# RABINDRANATH TAGORE'S 79TH DEATH ANNIVERSARY

# A Chronicle of Tagore's Final Moments

PARTHA PRATIM BHATTACHARJEE

LL people must die. The human body must come to an end in one way or another; if mine ends following its natural course, where's the harm in it? What's the point of tearing it to shreds? It is better to return this body intact to Him."

This is how Rabindranath Tagore expressed his feelings about the likelihood of having an operation during his last days. In comments made to Rani Chanda, who served as his scribe noting down letters and poems dictated by Tagore from his sickbed, he made it clear that he didn't want to go through the operation (suprapubic cystostomy)—instead, he trusted Kabiraji treatment. He said so himself to his son Rathindranath Tagore: "Rathi, Kabiraj has said that he hopes his medicine will help me get better. But it will take some time. Ah! What a relief it will be if my body is spared the shredding!

On July 9, 1941, when Dr Jyotiprakash Sarkar visited Shantiniketan to inform the poet of the decision on his operation, he also told the doctor that he would like to keep his trust in Kabiraj and not be pulled into a needless surgical procedure. The next day, he would summon Kabiraj Kamalakanta Ghosh and ask him, jokingly, to unleash his Brahmastra (a weapon of mythical powers created by Lord Brahma) to save him from the incursion into his body.

Tagore was never one to succumb to weeping or impatience but the prospect of an impending operation began to take its toll on him. It engulfed his whole being. After Dr Bidhan Chandra Roy's visit on July 16, during which he stressed the importance of a surgery, he burst into tears and told his daughterin-law Pratima Devi, "Mamoni, today the decision was finalised. They will cut me. They will not spare me."

It was not a unanimous decision, however. His personal doctor, Nilratan Sarkar, was opposed to it as he preferred regular treatment, while Bidhan Chandra Roy was convinced that an operation was the only remedy for his condition. Rathindranath, who saw his father's objection as childishness characteristic of old age, sided with the latter point of view.

Finally, on July 25, Tagore left Shantiniketan for Jorasanko for the purpose of the surgery. As he was being given a

farewell by the students of Shantiniketan Ashram, he was seen repeatedly wiping his tears. Did he somehow realise that this was going to be his final departure from a place that he had first entered with his father as a ten-year-old some 70 years ago? On the train on his way back home, he was his usual cheerful self again. The news of his return to Kolkata was kept a secret to avoid crowding by worried followers.

At the Jorasanko Thakurbari, living arrangements were made for him at the Pathorer Ghar ("stone house") on the second floor of the building which was earlier used as a sitting room. A temporary operation theatre was set up near the veranda and, unbeknownst to him, July 30 was fixed as the date for his operation.

Meanwhile, Tagore kept writing, or rather dictating, poems. These poems from the last stage of his life, faithfully recorded by Rani Chanda, are illustrative of his intrusive thoughts about the fundamental questions of life. But he didn't lose his sense of humour either. On July 27, he said jokingly, "Doctors are in deep trouble over my condition. They are upset as they can't find anything objectionable about my heart, my lungs. How can they treat a patient who has no illness?"

On July 29, he came to know from Dr Jyotiprakash Sarkar that his operation would be carried out with local anaesthetics without making him lose consciousness. He asked him how it worked and whether he would feel any pain. Jyotiprakash assured him that he wouldn't feel any more pain than he did during daily glucose injections: "Don't think about it at all. It may so happen that you will be dictating poems as usual while the operation is going on." He was relieved to On the morning of July 30, he again

asked the doctor if a date for his operation was fixed, to which the latter replied in the negative, to spare him the stress of having to wait for the moment. In truth, all preparations for the procedure had been completed by then. At 10 am, Tagore instructed Rani to write a letter to Pratima Devi, who had stayed back at Shantiniketan on account of her being ill with bronchitis. The letter began with—"Mamoni, I don't find joy in writing this letter to you because I can't write it myself..." Once the letter was finished, he signed, with a trembling hand,

"Babamoshai". It was quite illegible as the letters were entwined with one another. This was the last time the poet ever held a pen.

