Notes

1. In the Beginning . . .

6. Ford and Reeves, “Fight or Flight.”
7. Dhabhar, “A Hassle a Day.”
8. Edinger and Thompson, “Death by Design.”
11. Nuland, How We Die, 134.
13. Most of the human record of these experiences comes from the field of near-death studies, in other words, from investigations of survivor testimony from motor vehicle and industrial accidents, war injuries, near-fatal drownings, mountaineering falls, and other sudden trauma events/experiences.
16. The distinctions between imminent and immanent come from the critic and literary theorist Frank Kermode, who discusses their role in fiction in his aptly titled book, The Sense of an Ending.
17. This is often why sudden death is so difficult to understand and why most onlookers and loved ones have major difficulties in discerning a meaning, and also why even those who have survived such sudden attacks or accidents commonly report disorientation and shock. In these cases, no one has time to discern meaning or
purpose. Dying in these cases is more a case of suddenly becoming dead rather than a gradual process of leaving life, as we commonly define dying.

18. I am not trying to replace Kübler-Ross’s five stages in *On Death and Dying* with twice that number of my own. Instead, I am attempting here to outline what I consider to be the core elements of the inner life of dying. Most important, the ones I have chosen to outline are the ones that seem to repeatedly occur and to dominate a wide diversity of autobiographical writing and other self-reports about the experience of dying. These personal elements of experience and response have no necessary or natural sequential value for humans, although it must be said that in animal studies the elements of fear, courage, resistance, and transformative experience, for example, tend to occur to the dying animal in this basic sequence, depending on how quickly a deadly attack takes place. I have used that broad biological template of ordering as both a token acknowledgment of the origins of these experiences and responses and as a convenient basis for organizing the book as a whole. Notwithstanding this liberty of style, it is crucial to note that the elements themselves—and not their sequence—dominate accounts of dying as reported by dying people. Many of the different elements often occur together, simultaneously. When these elements occur separately, they may be experienced cyclically and in highly diverse configuration, driven as they always are by the individual personality and the innumerable cultural influences that petition and shape it. This is the way it is for all our living, and so this is the way it is for the last part of that living—our living while dying.

2. Suffering—Enduring the New Reality

6. Saunders, “Philosophy of Terminal Care.” See also Saunders, *Hospice and Palliative Care*.
8. Geertz, *Interpretation of Culture*.
11. Schwarcz, “Pane of Sorrow.”
3. Fear—A Threat Observed

35. Ibid., 68.
36. For a recent public overview of the social research into this problem, see PBS’s coverage (T. Miller, “In Many Countries”).
39. Ibid., 57.
40. Ibid., 22–23.
41. Frankl, *Man’s Search for Meaning*; see also Frankl, *Doctor and the Soul*.
42. Frankl, *Doctor and the Soul*, 109, 114.
43. Ibid., 116.
44. Ibid., 67.
7. Roth and Massie, “Anxiety and Its Management.”
10. Darwish, In the Presence of Absence, 41.
12. Langner, preface to Choices for Living, v.
23. Wink and Scott, “Does Religiousness Buffer.”
26. Kaufman, And a Time to Die.
28. Ibid., 292.
29. Henderson and Oakes, Wisdom of the Serpent. See also Kellehearr, Eternity and Me, 51–54.

4. Courage—Facing the Overwhelming

1. See Putman, “Philosophical Roots of the Concept of Courage.”
2. Lopez et al., “Folk Conceptualizations of Courage.”
5. Resistance — Facing the Choices

10. Ibid., 91.
12. Ibid., 16–17.
18. Ibid., 1.
23. J. Diamond, *C: Because Cowards Get Cancer Too*, 72–73, and 76.
26. Ibid., 166.
28. See Frankl, *Man’s Search for Meaning*.
6. Lederer, “Dark Victory.” See also Patterson, Dread Disease.
7. Also Seale, “Sporting Cancer,” and “Cancer Heroics.” The work of Juanne Clarke is also instructive and typical of this genre, for example, Clarke, “Cancer Meanings in the Media.” In the clinical literature see Byrne et al., “Patients’ Experience of Cancer”; Skott, “Expressive Metaphors in Cancer Narratives.”
8. Nuland, How We Die, 265.
9. See the early work of I. Illich, Limits to Medicine, 179–211, and also more recently Sherwin Nuland, How We Die, for a wonderfully reflective series of essays about the overzealous culture of medical rescue in the United States. For an anthropological account, see Kaufman, And a Time to Die.
11. Marcus, “Loneliness of Fighting a Rare Cancer.”
14. Bytheway, Unmasking Age, 94.
18. Tennyson, “Ulysses.”
20. Carson and Fiester, letter to the editor.
27. Kübler-Ross, On Death and Dying, 100.
28. Ibid.
32. Howse, Deaths of People Alone, 22. See also Richards, “Fight-to-Die.”
33. Kellehear et al., Care of the Dying.
34. Kellehear et al., Deathbed Visions, 2011–12.
6. Sadness and Anger—Facing Loss

3. Ibid., 84. See also Horwitz and Wakefield, Loss of Sadness.
5. Blazer, “Depression in Late Life.”
7. Barnhart, Chambers Dictionary of Etymology, 950 and 1036; Oxford Illustrated Dictionary; Roget’s Thesaurus.
8. Worden, Grief Counseling and Grief Therapy, 18, 96–97.
10. Lindquist, Rowing Without Oars, 182.
11. Robins, Living in the Lightning, 33, 82.
15. Ibid., 14.
16. Ibid., 313–17.
23. Frankl, Man’s Search for Meaning, 24.
25. Barnard et al., Crossing Over, 145.
29. Robins, Living in the Lightning, 16.
31. For a review of the relative importance of all these factors and influences, see Berkowitz and Harmon-Jones, “Toward an Understanding.” For guilt, anger, and pain see the early works of Engel, especially “Psychogenic Pain,” and Pilowsky and Spence, “Pain, Anger and Illness Behavior.”
36. Ibid., xxi.

