



DEATH IN DEPTH



Field research, as past issues of Subtext have revealed, can involve formidable terrain, thorny politics, extreme isolation, or the risk of frostbite. But sometimes the challenges are more metaphysical – and, in their own way, just as hard to deal with. Dr Patrice Ladwig tells Nick Riddle about his sometimes troubling encounters with Buddhist funeral culture.

eath in the West may still be considered 'That bourne from which no traveller returns', but then Shakespeare was no Buddhist. The ruling principle of Buddhist belief is that death is followed by rebirth, unless a person attains Nirvana. This is why death rituals are considered the most important of all rituals in Buddhist culture – and why they make for a fertile area of study. Dr Patrice Ladwig, Research Assistant in the Department of Theology and Religious Studies, is a veteran traveller in the Buddhist countries of South East Asia, and has delved deeper than most Westerners into the Buddhist way of death.

Ladwig first went to Laos as a backpacker in 1996, shortly after the communist government had opened the country to tourism. 'There were hardly any cars on the road back then,' he recalls, 'just the odd jeep from the United Nations Development Programme.' When he went back in 2003, and again in 2007, he witnessed two stages in a process of radical change.

'Laos has a reformed kind of socialism, like Vietnam and China,' he says. 'The economy is expanding: the infrastructure is much better, and there are internet cafés and international media in the capital city, Vientiane. And traffic jams, unfortunately.'

But modernity coexists with Buddhist traditions and rituals that have permeated South East Asia – with regional variations – for centuries. Ladwig is one of five academics in the Department of Theology and Religious Studies involved in a three-year comparative study of Buddhist death rituals in South East Asia and China, funded by the Arts and Humanities Research Council. His colleagues are looking at China and Sri Lanka while he concentrates on Laos and Thailand.

Death: theme and variations

'Death is the domain of monks in Buddhist culture,' says Ladwig. 'They don't usually officiate at other major life-cyle events, like birth and marriage. But their precise functions vary. In Sri Lanka, for example, the monks chant specific texts at funerals, and usually Theravada Buddhism, which you find in Sri Lanka, Laos, Thailand and Cambodia, is quite conservative about the texts. But in Laos, a few thousand miles over the ocean from Sri Lanka, you find some variations. When you study these changes, you get an idea of the complex ways that Buddhism spread and developed in different local settings.'

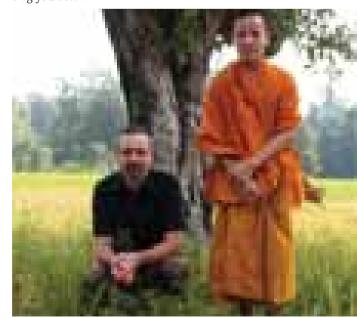
Ladwig worked with a French anthropologist and a Laotian film team in 2007 to record a pair of annual temple rituals that have a vital place in South East Asian Buddhism. 'You present food to the spirits of your ancestors and transfer merit to them,' Ladwig explains. 'We were able to make a higher-quality film than we expected, thanks to the miracle of currency conversion; it's a short documentary rather than just teaching material.' More recently, he made another film about mortician culture and funerals in Chiang Mai in northern Thailand.

It's easy to imagine a certain awkwardness if one turned up at a Christian funeral with a film crew and a list of questions. But Lao and Thai culture doesn't recognise the same distinctions between public and private, says Ladwig. 'Funerals are almost public performances: the more people who come the better, because you make merit for the deceased and help them to achieve a good re-birth.' He found people very open and co-operative, although preparing the ground is always preferable to turning up unannounced.

This is where Ladwig had a head start: he lived in Laos for two years, spent several months as a monk, and speaks the language. 'When I went back, I told my Laotian friends about the project and asked if they knew of anyone who would allow us to come and do a bit of filming and some interviews. And they would tell me to go to a certain temple and meet a certain monk, and I'd have the name of the family.' His explanation to them about a university research project was generally well received too: Laos has a university, and people, especially in the cities, are familiar with the idea of cultural studies – familiar enough to give Ladwig a taste of his own medicine on occasion. 'They'll ask us about our funeral culture,' he says, 'and they're curious to know Western ideas about death.'

That's not to say that the work was easy. Recording one set of death and post-mortem rituals can be a long process, taking in the evenings at the family's house when the monks come to chant, the cremation ritual, the collection of the bones three days later, and the post-mortem ritual some weeks later, when the family transfers merit to the deceased through the offering of food to the monks and the spirits. And the difficulties can often be more emotional than practical.

'If you go to a funeral of someone who died in their old age after a full life, it's a very relaxed affair,' says Ladwig. 'In Laos it's a little like an Irish wake – people play cards, tell stories, get drunk.' But he recalls one funeral at a temple in Louang Prabang, in the north of Laos, for a 21-year-old man killed in a motorbike accident two days before. 'The family was in a state of shock, but they were still very friendly to us,' he says. 'We asked our questions and we did some filming, but we felt very intrusive. And even just being there as an observer can really drag you down.'