Soon after, surgeon Lalit Mohan Bandopadhyay entered the room and said, casually, that it was a good day for operation and asked if he was okay to go ahead with it. "Today?" Tagore asked, then, after a brief pause, agreed, saying perhaps it was better this way, to have it abruptly. At 11 am, he was carried on a stretcher to the operation table.

opened his eyes to again see some anxious faces. Even in this painful state, his spirit was unbroken. He tried to cheer them up, saying, "Why such solemn faces? Let me see your

The next day, he started having hiccups which added to his pain. He worried that medicines given by the doctors were a result of misdiagnosis and thus ineffective. The next night, he lay in a semi-comatose state. He refused to eat. He refused to listen



Rabindranath Tagore leaving Shantiniketan for Kolkata for his surgery. PHOTO: COLLECTED

The procedure started at 11:20 am under the supervision of Lalit Mohan Bandopadhyay, and it was finished within half an hour. Tagore was visibly in pain during the operation but didn't utter a single word about it. Once everything was done with, he was taken to his room. Seeing anxious faces surrounding his bed, he felt amused and said, smilingly, "What are you thinking? Happy now?'

On July 31, he lay benumbed all day, hardly moving a muscle. In the evening, he

to his carers. On August 3, his condition deteriorated further, so Pratima Devi was called up and told to come to Kolkata.

On August 4, he was a little more responsive and spoke occasionally, albeit haltingly. Pratima Devi had come by then. "Babamoshai, I am here, your Bouma," she said, gently touching him. He opened his eyes to see her face, and drank the water she gave him. On August 5, there was no response from him. He lay totally unconscious. He was

given saline solutions. An oxygen cylinder was brought in. His cheeks were swollen by then, his left eye red and constricted, and his feet and fingers sweating. There were no signs of improvement on the next day either.

On the morning of August 7 (or Sraban 22 in the Bangla calendar), the whole yard of the Jorasanko Thakurbari was swarming with relatives, friends and his countless devotees. The eastern sky slowly lit up. Champa flowers were brought in and spread on his two legs. His feeble body was barely responding to the lifesaving attempts of his doctors. It was 12:10 pm when his body finally gave out.

The news of Tagore's death, as could be expected, was met with a riotous display of grief by the swelling crowd outside. We get a glimpse of this moment from various eyewitness accounts. While his body was being bathed and prepped for the last rites, a section of the crowd broke in the house. The resulting chaos led to a forced reversal of plans that Tagore had himself laid out for his last rites: "I want to depart under the open sky in the bountiful land of Shantiniketan, in the midst of my children. There will be no cheers, no frenzied devotion. The only gathering will be that of the calm, still nature. I will have my peace from the synergy of nature and my loved ones. My body will be merged with Shantiniketan—this is my wish.

He wanted his departing moment to be peaceful and away from the boisterous crowd of Kolkata chanting "Hail to World Poet", "Hail to Rabindranath", "Bande Mataram". In reality, the opposite happened. Some people who had no association with the Thakurbari took over his body and marched to the Nimtala Crematorium, joined by thousands of mourners behind them. There were even incidents of tearing strands of his hair and beard to be kept in private collections. Even Rathindranath Tagore could not perform the rite of applying fire to the mouth of his father's corpse at the time of cremation, as he couldn't get through the attending crowd. All India Radio aired a live commentary on the entire mourning procession.

Despite his reservations, Rabindranath Tagore was given a hero's farewell in the end, by the people who loved him, whose souls he had touched through his music and poetry.

Partha Pratim Bhattacharjee is Chief Reporter at *The* 

# We must fight to end human trafficking

BIPASHA DUTTA

T'S been two months since 22-yearold Champa (not her real name) went . missing. One fateful day, a neighbour approached and told her about a job opening in Dhaka. For Champa, this was a breakthrough she had been waiting for some time. Life had changed drastically after her husband of three years walked out on her, leaving her without any support. She then moved in with her elder brother's family in Satkhira that consisted of his wife and their four children. The situation became dire following the lockdown imposed in March. With no daily income coming in from the shop where the brother was working, life became unbearable for all of them. So the prospect of a job in Dhaka came as a way out for Champa to provide for herself and her brother's family. For this "opportunity", Champa had to give the lady the gold ornaments she had saved. Unfortunately, that was the last time she was ever seen by her

Champa is among the hundreds of people in Bangladesh who go missing through trafficking every year. In 2019, a total of 592 people were reported missing, according to the 2020 Trafficking in Persons (TIP) Report of the US government. Sadly, these cases mostly go unreported owing to the patriarchal culture and bad governance in Bangladesh. Sometimes the community tends to abandon the entire family of a victim once a case is reported. Efforts to involve the police in such cases usually yield little results. So, families like Champa's suffer silently for fear of embarrassment from neighbours and friends.

For Champa's brother, the embarrassment is so profound that he fears he may be unable to marry off his 13-year-old daughter due to the stigma facing his family after the



PHOTO: COLLECTED

disappearance of his sister. He said, "Men from decent families are usually unwilling to marry a woman from a family where someone was trafficked.'

