

# Hindu End of Life

## *Death, Dying, Suffering, and Karma*

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❖ Hindu suffering can be perplexing to Western thought. With almost 2.3 million Hindus of Indian origin and an additional 1 million practicing American Hindus now in the United States, healthcare practitioners need to know more about the tenets of Hinduism to provide culturally sensitive care. Family and community interconnectedness, karma, and reincarnation are major beliefs of Hinduism. Healthcare decisions may be made by the most senior family member or the eldest son. Karma is a combination of cosmic and moral cause and effect that can cross lifetimes and life lessons learned for spiritual growth. The belief in reincarnation gives great comfort to the dying and their families because they know their loved one will be reborn into a new life and that they are not gone forever. Enduring physical suffering may lead to spiritual growth and a more fortunate rebirth.

### K E Y W O R D S

end of life

Hinduism

karma

reincarnation

suffering

**D**eath is a universal experience. No matter what our culture, our religion, our race, or our country of origin, we will all die. How we approach death, how we think about suffering and grief, and what we believe happens after we die vary based on our culture, religion, and spiritual beliefs. Spiritual beliefs ground our thinking about end-of-life concepts. Humanists, which include atheists and agnostics, believe that death is the end.<sup>1</sup> Christians believe that death is the beginning of everlasting life with God.<sup>2</sup> Hindus believe that while death is the end of this life, it is also the beginning of a new cycle.<sup>3</sup>

Several estimates of the number of Hindus in America exist. According to the magazine *Hinduism Today*, there are about 2.3 million Hindus of Indian origin and another 1 million practicing American Hindus.<sup>4,5</sup> Every state in America has at least one Hindu temple, while larger metropolitan centers have many.<sup>6</sup> Historically, in the West, there has been very little exposure to Hinduism. With the exception of Hare Krishnas, one sect of

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Hinduism, Hindu people do not believe in proselytizing, nor do they often talk to outsiders about their religion.<sup>7</sup> With the population of Hindus growing in the United States, healthcare practitioners need to know more about this faith to be able to provide culturally sensitive care.

## ❖ CASE STUDY 1

Mrs S. is an 85-year-old Hindu woman brought to the emergency room by ambulance. She has a history of congestive heart failure and hypertension. She has been in the hospital three times this year. She is having trouble breathing and “lightheaded,” and her family is concerned. After diagnostic tests and physical examination, it is found that Mrs S. has symptoms of fluid overload, and her ejection fraction is 12%. A urinary catheter is inserted, and she is given a diuretic. Mrs S. goes into shock, develops respiratory failure, and is put on a ventilator. The physician has a discussion with the family about the seriousness of Mrs S.’s condition. Mrs S. does not have an advance directive. Hindus rarely have advance directives because of their belief in karma and reincarnation. After a discussion with Mrs S.’s husband and children, the decision was made to extubate and give comfort measures only. This decision to shift the goals of care to palliation is in line with Hindu beliefs relating to karma. Being kept alive by machine is often viewed as interfering with karma and inhibiting the natural course of death. Hindu people view death as a part of the natural cycle of life. Death is a transition to a new life. This case illustrates the importance of assessing cultural factors in palliative care and good communication to ensure optimum care.

## ❖ HINDUISM 101

Hinduism is the oldest known religion, having been practiced over 8000 years as evidenced by ancient Hindu scriptures.<sup>8</sup> Table 1 highlights some basic Hindu beliefs. Several newer religions have roots in Hinduism including Jainism, originating around 3000 BCE; Buddhism, originating around 600 BCE; Sikhism originating around the 16th century; and Brahmoism, originating in the 18th century.<sup>8</sup> Hinduism is unique in that it has no founder, no beginning that we can point to, and no one holy book. The most holy Hindu text is called the Veda: a word that means wisdom. The Veda consists of four books and more than 100,000 verses.<sup>3</sup> Other holy texts are called the Upanishads and the Puranas.<sup>8</sup> The *Bhagavad-Gita* (song of God) is generally accepted by all and appears to

