Contents

Preface ix
Acknowledgments xiii

1. In the Beginning . . .  1
2. Suffering—Enduring the New Reality  15
3. Fear—A Threat Observed  35
4. Courage—Facing the Overwhelming  55
5. Resistance—Facing the Choices  73
6. Sadness and Anger—Facing Loss  93
7. Hope and Love—Connection 113
8. Waiting—In-between-ness 131
9. Review and Reminiscence—Remembering 149
10. Aloneness—Disconnection 169
11. Transformation—Change, Change, Change 187
12. Some Final Reflections 211

Notes 221
Bibliography 235
Index 249
This book is about the unusual intersection of personal forces—physical, emotional, social, and spiritual—that predispose dying people to see afresh their old taken-for-granted worlds. Dying people encounter these unique combinations of personal experience and crossroad moments, often for the very first time in their lives. Above all, this book is about how it feels to die. But when I say feels I do not mean to isolate and describe emotions as if they have no intimate reference to the social, physical, and spiritual forces that create them. In this way I have chosen to write more about the key personal experiences that characterize dying, to describe the inner life of dying as an inseparable mixture of feeling, physical impulses, social interaction, meaning making, and soliloquy.

When I refer to the dying person in this work I am referring to a person who is consciously aware and expectant that death will come soon—often in the next few hours, days, months but almost as commonly within several years. However, irrespective of the calendar of events involved, this saturating awareness, expectation, and acceptance of impending death—sometimes in the foreground, sometimes in the background of the dying person’s mind—informs the descriptions, analyses, and reflections in this book. I am not concerned with the increasing number of people who have advanced disease, commonly a spreading cancer, who will not acknowledge to themselves any notions of death or dying. These people are not dying in any sense other than perhaps a medically observed one. Such people often view themselves as people living with serious chronic illness. They are, or aspire to be, survivors to the end. I am also not referring to other people who wish to adopt a type of philosophical pose that suggests all living things are dying things ipso facto. Once we are born, we begin to die. Between these two extreme examples, of sequestering on the one hand and overinclusion on the other, are serious examples of people