The Study

- Funerals as important ways of caring for dead and the bereaved
- Pandemic disruption and creativity illuminating what matters about funerals and why
- 68 interviews with UK nationals who during the pandemic: were bereaved; worked/volunteered as funeral directors/in death care; acted as officiants or celebrants.
- Analysis of funeral directors’ websites and communications about the pandemic at different stages
- Funded by the ESRC as part of UK Research and Innovation’s Rapid Response to COVID-19
Family, Community and Managing Support for Bereaved People

Dr Arnar Árnason
The Family – Some Possible Definitions

- **Family** (from Latin: *familia*) is a group of people related either by **consanguinity** (by recognized birth) or **affinity** (by marriage or other relationship). The purpose of the family is to maintain the well-being of its members and of society. Ideally, families offer predictability, structure, and safety as members mature and learn to participate in the community.[1] In most human societies, the family is the primary locus of attachment, nurturance, and socialization.

- family, a group of persons united by the ties of marriage, blood, or adoption, constituting a single household and interacting with each other in their respective social positions, usually those of spouses, parents, children, and siblings.

‘Family’ and ‘community’ are frequently cited as amongst the key institutions of contemporary society. Amongst such key institutions family and community are somewhat particular in relation to the space that they occupy, the place they hold, the purposes they are seen to serve as institutions. Specifically, they are often construed as vital institutional links between the individual person, society more generally and ‘society’s’ more formal institutions of state and governance. Family and community mediate between the individual, society and the state, they serve to prepare individuals for their participation in society more widely and they are sites through which society and state seek to govern individuals. ‘Family’ and ‘community’ are, furthermore, experienced as domains of intimacy and care, but also as domains of danger and violence, of governance and institutional control. The now very everyday term ‘patriarchy’ points, of course, to the latter aspects in a way that ties structures of authority and control through the family, community, and society more generally. Furthermore, in public commentary and academic discourses alike, ‘family’ and ‘community’ are oft the times portrayed as sites that embody the state of society generally – not least its states of cohesion or more frequently fragmentation – and evidence broader social changes. The oft perceived unravelling of family structures or community cohesion are quickly read as indications of the state of society more generally, while changes in family or community structures are taken as fundamental and serious symptoms of wider social changes. Processes for managing the edges of life – its emergence and endings – in turn are often seen as privileged sites for understanding the state of ‘family’ and ‘community’ as noted by anthropologists Kaufman and Morgan. How we attend to our dying, our dead and our bereaved, our new-born, our newly-born, is understood to reveal something most fundamental about us as people, as a society.
Community – some possible definitions

**Community** all the people who live in a particular area, or a group of people who are considered as a unit because of their shared interests or background.

A **community** is a social unit (a group of living things) with commonality such as place, norms, religion, values, customs, or identity. **Communities** may share a sense of place situated in a given geographical area (e.g. a country, village, town, or neighbourhood) or in virtual space through communication platforms.

The definition of **community** is all the people living in an area or a group of groups of people who share common interests. An example of **community** is a group of Buddhists who meet and chant together. An example of **community** is a suburban area that determines local laws and guidelines for business, schooling and other governmental functions.

**Community** is both a feeling and a set of relationships among people. People form and maintain **communities** to meet common needs. Members of a **community** have a sense of trust, belonging, safety, and caring for each other.

Even so, charged with carrying such burdens, ‘family’ and ‘community’ have both varied and contested meanings. Indeed, their meanings are far from stable – an unusual occasion perhaps where lack of stability serves to increase the capacity to carry. The role of family and community as contexts for managing at least one of the edges of life was thrown into sharp relief during the Covid-19 pandemic. For periods of the pandemic, participation from extended family, close friends, and in some cases a wider circle of the community, in various death rituals and forms of care, were difficult if not impossible. This disruption was in various ways more and less problematic and welcome. Loss of support and the comfort of others were mixed in with some cases of relief from pressures to be hospitable and sociable. And changes necessitated by the pandemic, had varied impact on different ‘communities’. What follows are but a few examples drawn from our interviews to illustrate the varied, contested meanings of family and community.
Complex families

F015 (Female funeral director of African-Caribbean ethnicity)

First of all, let me say that culturally our funerals were normally 200, 300 strong. I’m from an African-Caribbean background, so our funerals are very, very big and they’re all-day events. A lot of our families tend to be complex in the sense that they don’t necessarily, their parents are not necessarily married or the first child can be just for the mother or just for the father. There’s always a complex family structure. Choosing six people to come to a funeral was just a non-starter. As soon as I said it, I was waiting for the abuse. They were saying, “Well, how are we supposed to pick six? I’ve got six children or I’ve got eight children. I’ve got in-laws. I’ve got grandchildren. How do we choose?” and I just didn’t have an answer.
Families into Community

F015 (Female funeral director of African-Caribbean ethnicity)

You know, there’s people that have come from far and wide and sometimes you’ll see people you haven’t seen for twenty years and they’ll come back for a funeral. It’s very much a rekindling friendship and a lot of the community will contribute. I mean, funerals are very, very expensive and it’s very unusual to get a card without £20, £50 in. Most people will contribute to the funeral.