7. Hope and Love—Connection

3. Some of these thoughts have been drawn from Kellehear, “World of Hope,” in *Book of Gentle Wisdom*, 4.
5. See Kellehear, introduction to Kübler-Ross, *On Death and Dying*; Gum and Snyder, “Coping with Terminal Illness”; Felder, “Hoping and Coping.”
6. Kylma et al., “Hope in Palliative Care.”
9. Eliott and Olver, “Hope and Hoping.”
12. Ibid., 106.
16. 1 Cor. 13:4–8.
17. J. Diamond, C: *Because Cowards Get Cancer Too*, 240.
18. Swensen and Fuller, “Expressions of Love.”
19. Georgers et al., “Symptoms, Treatment and ‘Dying Peacefully.’”
25. Ibid.
8. Waiting—In-between-ness

2. See Van Gennep, Rites of Passage; Gibson, Wake Rites.
4. Brodkey, This Wild Darkness, 111.
6. See Van Gennep, Rites of Passage, and Glaser and Strauss, Status Passage.
8. Simmons, Role of the Aged in Primitive Society.
9. Ibid., 226.
10. Wright, “Relationships with Death.”
12. Locsin et al., “Ugandan Nurses’ Experience.”
17. Barak et al., “Stress Associated with Asbestosis.”
22. Ibid., 86.
27. R. Levine, “Waiting Is a Power Game.”
30. Brodkey, This Wild Darkness, 26.
31. Ibid., 99.
32. Ibid., 152.
33. Ibid., 176.
34. Ibid., 69.
35. Ibid., 163.

9. Review and Reminiscence—Remembering

2. Barnhart, Chambers Dictionary of Etymology, 1072.
3. Barnard et al., Crossing Over.
5. Ibid., 2:364.
6. Ibid., 2:354.
7. Freeman, Hindsight.
9. Ibid.
11. Ibid.
14. Lorimer, Whole in One.
15. Sabom, Recollections of Death, 50.
17. Frankl, Man’s Search for Meaning, 38.
18. Jung, Undiscovered Self, 43–44.
22. Worden, Grief Counseling and Grief Therapy, 201–206.
23. Webster and Haight, “Memory Lane Milestones”; Cappeliez and O’Rourke, “Profiles of Reminiscence Among Older Adults.” See also Molinari and Reichlin, “Life Review Reminiscence in the Elderly.”
24. Webster and Haight, “Memory Lane Milestones.”
25. Frankl, Man’s Search for Meaning, 71–72.
29. McLuhan and Fiore, Medium Is the Massage.
31. Ibid., 68–69, 99–100.
32. E. F. Diamond, “Brain-based Determination of Death Revisited.”
33. Rose, Love’s Work, 120.
34. Ibid.

10. Aloneness—Disconnection

2. Ettema, Derksen, and van Leeuwen, “Existential Loneliness and End of Life Care,” 156.
3. Ibid.
5. United Kingdom, Department of Health, End of Life Care Strategy.
7. Ibid., 59.
8. Ibid., 70–71.
12. Ibid., 65.
14. Ibid., 1381.
15. Ibid., 1382.
19. Ibid., 121.
20. Ibid., 354.
22. Ibid., 139.
24. Kellehear, “Near-Death Experience as Status Passage.”
29. Suedfeld, “Aloneness as a Healing Experience,” 64.
30. See Kübler-Ross, *On Death and Dying*.
32. Kellehear, “Dying Old and Preferably Alone?”
34. Kellehear, “Dying Old and Preferably Alone?”
35. Richards, “Fight-to-Die.”
37. Muthumana et al., “Deathbed Visions from India”; Kellehear et al., “Family Care of the Dying.” For a discussion of why these prevalence rates are much lower in Western industrialized societies such as the United Kingdom or United States, see also Fountain and Kellehear, “On Prevalence Disparities.”

### 11. Transformation—Change, Change, Change

2. Ibid., 116.
11. Crane, “I Saw a Man.”
14. Kellehear et al., *Care of the Dying*. 
15. For a review of the hazards of diagnosis and misdiagnosis of persistent vegetative states, brain death, and other forms of coma, see Kellehear, “Dying as a Social Relationship.” For a discussion of intriguing cases of persistent consciousness in clinical circumstances where this should not be the case, see Kelly, Greyson, and Kelly, “Unusual Experiences Near Death.”

16. See the dozens of medical and psychological studies of near-death experiences conducted since the 1970s. For a good review of the key work in this field see Holden, Greyson, and James, *Handbook of Near-Death Experiences*.

17. See note 5.
20. Muthumana et al., “Deathbed Visions from India,” 105
23. See note 16.

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12. Some Final Reflections

Bibliography


