of the elements that constitute that particular form.

Psychologically, according to Tibetan Buddhism, recognition of the ephemeral, changeable nature of conditions and the inevitability of death can evoke a remarkable shift in priorities. As Thurman (1994) states:

All the somethings in and around us with which we preoccupy ourselves from morning to night are potentially nothing to us. If we died, they would dissolve in our tightest grasp, forgotten if they were in our mind, lost if they were in our hand, faded into blank numbness if they were our mind and body. Surprisingly, once we become accustomed to the omnipresent possibility of death in life, we feel greatly liberated. We realize we are essentially free at all times in all situations (p, 20).

One who has gained an awareness of the transitory nature of the material world, and the false sense of permanence that the material world generates, can begin to transcend the habitual beliefs of the ordinary mind. Less attached to permanence, one will not be subject to the same degree of suffering that is inevitable for someone who is addicted to the illusion of security and permanence.

TRANSCENDING ORDINARY MIND

The realm of great bliss is that in which all appearances dissolve.

- Gendlin Chopel (1992, p. 268)

In the Tibetan Buddhist view, since everything is transitory and impermanent, including death, the only security an individual can truly possess is the state of his or her own mind. The ordinary mind has an addictive commitment to conventional, fixed, constructed realities, and the illusion of permanence blocks the opportunity to deepen an understanding of impermanence and death. By training and conditioning the mind away from the addicting thoughts engendered by the illusion of permanence, however, an individual can begin to realize not only the futility of trying to cling to the mercurial events of life, but can also attain the happiness and freedom that accompanies transcending the thought patterns of the ordinary mind. Recognizing the transient nature of the world—that everything is subject to change and that death is inevitable—can also generate an empathetic sensitivity and compassion for the shared destiny of all the inhabitants of cyclic existence.

Altruism and Cooperation: The Effect of Intentions

According to Tibetan Buddhism, with the birth of each new moment human beings have a fresh opportunity to choose between negative or positive responses to the unfolding events of life, and in this way happiness can be self-determined. The response that generates the most happiness is said to be that of working for the common good and the welfare of others—altruism. Kind thoughts and positive actions towards others will improve an individual’s circumstances from one moment to the next, and from one lifetime to the next. Therefore, the best way for an individual
to cultivate long-term well-being is by developing positive intentions based on a genuine concern for the welfare of others.

In the Tibetan Buddhist view, the altruistic intention to work for the benefit of others, rather than just for one's own, results in happiness because human beings are dependent upon the cooperation of one another for survival. As the Dalai Lama states:

The nature of our existence is such that we must depend on the cooperation and kindness of others for our survival. It is an observable fact that the more we take the welfare of others to heart and work for their benefit, the more benefit we attain for ourselves. You can see this fact for yourself. On the other hand, the more selfish and self-centered you remain, the more lonely and miserable you become. You can also observe this fact yourself (Tenzin Gyatso, 1995, p. 86).

Open-mindedness

The ordinary mind tends to resist change, and this tendency to be inflexible leaves little opportunity for productive change or the expression of new ideas and behavior. Individuals interpret circumstances and conditions differently, but to be empathetic and to interact in a mutually beneficial way, acceptance and appreciation are essential. An accepting attitude towards others is at odds with maintaining fixed explanations for evolving events. Cultivating open-mindedness towards others and changing rote reactions to external events can set new, positive forces in motion.

According to Tibetan Buddhism, developing a state of open-mindedness can be achieved through training and modulating the mind with discipline, generosity, and tolerance until the mind of bodhicitta (Tib, byang chub kyi sems) is attained. This is an enlightened state of mind in which it is deeply recognized that all beings are equal in their wish to be happy and not to suffer and in which self-centeredness gives way to compassion for the shared destiny of all beings. Propelled by a genuine concern for others, individuals possessing this enlightened mind are able to restructure their universe to respond appropriately to the needs of others. The development of open-mindedness can transform an entire environment into one of compassionate understanding.

TIBETAN BUDDHIST DEATH MEDITATION

Where on this earth will death not touch us? No place on earth-no place at all. Not in the sky, not in the midst of the sea, not in the rocky clefts of mountains.

-The Buddha (in Chapel, 1985, p. 67)

The Tibetan Buddhist death meditation is designed to assist the practitioner to develop a deep and abiding awareness of the truth of impermanence. The subject matter of this meditation is the most compelling example of impermanence-death. The awareness of death’s inescapability is said to provoke a deep mindfulness of this and every moment: an understanding that the past is but a memory; the future, a dream. Death can make its appearance at any time. And when death arrives, nothing is
of value any longer except the mind and the condition of its karmic tendencies. According to the Tibetan Buddhist view, being born a human being affords the opportunity, at any moment in one's lifetime, to cultivate an awareness of impermanence. A potent technique for developing and maintaining the awareness of impermanence is by practicing a death meditation on a daily basis.

The purpose of contemplating death on a daily basis is not to provoke anxiety or morbidity, but to generate a frame of reference that is based on the reality of impermanence—recognition that gives rise to a sense of immanence that frees the mind from developing a deep attachment or addiction to the illusion of keeping circumstances unchanged. In the words of the current Dalai Lama: "Through reflecting on death and impermanence, your concern solely with superficial matters limited in scope just to this lifetime will diminish in strength" (Tenzin Gyatso, 1984, p. 170). Not limited by the struggle to force conditions to remain permanent, an individual can become more in harmony with circumstances as they unfold, and therefore more open to change. When fear of losing something no longer predominates a person's behavior, it is easier to maintain a nonattached frame of mind—a mind more receptive to new or more appropriate responses to situations. It is a frame of mind especially useful in the conduct of caregiving to the dying.

As outlined earlier, in the Tibetan Buddhist view, the mind-continuum is conditioned in either negative or positive ways by an individual's actions, and the resultant imprints are the compelling force that will carry forth the mind-continuum through from one lifetime to the next. Positive karmic tendencies increase one's opportunity to remain aware and positive at the moment of death and after, thus potentially influencing the individual's future rebirth in a positive way. The contemplation of death and impermanence therefore can serve to generate a constructive mental state of hopefulness and the intention to live meaningfully on a daily basis, and, as well, while dying, at the moment of death, and after death.