**Table 1**

### Key Issues for Culturally Sensitive Care for Hindus

#### Highlights of Hinduism

- Oldest known religion still in practice.
- Belief in one God with many forms.
- Spirituality is a way of life for Hindus.
- Family is very important, and healthcare decisions are often made communally with the senior family member or eldest son as the final authority.
- Karma is moral cause and effect of thoughts and actions.
- Reincarnation means being born into a new existence on earth to evolve spiritually.
- Adherence to traditional values depends largely on acculturation.

be the most popular of Hindu sacred texts. According to Jeste and Vahia,<sup>9</sup> the *Bhagavad-Gita* is the most recent of the sacred texts and the most practical, giving devotees a more practical guide to Vedic wisdom.

One of the basic tenets of Hinduism is a belief in one God called Brahman. Brahman can take many forms, which means that there are literally thousands of gods and goddesses in Hinduism that each contains a part, or embodies a characteristic of Brahman. Many Hindus choose one god or goddess as their principal representation of Brahman, but may have many gods and goddesses that they worship or celebrate. Daily worship called *puja* includes lighting incense, prayer, and meditation and is often performed as a family in the morning before everyone starts their day.<sup>10</sup> Puja can be performed anywhere, but many families either have a room in their home dedicated to worship or at least an altar displaying statues or pictures of their chosen deity.

#### Reincarnation and Karma

Two important tenets of Hinduism that guide one’s actions and influence suffering are karma and reincarnation. Reincarnation essentially means to be born again. The body is like a set of clothes that the soul removes before putting on new clothing. From a Hindu viewpoint, one can be born as a human, an animal, an insect, or even a plant.<sup>11</sup> What form the next incarnation takes depends on karma, and one can move up or down the hierarchy. If a person has lived a good life and performed more good deeds than bad, they are born into a more fortunate existence.



Karma guides how a Hindu lives, and each person's deeds both in current and past lifetimes determine what sort of rebirth they attain. Karma is a combination of cosmic and moral cause and effect that crosses lifetimes and life lessons learned for spiritual growth. There are three types of karma: karma from past lives that may or may not be experienced in the present lifetime, karma currently being created, and future karma or karmic experiences saved for a future lifetime.<sup>12</sup> A devout Hindu will be non-violent on every level including the practice of vegetarianism. The ultimate goal after living many lifetimes is to be released from rebirth or to achieve moksha; becoming one with Brahman.<sup>13</sup>

### Caste System

A discussion of Indian culture and Hinduism would be incomplete without a mention of the caste system. For thousands of years, a strictly defined social structure existed in India. Each group or caste performed certain functions in society. The four main groups were the Brahman or priests; the kshatriyas, which were governors and administrators; the vaisya, who were the merchants and farmers; and the sudras, who performed menial tasks such as street sweeping and were considered spiritually unclean. The caste system was abolished in 1947, and while its influence is fading, some effects remain.

### Spiritual Suffering

Suffering for the Hindu is highly related to the concept of karma, for example, "Belief in karma and reincarnation are strong forces at work in the Hindu mind."<sup>14(p29)</sup> Any good or bad thought or action leads to reward or punishment either in this life or a future existence. Hindus believe that there are certain life lessons to be learned before achieving moksha. Working through the karmic situation will resolve that karmic issue resulting in a lesson learned.

A Hindu who is getting older or who has a terminal illness will "tie up loose ends" by apologizing where needed, talking with family and friends to resolve conflicts, and generally fulfilling all known responsibility.<sup>15</sup> The goal of a well-lived lifetime therefore is to perform good deeds, to practice devotion to God, and to learn the karmic lessons encountered.