Opposite, top: A monk reads out a sermon at a funeral in Luang Prabang, Northern Laos Opposite, bottom: A family poses with an image of the deceased son in front of a funeral pyre in Luang Prabang Above: Tales from the ricefield: Ladwig poses with a monk ('I'm kneeling because he has a higher status')

Tales from the field Profile



Monks and morticians

Monks occupy a unique position in Buddhist culture, says Ladwig. 'Doctrinal Buddhism has a lot to say about suffering and the impermanence of life. Monks are required to reflect on that, to understand these things, and to console people.' They are also considered immune from the dangers of 'spiritual pollution' that accompany close proximity to death.

Morticians are a different matter; they need protection against evil spirits. Many have tattoos to ward them off, or use magic spells called 'Katha'. 'These are written by a monk on a small piece of paper,' says Ladwig. 'He rolls it up and performs a chant over it, then puts it into a small container that the mortician wears around his neck. Besides protecting them against attack from spirits, it's supposed to keep them in good health.'

Ladwig has collected some interesting biographies from the morticians he has interviewed. He relates the story of one, a former bank employee: 'During the Asian economic crisis in the 1990s he lost his job and started drinking, and he had recurring dreams in which spirits haunted him. One spirit told him to become a mortician. So he went to a crematorium and trained with a mortician for free. Then the old mortician died and he took over the business. He talked about it in terms of karma: his becoming a mortician had to do with something he did in a past life.'

Some stories Ladwig heard were downright grisly. There was the one told by an 80-year-old mortician, for instance. 'The government decided to erect a monument to Thai soldiers killed in the Vietnam War,' Ladwig relates. 'When you erect monuments in South East Asia you often put bones inside to create a relic shrine. So a truck turned up carrying 50 bodies of soldiers and this mortician had to put them in tanks and boil the bones so that the flesh came off, then collect all the bones. He told me it took about ten days.' Ladwig confesses that this was pretty uncomfortable even to hear about.

The risks of immersion

Field researchers, like morticians, are not immune from 'spiritual pollution'; but unlike morticians, they aren't even accustomed to the constant presence of death. 'You try to be professional and detached, but you can't often do that,' says Ladwig. 'To immerse yourself in a different culture, you have to be around people and be empathetic with them.'

And it isn't just the funeral itself that can give you pause; after a week, the coffin is opened for a cremation. 'The face has changed; it can be swollen, and the skin has darkened. You can't help but reflect on that. But you try to go home in the evening and tell yourself that your work is finished and now you're back, just being a regular person.'



And Ladwig *is* that regular person – he's a fan of horror movies, for instance, but that has no bearing on his work. On the other hand, studying death rituals at close quarters has naturally influenced his own outlook. 'If you spend time in another culture and experience a different perception of death, you expand your own appreciation of death. And the differences are quite interesting,' he goes on, sounding a little more like the anthropologist now. 'For example, in the West we think of intensive moaning and crying as an intuitive expression of grief. But Laotian and Thai people believe that if you cry too much, the spirit of the deceased might want to come back and not be reincarnated. They cry only at a few prescribed moments.'

East and West

There are plenty of Western clichés and misconceptions about the 'mysterious East', but what about the view from the other side? Ladwig has had many monks jump to the conclusion that his research is about meditation 'because nearly all Westerners with a serious interest in Buddhism want to meditate' – unlike the majority of Buddhists in South East Asia, he adds.

In deep rural areas of Laos, Ladwig found some striking notions of life in the West. 'They think that we're infinitely rich and live like the people they see in Thai TV soaps,' he says. 'Some also see the West as morally corrupt, alienated and purely materialistic.' His attempts to explain to some of his rural Laotian friends that the realities of East and West are more complex than the exoticised TV images we get of each other meet with mixed success. 'You're forced into the role of cultural translator, and sometimes you manage to deconstruct the clichés, but often you don't, because explanation has its limits.'

Back from the dead

The more Ladwig has travelled between Europe and Asia, the less disjointed he feels coming back. He recalls returning from a six-month trip to India in his twenties, and being 'out of my mind for two weeks – I just didn't understand the world any more'. These days he gets three or four days of jet lag and noticing the different smells and textures – walking on concrete again instead of sand, smelling the fallen leaves in autumn – and that's it.

'You get professionalised by going back and forth so much, which I find a little sad,' he says. 'It's so interesting to feel that existential gap when you move between two worlds.'