That whole community supports, so you will find at least one or two members of every family would be attending the funeral in some way or another. Because you show your respect.
Family into community

B028 (female Muslim)

…it’s a big, extended family thing, it’s like a wedding but sad. Even at the hospital, we found when they knew dad was dying they said, “You can tell your family to come” but then there was millions of us, do you know what I mean? My dad’s got like 38 grandkids and great grandkids and the nurses were getting annoyed but we were like, “You told us we could come”. We are his daily family, we see him all the time. We were annoyed the fact that you know it’s his end of life and you have made a face about us seeing their dad or our kids seeing their granddad so that annoyed me, and then again at the funeral, they let you see the dead body but because of Covid, my dad’s put in a box with a glass screen on it so nothing can pass to us, you know. Again, it was only immediate family and you know, you’ve got one close friend who hadn’t seen him for absolute years, we had to sneak him in.
Family into Community

X008 (Hindu male who conducts religious rites including funerals)

So there was a lot of anxiety about, you know the kind of rituals which are done, and the psychological effects of those because, as a psychologist and a counselling psychotherapist, I know that you know people have had huge difficulty in terms of not being able to do the rituals and the various different things. And the anxiety which arises from that, and the and the lack of support, which might have been there in normal times. So I think you must have heard many stories from the Hindus about, you know, it is a collectivist activity in the sense that it’s is not just one person’s funeral and, you know, just immediate family. It becomes like the extended family, not only the extended family, but indeed the community.

So the presence of the body and the kind of direct connection with the body through that process and through the ritual, allows people to say their final prayers, not only the immediate family, but everybody else they - the whole community can be there, right? I've seen you know hundreds of people being, coming home to do this, and during the COVID times all that was completely wiped out.
Family into Community

X008 (Hindu male who conducts religious rites including funerals)

Yes, yes. So for example, you know the collective, uh, what happens, is that, we, as soon as the person passes away the next day or the day after we arrange prayers in the evenings for the rest of the day until the time of the funeral. Now this can mean two, 300, even 1000 people turning up for these prayers. Now the prayers are for the departed soul and in the presence of this community with the family, is their support for the family. Yeah, so it works a lot of ways, in other words, that you know I'm here to support you, and I'm here to say, my, you know, condolences to you. But at the same time I'm here participating in the prayers for the one who has departed so it works both ways, yeah.
Family into Community

X008 (Hindu male who conducts religious rites including funerals)

But, see what happens [name], is that as soon as somebody passes away, what happens is families begin to go to the home of the deceased, just to show that here we are. We have heard about this that we are here to grieve with you. We are here to support you if you need anything from us, you let us know and we’ll be here for you. This is the message which is given by many members of the community, immediate family, extended family and this process goes on for two or three days. Yeah, and then you know that kind of care and support which is given to the family comes through that. And then the prayer meeting is also another form of support and care for their family. So not only kind of a psychological care, but also sometimes physical care, in the sense that you know if you need me to bring some food for you, if you need food for the family, if you need anything which we can provide in terms of your physical wellbeing, then we are here to support yourself. And that comes through the extended family and the community as well.
The bodies of those who died from or with the Coronavirus posed an uncertain risk – might transmission continue post-mortem? There were also transmission risks associated with gathering indoors beyond one’s household or ‘bubble.’ In the UK, this combination of risks met with a range of responses among those caring for the deceased – from almost total prohibition of interaction with dead bodies, to determined and creative adaptations to ensure both continuity of care and safety.

Care for the dead body is almost always important – but here we focus upon contexts where it is of paramount religious importance: for Jewish, Muslim, Christian, Zoroastrian, Sikh and Hindu individuals and organisations whose rituals were suddenly and dramatically affected.
Care for the Dead Body

• Jewish, Muslim, Christian, Zoroastrian, Sikh and Hindu participants
• Painful prohibition – ‘gut-wrenching’; ‘traumatising’; ‘unacceptable’
• Digital adaptations
• Alternative ritual forms – e.g. *tayammum*
• New policy and procedure – e.g. sub-teams; PPE; rigorous cleaning
• Mobilization of (younger) community members
• Some felt uneasy about unfamiliar ritual forms
• Loss of tactile, sensory aspects when digitally mediated

Early in the pandemic – in some cases for less than two weeks - some could not perform bodily rituals such as *taharah* among Jews, and *ghusl* among Muslims. Participants described this as ‘gut-wrenching’ and ‘traumatising.’ Some leaders chose not to inform family members that rituals had not taken place, knowing they would feel guilty and deprived, having been unable to fulfil normal ‘obligations’ and demonstrations of ‘respect’ believed to aid the deceased’s passage into the next life or afterlife.