It takes courage to live life meaningfully, and it takes courage to embrace death with clarity and open-mindedness. It also takes courage to be in the presence of the dying. The Tibetan Buddhist view increases hope and gives reason for courage by claiming that, as a human being, a person has the unique opportunity to participate in determining the quality of life today, tomorrow, and in future lifetimes.

*The skye gnas kyi bar do of this life and the death meditation*

For the Tibetan Buddhist, it is a healthy enrichment of daily life to fortify the mind and meditate on death throughout the day (Cozort, 1986). Recognizing the inevitability of death during our lifetime—the *skye gnas kyi bar*—establishes an awareness of the transience of the world and the futility of trying to hold on to circumstances destined to change.

The actual Tibetan Buddhist death meditation has three main sections, or roots: (1) death is certain; (2) the time of death is uncertain; and (3) at the time of death nothing is of value except the condition of the mind and the karmic tendencies that shape the
circumstances of the next rebirth. In Tibetan Buddhist doctrine, each of these three roots has three substantiating reasons that lead the practitioner to make a firm resolution to practice the Buddhist teachings now, without further delay, and to diligently prepare for death by conditioning the mind in positive ways.

In the practice of the death meditation, by verifying each of the three reasons with personal experiences, the practitioner demonstrates the truth of the root statement. Because the meditation is designed to be verified by the individual in this way, the roots and reasons are substantiated in different ways in various texts. Therefore, the example of the death meditation that follows is a synthesis of ideas from many texts. The "three roots," "nine reasons," and "three resolutions" are constructed from accounts of the death meditation found in the writings of Chagdud Tulku Rinpoche (1987), Geshe Rabten (1984), Lama Lodo (1982), and Mullin (1986). In the synthesis that follows, the three roots, nine reasons, and three resolutions are italicized. The remaining text is my (see Footnote 1) own, modern, Western adaptation of the reasons why death is certain, the time of death uncertain, and at the time of death nothing is of any value except the condition of the mind and the karmic tendencies encoded therein.

PART 1 Death is certain. There is no possible way to escape death. Life has a definite limit and each moment brings me closer to it. Death can happen in an instant; its time of arrival is unexpected. To have a human form is rare and valuable, yet the human body is fragile and can be short-lived.

1.1 Death will certainly come: Ultimately there are no circumstances that can elude death. No matter what I may think about my place and purpose in the world, I will not survive forever. No matter what I achieve, I will not survive forever. The certainty of death is alike for every being in every realm of existence; we are all impermanent. There is no way to hide from death or to avoid it. Think of all the beings who have lived in the past: No one has escaped death. In the future, too, we shall all die. In my family alone, my brother and two sisters have died. My father has died. So have two aunts, three uncles and many cousins. I cry when I imagine the impossible: My mother will die. And so will L Milarepa said, "Even the learned scholar cannot postpone it with his eloquence ... no coward like a fox can sneak away" (in Chang, 1989, p. 556). Death cannot be stopped by an army, even an army of physicians. When it is time to die, what can a physician do?

1.2 My life is diminishing without interruption, and nothing can be added to it. This life is the result of actions that were done in the past; therefore it cannot be made longer. My life is gradually ebbing away, second by second, hour by hour, day by day. I am one week closer to my own death now than I was last week. But it still seems very far away. It feels threatening to imagine that my life is ebbing away. I want to believe that I am gaining on my life, that my endeavors are making me more solid, stable, and lasting. On television I watch historical accounts of various vital and committed people—stories about their lives and works: they seem so alive—yet most of them have already died. Of the billions of people alive today, only a few will still be alive in a hundred years. If I were offered a lifetime of pizza with no weight gain, an annual, tax-free check of $100,000 for fifty years, or a silver Porsche with a lifetime, all-inclusive warranty, could any of these cheer me up if I were walking to my own
execution? Facing imminent death, it would be too late for short-term satisfactions and superficial distractions. But, I am marching towards my own death. So do I really want to indulge in negative actions?

Right now I have many good opportunities, a place to live, friends, relatives, possessions, and a relatively healthy body. Yet, all of these are impermanent, subject to change, and will soon pass away, just as in a dream; so why do I persist in believing that if I hold on tightly enough I can maintain them? Continually, moment by moment, day after day, my life is passing by, and it will eventually be used up.

1.3 Even while I live, I seem to have little time for spiritual practice and for improving the condition of my mind. Much of my life has already passed by. I don't know how much time I have left. I do know that more than half of whatever time is left will be spent sleeping and in other necessary tasks of surviving, but also much of it will be wasted in worry and anxiety about my own shortcomings and other imagined problems that unfold in my discursive mind. The time left for spiritual practice is limited. Examining my day, I see that much of it is taken up with trivial tasks and activities, and very little in spiritual practice. I presently have favorable conditions to improve my state of mind and prepare for death, an improvement that will not only increase my awareness in this life, but also enhance my chances for positive circumstances in the next life:

We go through life: like a cow trying to eat a patch of grass on the edge of a cliff, involving ourselves in one worldly situation after another and trying to get something out of it. Eventually we fall over the cliff, still unsatisfied; or maybe we do get what we were after, but then immediately fall over the cliff anyway (Geshe Rabten, 1984, p. 86).

Resolution 1: I must resolve to practice spiritual teachings. I need to develop positive karmic tendencies in my mind-continuum.

PART 2. The time of death is uncertain. The duration of my lifespan is uncertain and there are many causes that can lead to my death. The weakness and fragility of my body contributes to the uncertainty of life. Right now my life is in my body, but what if my mind-continuum separates from my body this afternoon, or tonight, and "my" body becomes a corpse? A Tibetan saying states: "There is no guarantee which will come first, tomorrow or the next lifetime."

2.1 The lifespan of a human being is uncertain. No one can predict with certainty when another person will die, regardless of the person's age. I have seen many young people die, and many old people live on for years. Some people get up in the morning and are dead by the afternoon. Some people go to sleep and never wake up. Some people are alive and well one moment and dead the next. In the past year more than two million people died in the United States (Johnson, 1997, p. 847). Thousands died suddenly or unexpectedly; 20,000 people were murdered, many of them children, and more than 43,000 died in automobile accidents. Everyone's life is uncertain.