Spiritual suffering for a Hindu comes from knowing at the end of life responsibilities are left undone, karmic tasks are not completed, or bad thoughts and deeds pre-

dominated. The concept of karma conveys that suffering is part of life. Suffering is a result of past thoughts and actions either in this life or a previous life. By enduring suffering, a Hindu "pays for" or cancels past negative actions. "Suffering can be positive if it leads to progress on a spiritual path, ...to be tested and learn from a difficult experience."<sup>16(p609)</sup> What may appear to be needless suffering to Western minds may be, in fact, a striving to meet death in a clear and conscious state and may be an attempt to atone for karmic debt.

From a nursing perspective, karma and spiritual suffering can have several ramifications. Hindus who feel they need to diminish or alleviate past karma may wish to endure suffering. This may involve fasting, doing penance such as intense prayer or worship, or enduring pain even when medication is available. Fasting can have several forms. The patient may wish to avoid only certain foods or not eat certain meals or at certain times of the day. Other forms of atoning for bad thoughts or deeds can include confession to a guru or priest, repentance either public or private, sacrifice such as shaving the head, religious ceremonies, gift giving to the poor or to the temple, and pilgrimages to sacred spots.<sup>17</sup> Obviously, participation in these activities depends on whether the patient is at home or in a healthcare facility and whether he/she is ambulatory or near death. Assisting the patient and family to be able to complete religious ceremonies, prayer, or penance may be very important to their spiritual well-being. Assisting the patient and family does not necessarily mean participating; it can mean helping them find the materials or just assuring them that they will not be disturbed. Allowing private time and space for these activities will be helpful.

### Suffering in Death and Dying Practices

Fearing death is natural and results from a fear of the unknown. According to *Hinduism Today*, a person with a terminal illness should tell family and friends so they can prepare for their loved one's death and be happy for them.<sup>18</sup> Death is the fulfillment of this life and a chance for a better reincarnation, a chance to learn new karmic lessons and to move closer to moksha.

Hindus believe that death must come naturally at the proper time. Life should not be prolonged by aggressive medical means unless it will result in a good quality of life. Prolonging life artificially would result in the soul remaining on earth past its natural time "tethered to a lower astral region rather than being released into higher astral/mental levels."<sup>14(p32)</sup> Hindus will often forgo aggressive treatment

when an illness is terminal or there is no hope of recovery. If the patient is a parent of young children, more aggressive treatments are often sought in the hope of prolonging life to provide for the children. Nor should life be cut short willfully. Speeding up death by artificial means would result in a large karmic debt. Suicide would result in many lesser rebirths to “make up” for the karmic debt of ending one’s life unnaturally.<sup>19</sup> Thoughts at the moment of death will result in a greater or lesser rebirth. (See Table 2 for a summary of palliative and end-of-life issues.)

Hindus may endure pain or uncomfortable symptoms to face death with a clear mind. They may use medication to control symptoms, but may avoid using so much that it reduces their consciousness. Rabindrnath Tagore,<sup>20</sup> a Hindu philosopher, once said “let me not beg for the stilling of my pain but for the heart to conquer it.” Hindus will, if at all possible, be thinking of Brahman at the moment of death and therefore experience a higher state of consciousness and a higher astral plane after death. Intentionally bringing all one’s attention and energy to the top of the head and thinking thoughts of Brahman help the soul leave the body in the highest possible state.

**Table 2**

**Nursing Care Issues for Palliative and Hospice Care**

- Palliative care is aligned with Hindu values.
- Most Hindus are vegetarian. Assisting patients with menu choices or having a dietary consult may help Hindus receive acceptable food. Families may bring food from home.
- Suffering is individual—some may believe that suffering is beneficial for their Karma, some may not.
- Respect the choice patients make for the use of pain medication: most will likely want a moderate amount to relieve pain while maintaining awareness, but some may want little to no pain relief from medications, believing that suffering will ease karmic debt.
- The family may want to turn the bed so the head faces east.
- End-of-life rituals such as chanting in the loved one’s right ear and putting *Tulsi* leaves and water from the Ganges River in the mouth are important for the soul’s purity and peaceful transition.
- Autopsy is not allowed unless required by law.
- Organ donation is discouraged since it interferes with both the donor and the recipient’s karma and the donor’s reincarnation.
- Above all—ask about the family’s traditions and needs before the last minute; everyone is unique.