Above, left: Scenes from hell depicted on a temple mural in Luang Prabang Above, right: A member of the temple committee in Vientiane delivers a prayer at the ancestor festival, when food is given to monks and then transferred to the spirits of the deceased

LISTEN&LEARN

While researchers across many disciplines keep trying to tease out the complex relationship between body and mind, doctors and clinicians are having to revisit their approaches to helping patients with a range of 'medically unexplained' problems. Helen Pryce has made a special study of one such group and their experiences of seeking help. She talks to Nick Riddle.



eneath the so-called 'mainstream' cases of hearing difficulty – with measurable deficits, an idea of the cause and a set of treatment options – lies a hidden contingent of people with hearing problems that can't be explained by the usual methods.

This isn't some tiny sub-group: it can account for up to ten per cent of consultations in ENT and audiology clinics. 'Generally, people have problems in noisy or stressful situations; they don't catch the ends of words, or they mishear things,' says Helen Pryce, lecturer at the Centre for Hearing and Balance Studies. 'Getting anxious about that can cause a vicious circle that means they cope less well with different listening environments.'

Personal voices

Pryce has made a detailed study of this kind of unexplained hearing difficulty – known as King-Kopetzky Syndrome – and has collected accounts of people's struggles with it and the emotions involved. 'They range from annoyance to despair,' she says. 'Some people won't move in with their partner because they're worried that they won't be able to cope with trying to hear over the noise the partner might make around the house.' Others won't go to busy shopping centres because of the background noise, or to petrol stations 'because of that *beep-baa* noise when the door opens and closes'.

There's also a significant group of people for whom hearing is a professional issue: teachers, doctors, musicians, people who work in tricky acoustic settings like a church. Pryce has also encountered funeral directors anxious that their hearing difficulties interfere with their work, since grieving people often have their faces down and speak less distinctly. The anxiety in such cases is more to do with perception than practicality: people worry about how others will react to not being heard, especially since the outward signs – such as a hearing aid – are

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missing. 'You can't even say, "I have a hearing loss", because you've probably been told that you don't,' she says.

Pryce herself has a hearing loss that was diagnosed early, thanks to the astuteness of her mother, a speech and language therapist. But her choice of career wasn't a foregone conclusion. 'I did a degree in humanities at Bristol Polytechnic but I didn't have a clear direction,' she says. 'I knew I was interested in psychology and sociology. Then a careers adviser, whose mother was being helped enormously by a hearing therapist, suggested hearing therapy.' After training in London, Pryce went into clinical work there and in the West Country, until her curiosity led her to pursue an MSc at Oxford University.

'In our clinics we were seeing a lot of people who had hearing difficulties with no medically explained cause,' says Pryce.'I chose that for my area of research.'

She was already teaching at Bristol when the University won a commission from the South West Strategic Health Authority to train audiologists for the West Country. The new Centre for Hearing and Balance Studies runs undergraduate and postgraduate programmes in audiology as well as professional training courses. Pryce helps to deliver these in addition to working as a therapist at St Martin's Hospital in Bath. She also continues her research, which sometimes challenges the orthodoxies of the field.

'Audiology still tends to ally itself with a straightforward, biomedical model, which means trying to trace these difficulties to a deficit somewhere on the auditory pathway,' says Pryce. 'But as researchers we're more interested in *how* people experience the

Seeking help and taking steps

them to the clinic in the first place.'

Her studies show the psychological effects that can result from being told by a health

hearing difficulty, because that's what drives

professional that there is no evidence of a hearing problem. These effects – including feelings of guilt at 'wasting the clinician's time' and 'imagining it' – may sound familiar to anyone who has sought help with other issues, such as back pain or chronic fatigue, that can't be confirmed objectively.

One of the chief strategies at St Martin's, developed partly as result of Pryce's research, is to give people a greater understanding of their problem. 'We try to give them as clear a picture as we can about what their hearing function appears to be and how their lifestyle might affect it,' she says. 'We make suggestions for improving the way they hear speech in the presence of noise.' Instead of leaving themselves at the mercy of a crowded room, for instance, they can 'manage' the space by choosing how to position themselves in relation to sound sources. 'Having a strategy can often give people more of a feeling of control,' she says.

From class to clinic

King-Kopetzky Syndrome is an example of the complex relationship between body and mind that researchers are trying to unravel. Pryce is more concerned with changing the culture in clinics. 'We train people to understand the psychology of adapting to hearing loss as well as to develop all the diagnostic skills,' she says. The BSc and MSc programmes include a unit on King-Kopetzky Syndrome and tinnitus – another condition that comes under the heading of unexplained hearing difficulties – so that practitioners are better equipped to recognise and treat such cases.

It's a good example of how research can feed into practice and help to improve healthcare at the business end. And the measures involved aren't exactly outlandish. On the contrary, the results of Pryce's work suggest something very basic: that one of the neglected skills that clinicians need to develop – ironically – is how to listen. «

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