2.2 Many circumstances lead to death, and few to staying alive. Accidents, human enemies, natural disasters, environmental changes, and diseases can cause sudden death. Even the circumstances necessary to maintain life can turn into adverse
conditions, such as eating spoiled food or taking the wrong medicine. Even though life is no more stable than a leaf that can be blown from a tree by the wind, it appears stable and permanent.

2.3 The body is very weak. Life is as fleeting as a flash of lightning, or a bubble on fast-moving water, yet it seems as solid and indestructible as the ground. The mountains and rocks seem immovably stable and permanent, but even they are eventually broken down into dust. And human life is extremely fragile in comparison. Even though I am healthy right now, the conditions that cause sudden death could appear and envelop me at any moment. If I only look after the superficial needs of my life and do not cultivate my state of mind, death may suddenly be upon me and I will not be prepared. Before I go to sleep at night, I am already planning what will happen the next day, when I will get up, and what I want to do. But it is also possible that I might not wake up in the skye gnas kyi bar do of this life, but rather in the chos nyid ky! bar do after death.

It is utterly uncertain when I will die, and therefore I must diligently continue my spiritual practice. There is no guarantee that I will live out today, or tomorrow, or through any other time. Therefore it is essential that I begin to develop and condition positive karmic tendencies in my mind, right now, so that I will have the opportunity to be aware and confident of what I will experience at the time of death and after:

Warned of a hurricane, we don’t wait until the storm pounds the shore before we start to prepare. Similarly, knowing death is looming offshore, we shouldn’t wait until it overpowers us before developing the meditation skills necessary to achieve the great potential of the mind at the moment of death (Chagdud Ti.likuRinpoche, 1987, p. 8).

Resolution 2: I must resolve to develop and continue my spiritual practice now. I must resolve to focus on and improve the state of my mind now, without further procrastination, and develop positive karmic tendencies that will enhance my opportunity to be aware of what I experience at the time of death and after death.

PART 3. At the time of death nothing can help but the condition of my mind. Death can come at any moment: What do I have that is of any value at death?

3.1 Friends and relatives cannot accompany me at death. My friends and relatives—no matter how much they want me to live, or how much they do not want me to die—have no power to stop death when my life comes to its end.

3.2 I cannot take any of my possessions when I die. No amount of money or possessions can sustain me when death arrives. No matter how attached I am to my belongings, I will be parted from all at death.

3.3 My body cannot accompany me when I die. At death, the body that I have cherished for so long will no longer be of use to me. The body-continuum ends, but the mind-continuum does not end. The mind-continuum continues on, impelled by the force of karma imprinted there. "When your breath stops tomorrow, no wealth on earth can help you. Why then should one be mean?" (Milarepa, in Chang, 1989, p.
Friends, possessions, and the body are no longer of use at death. Only the
condition of the mind is of value. The rebirth that a mind-continuum is attracted to is
greatly influenced by the positive and negative karmic tendencies imprinted there:

Nothing will continue but our stream of consciousness and the positive and negative karmic
instincts that it carries, the karmic seeds that were developed during our lifetime. If at that
time one sees that due to attachment to friends, relatives, property and one's body one has
wasted one's life and only generated a great deal of negative karma, the mind will be
overwhelmed by regret, like a man who suddenly realizes that he has eaten a lethal dose of
poison and it is too late to apply the antidote (Multhin, 1986, P: 47).

Resolution 3: Since all that is useful at the time of death is the state of my mind,
developed through spiritual practice, I resolve to continue my spiritual practice
diligently now, while there is still time. Everything else fades away like in a dream,
and it is therefore imperative to concentrate on conditioning my mind in positive
ways, now, while there is still time, so that I will have the opportunity to be aware of
what I experience at the time of death and after.

THE STAGES OF DYING AND THE AFTER-DEATH STATES

II Though indeed there are changes in the mindstream at death, it is the mind's projections
that change-there is no external change.

- Shabkar Lama (in Dowman, 1994, p, 103)

The 'chi kha'i bar do and the Stages of Dying

According to Tibetan Buddhism, the 'chi kha'i bar do of dying is said to begin at the
time of the initial terminal affliction, the last suffering of the physical body, and to end
at the moment of death, the moment of opportunity for practitioners to experience
instant liberation into the clear light (Tib. 'ods gsal*) which appears in unobstructed
brilliance at the moment of death. Dying is the process that precedes the final
separation of the mind-continuum from the body, and the moment of death is when the
mind-continuum—the most subtle essence of the mind—is released into space. In the
Tibetan Buddhist view, when the elements that compose the body-earth, water, fire,
wind, and consciousness-change their relationship to each other and dissolve, the
death of the body and release of the mind-continuum occurs. The process of dissolution of the
elements of the body is associated with external and internal signs that take
place in distinctive, detailed stages.

The Tibetan Buddhist stages of dying are based on a complex system that relates the
five elements-earth, water, fire, wind, and consciousness—and the five aggregates
of individuality-forms, feelings, perceptions, conditioning/motivational factors,
and consciousness-to the physiology of the human body (Clifford, 1984; Dummer,
1994; Evans-Wentz, 1957; Fremantle & Chogyam Trungpa, 1987; Geshe Wangyal,
1995; Govinda, 1960; Lati Rinbochay & Hopkins, 1979). Each of the five elements
has a specific representation in the body; for example, the earth element is represented
by flesh and bones. Dissolution of the earth element results in diminished vitality of
the solid parts of the body. The body becomes weak and heavy as the mind-body connection dissolves. The stages of dying can occur over a long period of time for some people. In the case of accidents and sudden death, however, the process can occur very rapidly." The Tibetan Buddhist stages of dying delineate specific, recognizable events that occur during the end of the dying trajectory; that is, the dissolution of the five elements results in the appearance of a sequence of external and internal signs. For Western caregivers, facing death is also difficult, and having some recognizable signs to follow during the dying trajectory can be very comforting. Offering caregivers the theory of the stages of dying, though drawn from the Tibetan Buddhist tradition, can provide a practical template for anyone to use in understanding some of the unusual phenomena that occur during dying. Although not yet scientifically investigated, it is confirmed by some anecdotal evidence and equips caregivers with a map to follow through the unknown territory of a dying trajectory. In certain cases the Tibetan Buddhist death meditation has also been extremely useful to me in my interactions with dying patients. For example, one dying woman who was struggling with the fear of her lack of immortality was greatly relieved by hearing me ask her three questions, and then quietly listening to her answers. The questions were: (1) Do you think that death is definite? (2) Is the time of any person's death indefinite? and (3) What will you have when the moment of your passing arrives? We spent a long time discussing these questions and she thanked me many times for giving her a way to focus when she felt confused about the meaning of her life and death.