There are valid concerns that the number of girls and women being trafficked has spiked due to the impact of Covid-19 that has thrown millions of families into poverty after the lockdown and the resultant economic downturn. Many people have lost their daily source of income and facing severe hardship.

According to the TIP report from the USA, Bangladesh has succeeded in reducing trafficking after making progress in convicting offenders, establishing anti-trafficking tribunals and conforming to the 2000 UN

Trafficking in Person protocols. However, the gains achieved may have been undone by the impacts of Covid-19.

The same report also reveals that the country still faces challenges in meeting minimum standards in some of the key areas related to eliminating human trafficking. These include victim care facilities and identification procedure that remain inadequate. The report further shows that the country recorded a reduction in inquiries on trafficking cases by the authorities and law enforcement agencies.

In 2016, World Vision Bangladesh implemented a Child Safety Net Project to reduce children's vulnerability to trafficking,

abuse and exploitation and increase rates of identification, rescue, rehabilitation and reintegration in 25 sub-districts across nine districts. The project provided prevention, protection and restoration services for over 286,000 people including over 29,000 males and 119,000 females. A further 55,000 boys and nearly 83,000 girls were reached with various activities at the community level.

However, the project encountered several challenges. Union and upazila based Counter Trafficking Committees (CICs) are mandated to provide support to the trafficking survivors and to prevent the risk of trafficking in local areas. But many committees were not active at all. One project staff member said, "The CTC members from the district level were well aware of their roles. But CTC members from union and upazila levels thought that only NGOs were responsible for preventing trafficking. Although, later, they understood their roles and ensured cooperation."

Moreover, influential local community members often threatened the project staff as some of them were themselves connected with the traffickers. In some cases, after the survivors were traced, it was difficult for their family to accept them for fear of stigmatisation in their community. Often, the survivors endured traumatic experiences at the hands of the offenders. Consequently, the support they needed most from the families once they came back was missing, pushing them further into depression. The project offered psychosocial counselling for a certain time to bring them back into community life. Cross-border trafficking proved harder to tackle due to the time and cost of bringing survivors back in the country amidst the inadequate support and prevention systems that are in place.

There is no denying that trafficking may lead to suicide or cause mental illness and sustained trauma because of the victims' exposure to sexual abuse, domestic violence and forced prostitution. For preventing trafficking, various interventions are required at different levels.

To reduce the number of trafficking cases, it is important to have strong and functional policies, laws and related structures. Besides, the CTCs at union, upazila and district levels should be strengthened and made properly functional. Awareness campaigns and training programmes snouid de designed by combining different levels and institutions from the grassroots like small businessmen, faith and community leaders, and educational institutions as well as local government representatives, law enforcement agencies and the media.

To accelerate the process of repatriation, prompt and timely information sharing between various agencies and ministries of neighbouring countries is required on a regular basis. For ensuring rehabilitation of the survivors, long-term institutional support and linking them with income-generating activities are essential. Simultaneously, arranging gender-sensitising awareness programmes for the families and concerned stakeholders should be emphasised to ensure proper acceptance of the survivors. At the same time, it is necessary to address the key aspects of gender discrimination and ensure that women are not marginalised in low-paid labour market.

Champa, like so many victims like her, will probably remain just a statistic without a face but warmly remembered by her family, who are too ashamed to say anything about her disappearance due to the social stigma associated with it. We need to address this.

Bipasha Dutta is National Coordinator of Strategy, Innovation and Knowledge Management, World Vision

# ON THIS DAY



#### **AUGUST 7, 1942** Japanese airfield on **Guadalcanal seized by Allies**

In the Allies' first major offensive in the Pacific theatre during World War II, US Marines on this day in 1942 landed on Guadalcanal and captured the airfield from Japan, sparking a battle that lasted some six months.

### **CROSSWORD** BY THOMAS JOSEPH

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WRITE FOR US. SEND US YOUR OPINION PIECES TO dsopinion@gmail.com.

33 Words of understanding 34 Scruff 35 Twilight time 36 Sphere 37 "The Matrix" 8 Count start 9 Homer's neighbor hero 11 Unrefined

15 Penny

18 Seep

21 Car bar

17 Norse god

19 Come together

20 Ham or lamb

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YESTERDAY'S **ANSWERS** SAR ME ARGUE A S T E

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# **BEETLE BAILEY**





### **BABY BLUES**

BY MORT WALKER