Ideally, a Hindu should die at home surrounded by family and friends who will sing sacred hymns and say prayers or chant the dying person’s mantra in his/her right ear if he/she is unconscious. As death approaches, the bed should be turned so the head faces east. Hindus with a terminal illness or certain other disabling conditions are allowed to choose a “self-willed death by fasting”<sup>19</sup> but must tell their family and community. This is an acceptable method of ending suffering.

### Case Discussion Continued

Mrs S. was extubated per her family’s wishes. Friends of the family brought a CD player and played some traditional music. The temple priest was called and brought *Tulsi* leaves and sacred water. Mrs S. was given medication to relieve her pain and comfort measures including cool cloths, and positioning with pillows. Family, friends, and the temple priest stayed with Mrs S., reading from holy texts and praying. Her youngest son chanted her mantra into her right ear. The priest applied holy ash to Mrs S.’s forehead and placed a few drops of sacred water and a *Tulsi* leaf into her mouth for purity and a peaceful death moments before she died.<sup>21,22</sup>

### Postdeath Rituals

After death, all the pictures of deities in the household are turned to face the wall. The body is placed in the home’s entryway with the head facing south “reflecting a return to the lap of Mother Earth.”<sup>15(p170)</sup> If a patient dies outside the home, the family may want to bring the body home for ritual bathing, dressing, and for friends and family to say goodbye. If necessary, these rituals can take place in a mortuary.

Bodies are always cremated, never embalmed, although they can be frozen for up to 3 days so relatives can attend the funeral rites. The family may wish to witness the cremation and even start the cremation fire. The family may return to collect the ashes directly from the crematorium. After the family returns from the crematorium, everyone bathes, and the entire house is cleaned. The ashes are scattered in an ocean or a river or are sent to India to be scattered in the Ganges River. Infants and young children are the exception to the cremation rule: since they have not accumulated bad karma and are considered pure, infants and young children may be buried.<sup>23</sup> (See Table 3 for a summary of postdeath practices.)



The period immediately following death is considered a time of impurity. A pot of water is set in the entryway and is changed every day for 31 days. On the third, fifth, seventh, and ninth days, a meal of the deceased's favorite foods is prepared, and a portion is put in front of a photograph of the deceased. The time of impurity can last from several days to a year. The length of the time of impurity is traditionally determined by caste: the lower the caste, the longer the time of impurity.<sup>24</sup> During this time, the family lives in seclusion and does not participate in festivals, celebrations, or temple observances.

## ❖ PROFESSIONAL CARE ISSUES

Healthcare decisions in Hindu families will likely be made by the most senior member of the patient's family or the eldest son.<sup>25</sup> Hindu culture believes in "human interdependence and interconnectedness, which is understood to be the foundation of well-being."<sup>10(p28)</sup> In other words, Hindus do not have the same concept of individuality and autonomy that Westerners prize so highly; family and community are more important. Other cultural differences may or may not be relevant, depending on the acculturation of the family, and are directly contradictory to Western views. For example, addressing the head of the family first shows respect in Indian culture, while maintaining eye contact with a head of family or elder shows disrespect. The best course is to tread lightly and be aware until discernment can be made of individual preferences.

Accepting the end of life is part of Hindu philosophy. Artificially prolonging life is generally thought of as interfering with karma. Interventions such as intubation, artificial feeding, or very aggressive care in the face of a terminal illness would go against traditional Hindu thinking. Palliative and comfort care are in line with Hindu

thoughts on karma and reincarnation, concepts that Western caregivers need to be aware of.