The following synoptic description of what happens during the stages of dying, according to Tibetan Buddhism, is based primarily on material found in works by Clifford (1984), Kalu Rinpoche (1997), and Lati Rinbochay and Hopkins (1979).

Stage I: The dissolution of earth into water. When the earth element completes its dissolution and is absorbed by the water element, the mind begins its final separation from the body. The elements of the body referred to as earth (i.e., bones, flesh, teeth, and nails) lose their ability to function because the dying person's mind is separating from the body. The dying person experiences the diminishment of interconnectedness between the body and mind as a loss of physical strength, and may express this experience as feeling heavy and having a sense of sinking.

External signs that may be exhibited by a person as the earth element is absorbed into the water element are: (1) the person's ability to hold up his or her head weakens, and a sinking sensation ensues that may cause the person to call out something like, "Pull me up," or "I'm falling, please hold me up," or "Lift me, I am sinking"; (2) because even blankets and sheets feel very heavy, the dying individual may grasp and clutch at bedcovers and attempt haphazardly to remove them; (3) the absorption of the earth element into water causes the sense of individuality that is associated with the aggregate of form and the sense of perception to diminish, and the eyes to weaken, and the eyes may begin to roll up in the head; (4) as the water element increases during this stage, the dying person's vision becomes distorted and the mind is said to be filled with the internal sign of a silver-blue mirage appearance. To the Westerner, this mirage can be likened to that of the appearance of water on a scorching highway. The
person's mind becomes confused and is said not to remember the present physical condition of illness, which results in the sensation "that one is a victim of an intrigue" (Orofino, 1990, p. 68).

Caregivers may note during Stage I that the dying person's body seems especially heavy, and additional help may now be required to move a patient. At this stage, as the water element increases, the dying person's bodily heat may begin to move from the extremities towards the center of the body, thus requiring warmer covering for the legs, feet, and arms. Because of the person's diminishing vision and the inability to open and close the eyes completely, the application of moist pads over the eyes is often very comforting, as is drawing the window shades to block direct sunlight. The mental confusion that ensues as the mind separates from the body may also cause disturbances such as anger or intense anxiety that require special reassurances both for the patient and attending loved ones.

**Stage 2: The dissolution of water into fire.** When the water element dissolves or is absorbed into the fire element, the lack of connection between the body and mind increases and the body components that are associated with the water element (i.e., fluids and secretions) dry up. The patient may exhibit the following signs during this stage of dissolution: (1) the dissolution of the water element may cause some people to feel that they are drowning or being swept away by huge torrents of water; (2) because of a feeling of dryness and heat as the fire element increases, the patient's mouth and throat may become extremely dry, scum may form on the teeth, and an overwhelming thirst may cause the patient to call out for water; (3) during Stage 2, the sense of individuality that is associated with the aggregate of feeling, and the sense of pleasure, pain, and neutrality diminish so that the patient may no longer want or require pain medication; (4) as the fire element increases, the mind is said to become disturbed and angry and to experience the internal sign that has an appearance similar to that of billowing puffs of white smoke from a chimney.

Caregivers may note that during Stage 2 the dying person has little body fluid, including urine, and can be assisted with ice chips or a wet cloth to suck on to alleviate the feeling of dryness. Because during this stage the dying person can be extremely angry and confused, it is also an especially important time to maintain a calm and serene atmosphere.

**Stage 3: The dissolution of fire into wind.** When the fire element dissolves and is absorbed into the wind element, the mind and body are separated still further. The components of the body that represent the element of fire (i.e., those organs related to the production of the body's inner heat, such as the hypothalamus and the thyroid) fade, and digestion is disabled. The dying person may exhibit the following signs during Stage 3 of the dying process: (1) because the fire element is beginning to dissolve, patients may cry out feeling that their body is being consumed by fire, but then, as the wind element becomes more manifest, they may begin to feel extremely cold, especially in the extremities; (2) the extremities begin to mottle and digestion is halted; (3) during Stage 3 the sense of individuality that is associated with the aggregate of discrimination diminishes, and the mind is said to become increasingly unfocused and unable to remember who people are; (4) as the fire element is absorbed
into the wind element, the internal sign said to appear in the mind is one of tiny red
dots of light, "like fireflies:' or like the sparks that dance over an outdoor flame.

Caregivers may note that during Stage 3 the dying person's respirations falter, the
inspirations become short, and the exhalations become long and labored, and some
individuals may be greatly comforted by oxygen, or the turning on of a fan in the
room. The person may also lose control of voluntary bodily functions and become
incontinent during Stage 3.

Stage 4: The dissolution of wind into space. As the wind element is absorbed into
the element of space, the dying person's senses (sight, hearing, smell, taste, touch)
dissolve and the respirations become shallow and may begin to rattle (the "death
rattle" in Western medicine). The signs that the patient usually exhibits during the
beginning of the dissolution of the wind element into space are: (1) a thickening and
darkening of the tongue; (2) sporadic respirations, sometimes as far apart as one
minute each, until the last breath is exhaled, and the heart stops (it is at this point in
Western medicine that death is pronounced); and (3) as the wind element is absorbed
into space, the sense of individuality that is associated with the aggregate of composi­
tional factors, such as habits and thoughts, fades, the thought states associated with
anger cease, and the person is said to feel like a leaf being blown around in a
windstorm. At this time, the mind is said to experience the internal sign of a vision of
a diminishing flame in a dark room.

