
I did not want to read this book. When I got it a while back, I was secretly hoping I would never have to read it because I would be the first person in the history of the world to never know anyone to die. I was wrong.

My sentiments were only confirmed when I opened the book and read the foreword:

If you had been, say, a middle-class white woman in the United States 175 years ago, an elaborate choreography of death and mourning would have been familiar to you. You would have passed countless hours at the deathbeds of friends and relatives who died at home. There, one of your tasks would have been to help the dying person realise that she was in fact dying. You were there, in part, to encourage your friend to make her peace with friends, relatives and God. You would have visited homes of bereaved neighbours and encountered corpses, laid out awaiting burial, in their parlours. You would have regularly walked among tombstones – in your churchyard, or perhaps even in your backyard. You would have been accustomed to meeting men and women in mourning garb – black armbands for men, dresses made of drab black fabric for women. Their mourning clothing would have told you, wordlessly, of their grief. You would probably have worn mourning clothing yourself at some point. Your bombazine or crepe gown would have helped you live into your mourning and the social convention telling you when to put the black dress away would have given you an important calendar, telling you when mourning was to end, telling you when to resume the rhythms of life fully among the living.

Not only is this picture entirely foreign to me, it also strikes fear into my heart. The last thing I want to do is sit by the bedside of an ageing relative and help them realise that they are dying. I avoid cemeteries like the plague. I do not like black. And if I’m honest, I don’t really want anyone to do any of those things for me. I wish to die quickly to minimise the burden I will inevitably be on others. Little pain, little suffering, and hopefully, little grief.

This little book reveals how, as a society, we have arrived at this point. It is, as Moll points out, a powerful combination of the advances of modern medicine and the gradual loss of a Christian tradition of dying well from our collective consciousness.

Modern medicine means that people are living much longer than ever before, and usually not succumbing to now easily treatable conditions like consumption and influenza. “Having largely succeeded in treating these [quick-killing infectious diseases], our leading causes of death now advance slowly” (p. 28). Moll is quick to point out that the ability of medicine to heal so many minor ailments begins to work against us as we near the end of life. We possess the ability to stave off death by influenza, and as a consequence many of us have been lulled into a belief that with increasingly more aggressive treatments we can heal any illness. This means that our focus in life is almost always centred on living – not always with consideration for the quality of that life, and with little or no concern for how to die.

It is Moll’s contention that we need to redeem the *ars moriendi* – the art of dying. We need to recognise, along with many Christian doctors, ethicists, pastors and theologians, that “while aggressive care [has] its place, there must come a point when Christians shift their focus from extending life to preparing to die” (p. 33). Moll paints a picture of the Christian death that is beautiful, and not at all fearful. He quotes...
from a biography of John Donne, “life, men thought then, was a preparation for death, and it behoved each one to be ready to meet it…the surest way to meet such a moment was to have been through it often in the mind, to have endured it all in anticipation, and so to be able to meet it with the confidence becoming a Christian who trusted in the saving grace of Christ’s sacrifice” (p. 55). Believers follow in the footsteps of Jesus himself, who though he was in very nature God, chose to die. And so Christians need not fear following him to death for we have – as he did – the certain hope of resurrection.

But this is not simply a book about how to die well. This is a book about how to help someone die well. Moll starts by suggesting that we all need to have a conversation with our loved ones about their end of life values. He even gives sample questions: “What is the exact diagnosis? What is the natural prognosis of the condition without treatment? What are the treatment options? What are the chances for success? (p. 91)” He says “the ICU is a bad place to have an end-of-life care discussion” because anxiety levels are high, and the patient cannot usually contribute (p. 89).

Once a course of treatment – or lack thereof – has been decided upon, what does one do next? There are many ways to care for a dying person, but the loudest point that comes out of this book is that it is critical to “be present” with the person who is dying. “Sometimes there isn’t anything to do. Sometimes our presence is doing more than anything else that could be done” (p. 104).

Moll certainly has an agenda, and it’s hard to read this book without seeing that he is advocating for a culture of death that is less medically invasive. The reader is left in no doubt that Moll would rather a person die naturally than be kept alive with feeding tubes and breathing machines. It’s not so strong an agenda as to be counted a weakness, but certainly something to be aware of.

“Dying is an art only because through it God is at work. Only in God’s hand can something ugly and terrible be transformed into a thing of beauty and purpose. In the end death is as mysterious to us as resurrection” (p. 179). This book helped me see that though I will not be the first person in the history of the world to not see death, I need not fear even a slow and painful death, because my Christ has travelled the path ahead of me, and made it secure.

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