Two other issues that relate to end of life include organ donation and autopsy. Autopsy is avoided unless required by law. Hindus believe that disturbing the body of the deceased is disturbing to their soul and inhibits the soul from moving onward.<sup>19</sup> Organ transplantation is another practice that is conditionally discouraged. From the donor perspective, a part of the body lives on and interferes with reincarnation. From the recipient perspective, part of the donor's karma is transferred along with the organ especially a major organ such as the heart, liver, or kidney.<sup>19</sup> Depending on the views of the family, donation of an organ other than the heart, liver, or kidney may be permissible.

Spirituality and culture go hand in hand for Hindus, and Western medicine is beginning to acknowledge the importance of spirituality in healthcare. Spiritual issues are now being addressed for patients, especially at end of life. In a study of 560 nurses who cared for dying patients in Ethiopia, Kenya, India, and the United States, nurses from all four countries identified spiritual interventions such as praying with or praying for the patient and reading from holy texts as helpful or important to patients and families.<sup>22</sup> The similarities between cultures speak more loudly than the differences. Nurses from all four cultures stressed compassion, respect, and individualizing care based on patients' needs. Specific culturally based interventions mentioned by the nurses from India included allowing family member to offer *Tulsi* leaves (a type of basil) for purity and water from the Ganges River for a peaceful death.<sup>21,22</sup>

## ❖ CASE STUDY 2

Mr A. is a 73-year-old Hindu man with end-stage pancreatic cancer. He is cachectic, bed-bound, and unable to eat. Mr A. rates his pain as 10 of 10 and is refusing pain medication saying, "I want to be awake and need to conquer my pain through meditation."

### Case Discussion

It would be appropriate to gently question Mr A. and his family regarding his beliefs surrounding both pain medication and his spiritual values. It may be that Mr A.'s spiritual beliefs lead him to suffer pain for the sake of karma, or he may be unaware that pain medication can be given that will not make him unconscious. He may also feel spiritual distress because he cannot overcome his pain with meditation and needs some counseling

**Table 3**

### Care Concerns After Death

- Pictures and statues of deities are turned to face the wall.
- Allowing the family to bathe and care for the loved one's body may be an important ritual.
- Cremation occurs within 24 hours if possible.
- Family members attend the cremation and bathe after returning home.
- A ritual time of impurity is observed.
- Ashes are scattered in an ocean or river or sent to India to be scattered in the sacred Ganges River.

from his spiritual advisor.<sup>16</sup> If Mr A. feels he must suffer for his karma, his decision must be accepted.

## ❖ CONCLUSION

Nurses who care for Hindus at the end of life whether at home or in the hospital should remember that Hindus are very family oriented and so may have many visitors at one time. There may be singing, chanting, praying, reading from holy books, and shared food. Healthcare decisions will likely be made by a senior family member or eldest son.

With a growing number of Hindus in the United States, it is helpful to know something about Hinduism to provide culturally sensitive care. Some of the main beliefs of Hinduism include the belief in one god named Brahman and a belief in karma and reincarnation. Karma is the principle of cause and effect that can continue over many lifetimes. Any thought or action, good or bad, contributes to karma. Reincarnation is being born into a new life to learn spiritual lessons and to resolve karma from previous lifetimes. Belief in reincarnation gives great comfort to the dying and their families because they know their loved one will be reborn into a new life, and they are not gone forever.

Palliative and hospice care are aligned with Hindu values. Hindus believe that death should neither be sought nor prolonged. Spiritual suffering is connected to karma. Enduring physical suffering at the end of life may reverse bad karma. Hindus would like to die at home surrounded by family. Ideally, they would like to be conscious and be thinking of Brahman at the very moment of death. If the person is not conscious, having the eldest son or a senior family member chant the person's mantra (sacred phrase) in his/her right ear prior to death is helpful. Rituals such as placing *Tulsi* leaves in the mouth, chanting, or washing the body may or may not be practiced by a particular Hindu family. Completing a spiritual assessment of the patient and family is essential to facilitating appropriate spiritual care.

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