According to the Tibetan Buddhist view, there remain more subtle levels of con­
sciousness still to be absorbed, even though the physical signs, the vital signs by
which Western medicine defines life, have ceased. At this time it is said that the mind
becomes very disturbed and many different experiences and visions arise according to
the dying person's karma. People who are predisposed to violence may feel they are
being attacked and see other terrifying images such as the "Lord of Death" (Tib, gshln
tje). People who are religious may experience deities and angels, or familiar people
such as relatives and friends, coming to take them to another existence.

Stages 5-8: The dissolution of consciousness into space. As the element of con­
sciousness is absorbed into space, the remaining conceptual patterns of the mind
dissolve and the moment of death occurs. Death occurs when the two most subtle
psychophysiological principles of a human being, masculine and feminine, reabsorb
into each other at the heart, in a three-step process. First the masculine principle,
represented by a white drop, or hindu," is said to slowly descend from the crown of
the head, causing in the mind a white appearance like "a clear moonlit sky" (Thurman,
1994, p. 42). As the white bindu moves towards the heart, all of the 33 different mind
states related to anger are extinguished and the state of the Wisdom of Joy "which is
beyond dualistic grasping" ensues (Lama Lode, 1982, p. 6). If the percipient has
trained throughout the former lifetime to recognize that the Wisdom of Joy is a
reflection of his or her own mind, liberation is instantly achieved; if not, the second
step occurs.

The feminine principle, represented by a red drop, or bindu, is said to ascend from the
navel towards the heart causing in the mind the appearance of a "clear vacuity filled
with red light" (Lati Rinbochay & Hopkins, 1979, p. 18). During this stage, the 40
types of desire are said to be extinguished, and the Wisdom of Supreme Joy ensues. The percipient again has the opportunity to recognize the experience as being one and the same as his or her own mind and thus become liberated. If not, then the third step commences. The seven thought states that arise from dullness and stupidity (delusion) are extinguished as the red and white hindu meet at the heart and envelop the mind-continuum, causing a black appearance. Then the moment of death occurs and the mind-continuum is released into space.

The Moment of Death

At the moment of death, the mind encounters the clear, infinite and radiant light: brilliantly luminous-the source, origin, and ultimate of all, "the presence of what is real, the basic ground in which the play of life takes place" (Fremantle & Chogyam Trungpa, 1987, p. xvi). It is said that the brightest sun magnified a thousand times cannot equal the brilliant luminance of the clear light of death (Tib. 'od gsal). At the moment of death, all thoughts are gone and the mind-continuum-released entirely from material existence-is instantly reunited with the immaculate brilliance of the primordial ground or original source of all experience (Kalu Rinpoche, 1986).

A practitioner who has learned in the former lifetime to recognize this luminosity will not feel afraid or separate from it. Without doubt or fear, the mind can unite with the light "like a child jumping into its mother's lap" (Lauf, 1989, p. 6) and obtain liberation. If the mind-continuum has not been developed and conditioned during the former lifetime to recognize the brilliant luminosity as the source of all experience, and the same as one's own inner light, liberation will not be achieved. Instead, it is said, the mind-continuum will be overcome by the profundity of the clear light of death and swoon into darkness. After three to four days the mind-continuum awakens from its "swoon" and leaves the body altogether, entering the bar do between death and rebirth (Frernantle & Chogyam Trungpa, 1987; Lama Lodo, 1982).

The dissolution of the elements and the corresponding physical signs manifested in the body according to the Tibetan Buddhist account of the stages of dying are outlined in Table 1.

The chos nyid kyi bar do and srid pa'i bar do: The After-Death States

Having passed through the stages of dissolution and the moment of death without recognizing what is happening, the mind-continuum awakens from the blackout induced in response to the profundity of the clear light of death. Here, the journey through the chos nyid kyi bar do and then the srid pa'i bar do takes place, and if liberation is not achieved, lasts for 49 days." In the chos nyid kyi bar do, the mind-continuum begins to perceive and experience objects and forms that are "all of the nature of rainbow light, completely clear and shining, vast and free of obstruction ... transcending all limitations" (Tsele Natsok Rangdrol, 1989, p. 51). The mind-continuum experiences "superknowledge" and "perfect recall" and has awareness of dharma* teachings that have not necessarily been known to it in the preceding life.
### Table I

<table>
<thead>
<tr>
<th>ELEMENT</th>
<th>Bony Part</th>
<th>External Sign</th>
<th>Internal Sign</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. earth into water</td>
<td>aggregate of individuality that diminishes: form</td>
<td>solids: bones, teeth, nails</td>
<td>body weakens; neck not able to support the head; legs thin; stains collect on the teeth; difficult to open or close eyes; sight becomes unclear</td>
</tr>
<tr>
<td>2. water into fire</td>
<td>aggregate of individuality that diminishes: feelings</td>
<td>fluids: blood, lymph, tears</td>
<td>body fluids dry up, causing thirst, fever, dryness, sweating, and then a feeling of coldness; no more feeling of pleasure or pain</td>
</tr>
<tr>
<td>3. fire into wind</td>
<td>aggregate of individuality that diminishes: discriminations</td>
<td>inner heat &amp; metabolism: (hypothalamus &amp; thyroid)</td>
<td>warmth of body fades; digestion halts, extremities lose warmth &amp; mottle; no longer mindful of close people or daily affairs</td>
</tr>
<tr>
<td>4. wind into air</td>
<td>aggregate of individuality that diminishes: compositional that motivate action</td>
<td>the sense faculties: eyes, ears, nose, etc,</td>
<td>the tongue shortens and turns blue; the breath rattles with long exhalations, and short halting inhalations; the eyes roll upward, external breathing stops (the moment of death in Western medicine), no longer aware of the external world</td>
</tr>
<tr>
<td>5. wind completes its dissolution causing the appearance of white empty space</td>
<td>aggregate of individuality that diminishes: conceptual states of mind</td>
<td>the thought states resulting from anger, such as sorrow, fear, attachment, grasping, hunger, thirst, shame, and jealously dissolve; the white drop moves downward towards the heart causing the internal appearance of whiteness like the shining moon</td>
<td>the thought states resulting from desire such as joy, amazement, pride, effort, enthusiasm, heroism, deceit, and excitement cease; the red drop moves upward towards the heart causing the internal appearance of redness</td>
</tr>
<tr>
<td>6. consciousness or mind of while appearance dissolves into the appearance of red empty space</td>
<td></td>
<td>the seven deluded thought states (not wanting to speak, forgetfulness, doubt, mistakenness, laziness, depression, and middling desire) cease; the red and white drops meet at the heart causing the internal appearance of blackness</td>
<td>the seven deluded thought states (not wanting to speak, forgetfulness, doubt, mistakenness, laziness, depression, and middling desire) cease; the red and white drops meet at the heart causing the internal appearance of blackness</td>
</tr>
<tr>
<td>7. consciousness or mind of red appearance dissolves causing the appearance of black empty space</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. consciousness or mind of black appearance dissolves with the appearance of the clear light of death</td>
<td></td>
<td>the moment of death</td>
<td></td>
</tr>
</tbody>
</table>

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Also, in the *chos nyid kyi bar do* the mind-continuum has an illusory body that can be seen by people who have extrasensory perception, and also by some of the other beings in the *bar do* (Tsele Natsok Rangdrol, 1989).

Then, arising from the primordial clear light of death which now appears as rainbow light-white, green, yellow, blue, and red-is a series of peaceful deities that represents the positive projections of the mind-continuum. The percipient has the continual opportunity throughout every *bar do* experience of life, death, and after death to recognize that all phenomena originate in the depths of one's own awareness, and in so doing, be liberated into that same awareness. Once liberated, the mind-continuum "remains in the fields of bliss on the plane of the bodhisattvas?" (Lauf, 1989, p. 40).

Should the opportunity for liberation be missed during the appearance of the peaceful deities, visions continue to arise now in fierce and wrathful forms representing the negative projections of the mind-continuum. It is said that the wrathful deities can cause such intense fear in the percipient that it becomes still more difficult to recognize them as conjurations arising from within the mind-continuum. However, if they are recognized, liberation is achieved (Fremantle & Chogyam Trungpa, 1987, p. 57). If the mind-continuum does not unite with the light during the panoramic display of the peaceful and wrathful deities, the descent away from the clear light of death and towards a future rebirth continues and the *srid pa’i bar do* begins to unfold. "On the path leading down to the *srid pa’i bar do* the six dim lights appear, which flicker up from the sixfold world of existence below" (Lauf, 1989, p. 69), that is, the six possible realms of existence for rebirth outlined earlier.

The lights in the *srid pa’i bar do* are the same lights as seen in the *chos nyid kyi bar do*, and are refractions from the primordial luminescence that is especially clear at the moment of death. Each of the six realms of existence beckons with a different color of light. The six lights emanating from the *srid pa’i bar do* are said to be less clear-more dim and murky-than those previously experienced in the *chos nyid kyi bar do*. The god-realm is white, the demi-god realm is green, the human realm is yellow, the animal realm is blue, the hungry ghost realm is red, and the hell realm is black. Though the opportunity to be liberated is vibrantly present in the *srid pa’i bar do*, the mind-continuum tends to forget that the lights and visions, and the attractions and aversions, are all projections from within. As the conventional world slowly begins to materialize, old, favorite longings embedded in the mind-continuum come alive and form the strongest attractions that impel the mind-continuum towards the fulfillment of rebirth in one of the six realms.

**APPLICATIONS OF THE BAR DO FRAMEWORK**

"Better than a meaningless statement of a thousand words is a single word of deep meaning which, when heard, brings peace."

- The Buddha (in Chapel, 1985, p. 55)

It can be of great practical, psychological use to apply the *bar do* framework to the relational process between patients and caregivers during the dying trajectory. Dying
narrows the intermediate state between a patient's attachment to the world and the moment of death when liberation from all attachment instantaneously occurs. In my experience, Western patients who are dying, exhibit their waning attachment to the external world in different ways. Some can be overheard talking to dead relatives or participating in other imaginal events that caregivers are unable to see; others talk openly about the angels or heavenly figures who have visited them. In events such as these, I have also often observed bedridden patients looking towards the end of the bed and slightly upward, usually with their eyes partially open. Weenolsen (1996) says that the dying "Jive between two worlds, and that's a tough place to be: no longer at home in this one, not yet secure in the next" (p. 258).

Caregivers who are introduced to a broader vision of death and dying such as that provided by the ideology of the bar do may be better prepared to remain compassionate and open-minded during the many unusual and inexplicable phenomena that can occur throughout the dying trajectory. It has been my experience that fear arises in the caregiver when a dying patient begins to exhibit unusual behavior such as deathbed visions. Fear blocks empathy, and a frightened caregiver may feel compelled to try and bring the patient back to the "real" world rather than accept the unexplained.

The bar do framework provides a colorful and symbolic vision that explains some of the phenomena that appear during death and dying. The Tibetan Book of the Dead emphasizes that the bar do is an internal mind-state that is in a continually dynamic and energetic process of transformation. During life, an awareness of the bar do perspective can strengthen a person's motivation to develop positive karmic imprints in the mind-continuum by engaging in thoughts and actions that benefit others. To view the bar do after death as a dynamic event-s-one in which the dead person is participating-also endows the living with an opportunity to participate. In the Tibetan Buddhist tradition, the bereaved can contribute to the possible outcome of the future rebirth of the dead person by reading to the deceased from the Tibetan Book of the Dead. The Tibetan Book of the Dead reminds and encourages the one traveling in the bar do to trust in the inner knowledge gained during the former lifetime and to remain unafraid in the face of impending death.

Rituals for Bereavement

The Tibetan Book of the Dead is designed to be read to the dead person during the 49 days that the bar do experiences are said to arise. The ritual of reading to the dead person provides a period of time after death wherein the bereaved have a joint, continuing purpose in their connection with the deceased: assisting the dead person to travel safely through the bar do. The purpose of the bar do instructions is to remind the dead person that all the experiences and visions that arise are reflections of an internal process rather than entities that exist externally, and that recognizing their point of origin in the mind can instantly liberate the mind-continuum from another rebirth in cyclic existence.

As a very brief, condensed example of the character of the instructions in the Tibetan Book of the Dead, I compiled the following synthesis and adaptation of what may be read aloud, if and when appropriate, to the dead person in the first few days after
death. The synthesis is derived from three translations of variant texts of the *Tibetan Book of the Dead* (Evans-Wentz, 1957; Fremantle & Chogyam Trungpa, 1987; Thurman, 1994).

Listen to me now, Margaret Coberly, you are dead. You have died and returned to the other side of this world. You are dead and your old body has been left behind and a new one has not yet been found. This is the *bar do* state between death and rebirth. You must understand that you are now in a mental realm. Listen to me. You are experiencing the radiance of the clear light, pure reality, the primordial ground of your mind. Recognize it, and do not be afraid. Because at death the energies of the elements of your body are reversed, many strange and frightening sensations are occurring, but this is a sign that you are in the *bar do*. Previously, mountains, houses, and physical objects would obstruct you, but now you can go anywhere you want simply by thinking about it. Everything is effortless. However, when you speak to friends and family, there is no answer. No light comes from the sun or the moon or the stars—all is as twilight. The body that you have is entirely the reflected body of your own mental ideas; it has no substance, and it casts no shadow. These are the signs of the *bar do*. Recognize whatever appears as the reflection of your own consciousness; all horrors are the reflections of your own perception. Therefore do not be afraid or angry, but exercise your compassion and your love.

A reading to the dead such as the above is, of course, not appropriate for most people in the West, and could in fact confuse and frighten people who are not familiar with Asian cosmologies. Nevertheless, the concept of reading to the dead in order to positively influence their future rebirth could contribute towards the consolation of the bereaved. Reading to the dead gives the bereaved a tool with which to maintain a meaningful connection with the deceased for some period after death. In time, knowledgeable and perceptive caregivers could generate instructions to the dead appropriate for more Westerners.

The *garuda* (Tib, 'khyung po) is a mythological bird with an owl-like sharp beak. It is said to be born fully grown. Some sources say that it can assume human form, or is half-human and half-bird (Sangharakshita, 1996; Wray, Rosenfield, Baily & Wray, 1996). According to ancient Tibetan teachings, the *garuda* symbolizes the transformation of the ordinary mind into the awareness of the sublime essence of mind, the clear light (Tib. *'ods gsal*) that becomes manifest in the unobscured brilliance at the moment of death. Writing about the *garuda*, Sogyal Rinpoche (1992) says:

This image symbolizes our primordial nature, which is already completely perfect. The garuda chick has all its wing feathers fully developed inside the egg, but it cannot fly before it hatches. Only at the moment when the shell cracks open can it burst out and soar up into the sky (p. 106).

In the Tibetan Buddhist *gter rna* tradition, the *garuda* is sometimes also revered as a guardian of treasures (*gter bdag*) or even as the repository of treasures (*gter ka*) (Coleman, 1994, p. 315). As worldly concerns and distractions lose their appeal, and the dying person can become more introspective, the possibility of the *garuda* concept becoming manifest increases. Sharp, the author of *Living Our Dying* (1996), writes:

The shell of the ego cracks much like the shell of an egg. Whether it's the intense and prolonged pain, whether it's the clarity of what's truly important in the last few days, or hours, or whether it's a little of... doesn't matter. But those who've worked
extensively with the dying know what I mean. . . the ego-identity cracks, and what emerges seems like someone else entirely. . . Be thankful to be in the presence of such an emerging being (p. 150).

When a caregiver for a dying person can maintain an open, compassionate heart, everything that happens between the patient and caregiver can become a teaching. People need permission to die and reassurance that their dying is normal. Often, I have told my own patients that I will miss their presence, but when it is time for them to go, I will understand. A peaceful death is a human birthright. To help another human being achieve a peaceful death is the greatest gift a caregiver can bestow.

A lifetime of caregiving to the dying has led me to understand that the essential nature of the mind—the ground source of both life and death—is an inner treasure, a brilliant wellspring of clarity and self-understanding. Sadly, it is a treasure often recognized only in extremity. But the treasure is always there, its discovery imminent in any moment. It is not dying that reveals it . . . but awakening.

NOTES

‘Observations presented in the first person derive from the first author’s professional experience in caregiving.

‘Tibetian terms are italicized (excepting names and honorific titles) and those followed by an asterisk (along with some key Sanskrit words) are included in the glossary following the reference section.

Nevertheless, it is important to remember that troubles are almost inevitable in the presence of sickness and death, even for a patient who is an advanced practitioner of death awareness. Lama Yeshe wrote to a friend about his stay in an intensive care unit in the West after having a heart attack, “Due to powerful medicines, unending injections, and oxygen tubes just to breathe, my mind was overcome with pain and confusion, Trealized that it is extremely difficult to maintain awareness without becoming confused during the stages of death” (Sharp, 1996, p. 60).

Regarding a transpersonal stance it should be acknowledged that the caregiver attitudes of receptivity, open-mindedness, sensitivity, and insightfulness are not uniquely possessed by transpersonal caregivers per se. One recent example is the work of the French psychologist Marie De Henencel (1997). Similarly, in all walks of life, spiritually gifted individuals can be found exemplifying a “transpersonal” stance.

In Buddhism, the concept of the inseparable union between conventional truth (ordinary mind) and objective truth (sublime essence of mind) is symbolized in paintings as the union of a deity with its consort.

‘A tser ston is usually a Tibetan scholar or lama who has been foretold as the discoverer by the individual who hid the treasure. There are strict controls and tests regarding the finding and propagation of gter rna (Powers, 1995, p. 330).

‘Tulku Thondup Rinpoche (1986) includes some photographs of relics and scripts buried underground in Tibet and later unearthed by treasure discoverers.

‘The practice of gter rna discovery continues in this century by lamas who me primarily from the rNying ma pa and Kagyu sects, such as Dilgo Khyentse Rinpoche (1992) and K. l!u Rinpoche (1986, 1997).

‘Evans-Wentz used this title because of the popularity of The Egyptian Book of the Dead and the similarity between the two texts (Mullin, 1986, p. 3).

10 It should be noted that many versions of the bar do instructions exist (see Evans-Wentz, 1957; Fremantle & Chogyam Trungpa, 1987; Latif, 1989; Mullin, 1986; Thurman, 1994). Henceforth, the title, Tibetan Book of the Dead, unless otherwise specified, will be taken to mean the general corpus of variant texts in the Tibetan Buddhist tradition that are guide books intended to be read to a person undergoing the process of death and dying.
"Nonprofessional caregivers for the dying and those not presently facing such a situation may also find the material applicable.

The concept of rebirth and enlightenment in Tibetan Buddhist psychology is exhibited through the ritual of formally recognizing reincarnated teachers and masters such as the Dalai Lamas and the Karmapas.

"Some sources name only four bar dos because they subsume the gnying lam bar do (dream state) and the bsam giang bar-de (meditation state) in the skye mts kyi bar do of this life.

"Any reader approaching the age of fifty is likely to recognize that the earth element can begin to deteriorate long before actual death occurs. The frail or elderly are examples of how the earth element, the physical body, weakens over time, and how confusion and hallucinations can result from the weakening of thoughts and cognitions.

"Perhaps not at all, which would be most unfortunate," according to Ven. Karma Lekshe Tsomo (personal communication, January, 1997).

In this context, the Sanskrit word hindu (Tib. thig le) refers to the pure essence of the white/male and red/female generative or seminal fluids of the body (Coleman, 1994, p. 284).

Certain Tibetan Buddhist exercises (Tib. pho ba) allow the practitioner to master the art of consciously transferring the mind-continuum to a Pure Land or Buddha-field at the moment of death, where it remains until full liberation is achieved. A practitioner must be initiated by a master and then train thoroughly before performing pho ba at the time of death, which can be conducted for oneself or for someone else.

"In the context of the bar do, a day is a relative measure of time. It is variously described as being long as a day, as long as it takes to eat a meal, or as long as a handclap. In general it refers to "the duration of nondistractica from mind-essence" (Tsele Ntllsok Rangdrol, 1989, p. 4).

"The body of a dead person in Tibet is usually not disposed of for three-and-a-half days in order to avoid interfering with the process of consciousness which may still remain in the body.

References to days or other "time" constructs in the Tibetan Buddhist description of the chos ncid kyi bar do and the srid pa'i bar do do not necessarily correspond to conventional human time periods. Also there are variant texts with differing time periods and associated phenomena.

"Menial body of conscious tendencies" (Freemantle & Chogyam Trungpa, 1987, p. 41).

Another longer example, is presented by Levine (1982, pp. 284-289).

Tibetan Buddhist lamas chant the instructions,

The Dalai Lama (Tenzin Gyatso, 1984) reminds us that the Tibetan Book of the Dead is not meant for dying people who are unfamiliar with Tibetan Buddhist teachings. "If a person is familiar with the texts on the process of death, it is helpful to use them... Generally speaking, when a person is dying... one should not generate excitement or nervousness" (T. 181). Even among Tibetan Buddhists, depending upon their sects and practices, some will not "necessarily experience the same patterns of visions in the intermediate state" (Tenzin Gyatso, 1997, p. 212).

Tibetan words, as in the text of our presentation, are italicized, "S," indicates a Sanskrit word,

GLOSSARY

bar do-An intermediate state.

bar do thos grot chen mo—The great liberation through hearing in the bar do. One of the Tibetan books of the dead.

Bodhicitta (S.)-(byang chub kyil sems). Literally means enlightened (bodhi) mind (ciua). All enlightened mind is one free from bias and able therefore to see all beings as equal. Viewing all beings as equal helps generate the altruistic and compassionate aspiration to liberate all sentient beings from suffering, i.e., rebirth in cyclic existence.
Bodhisattva (S.)-(byang chub sems dpa’). Bodhisattvas are courageous individuals who are completely dedicated to the goal of achieving the welfare, particularly the enlightenment, of all sentient beings.

bsam gtan bar do-The bar do of meditation.

Buddha (S.)-(sangs rgyas). Literally means “awakened” and “developed.” A fully enlightened being.

‘chi kha’i bar do-The bar do of dying.

chos nyid kyi bar do-The bar do after death.

Dharma (S.)-(chos). Dharma is a Sanskrit term which in the most broad sense refers to the Buddhist teachings. The Sanskrit etymology is “to hold;” thus the Buddhadharma is the lineage of teachings that “holds one back from suffering,” and the process of spiritual transformation (Coleman, 1994, p. 298).

Gelug pa-A sect of Tibetan Buddhism.

Geshe-A title originally accorded to certain masters of the Kadampa tradition, meaning spiritual friend. Geshe is awarded to those who have achieved the highest scholastic degree (analogous to the Doctor of Theology) in the Gelugpa tradition.

gnying lam bar do-The bar do of the dream state.

gter ma—Hiddell treasure that is found by a pmphesized discoverer.

Karma (S.)--(las). Intentional action of body, speech, or mind, and the imprint or seed that it leaves on the mind-continuum. Each seed or imprint will eventually ripen and produce a result.

Khen po tmkhanpo)- Title given to the chief instructor or spiritual authority in a monastery. The title is also accorded to lamas of great learning.

lama (bla ma)- Title for experienced and learned religious teachers. Often casually used for members of the clergy in general.

‘ad gsal-Clear light. The inner radiance of mind which is ever-present within all sentient beings.

Rin po che-Literally, precious gemstone. By extension, in Tibetan Buddhism it refers to a spiritual master who is highly valued, or most precious.

rten ‘brel-Dependent origination. The principle that nothing exists independently of other factors, because things and events come into existence only by the aggregation of causes and conditions.

Samsura(S.)—(‘khor ba). Cyclic existence. A state of existence conditioned by karmic tendencies and the imprints from past actions (i.e., recurring habitual patterns) on the mind-continuum.

skye gnas kyi bar do-The bar do of this life.

srid pa ‘i bar do-The bar do of seeking rebirth.

Tulku tsprul sku)-A title that usually denotes a being of high realization who deliberately chooses to be reborn in a specific situation for the benefit of other sentient beings. The Dalai Lamas and the Karmapas are well-known examples.

Upaya (S.)-(thab). Skillful means. The ability to adapt what one teaches to the ability of the audience to understand.
REFERENCES


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