Not least to avoid the pain of prohibiting these important rites, many religious organisations sought ways to perform them safely. Digital and video technologies were important here, enabling people to see the deceased’s faces or participate in prayers at a distance. In one wonderful inter-faith example, Chevra Kadisha members used Zoom to instruct a Catholic funeral director to perform *taharah*. Others adapted rituals, opting – for example - for ritual washings with one-way flow of water to protect volunteers, or for the dry form of Muslim ablutions, *tayammum*.

Others developed highly organised processes and procedures, with sub-teams for every distinct stage (to minimise unnecessary mixing) and using PPE and rigorous cleaning. Interviewees were proud that they had ensured rites went ahead, prevented illnesses, and that younger community members had volunteered to learn to perform rituals while the elderly and most vulnerable could not - interviewees saw this as a ‘silver lining’ for future continuity.

That isn’t to say everyone found these alternatives satisfactory: for example, some Muslim participants felt uneasy about using *tayammum* in place of *ghusl*, even though Muslim
authorities permitted and commended; conducting rituals via Zoom was less tactile and sensorily-mediated.

But these various solutions did facilitate rites safely and legally, compromising on neither religious priorities nor pandemic guidance.
But even phrasing it like this belies further complexity. Interviewees’ accounts evoked multiple and intersecting considerations, authorities, and institutions: tradition; God; the state; community; religious authorities; safety; the preferences and fate of the deceased; and their bereaved; and varying COVID policies among funeral directors, crematoria and local authorities.

They also hinted at a fear of being exceptionalized as religious minorities should they fall short – or be seen to fall short - of Coronavirus Act requirements.
Religious exceptionalization

C009 – [we were worried it would] get us into trouble, because obviously the cemetery [manager is] not going to be very happy [and] they’re going to report [...] that we’re not obeying the rules and that creates all sorts of problems.

X007 – [the] chaplain, the police, the ME’s office, even the coroner’s office, they’re very good with us, we’ve got a very good relationship with them. [But it] was very difficult - taking names on who can attend funeral prayers and allowing only them [in] and [telling the family contact] that if anybody else comes the police [might have to be called] - because we’ve had police involved as well [because] we’ve received complaints about numbers and so forth.

Interviewees described concerns that they would be reported, that relationships might be damaged, or that the police might be called – and occasions on which they were, during which they had to defend their compliance and safety.

There was a great deal of uncertainty and upset surrounding care of the dead body during the pandemic: there was also a great deal of determination and creativity. But there was also inequality: minority religious and ethnic groups were disproportionately affected by the virus and responses to it, and had to disproportionately defend the steps taken to ensure ritual continuity.
Funeral Directors and the Viewing (or not) of Bodies
Dr. Paolo Maccagno

Drawing on illustrative examples from the ongoing Care in Funerals project, this paper considers how limits in viewing bodies were set by Funeral directors during the pandemic and the implications for bereaved people and funeral practice.
Funeral Directors and Government guidance

- Government Guidance allowed viewing the body with restrictions - use of PPE (DMAG 2020, Scottish Government 2020, Wales 2020, Department of Health – Northern Ireland 2020)

- Funeral Directors’ limitations for viewing the body affected all funerals “regardless of the cause of death” (Scottish Government, 2020)

- The use of body bags was not required by Government Guidance.

Viewing the body was recognised by Government guidance as an important ritual for many people and diverse religious traditions and “an important part of the grieving process for many who may not have been able to visit the deceased before they died.” Therefore, it allowed viewing the body with restrictions to “those who are wearing Personal Protective Equipment (PPE), under the supervision of someone who is trained in the appropriate use of PPE”. Guidance recommended that “all viewings should be undertaken at a funeral director premises.” This empowered Funeral Directors of role of “overseeing and keeping under control” funeral practice (Scottish Government, 2020a).

Although the limitations put in place for viewing the body by FDs, were mainly directed to families dealing with a covid death, they ended up (in the real practice) affecting all funerals “regardless of the cause of death” in order to reduce the risk of transmission of COVID-19.

A particular mention is worth about the use of body bags for the implication of this practice on well-established rituals of post death. Government guidance in this regard, clarifies from the beginning of the pandemic that “there is no requirement for a body bag” also “where the deceased was known or suspected to have been infected with coronavirus”. 
Illustrative examples from the Care in Funerals project – FDs’ websites

“(…) you can continue to visit loved ones in our care. We do ask that only immediate family or close friends do this and that there is a maximum of 2 visitors to the funeral home at any one time” (FD15 - 25 march 2020)

“Can I safely spend time with someone who has died of Covid-19? There isn’t a straightforward ‘yes’ or ‘no’ answer to this question. You will need to use personal protective equipment (PPE) and keep a safe distance. (…)” (FD13 - 19 July 2021).

“Viewings and embalming never ceased as we protected the fundamental right of families to say goodbye to their loved ones” (FD08 - July 2020).

Some quotes from a few FD’s websites can give a sense of how FDs communicated about limitations in viewing the body.

As the above quotes from different FDs (large, medium and independent companies) show, FDs used to refer to institutional information provided by the Government and open a space of dialogue with families and bereaved people who might feel viewing the body important. As one of the quotes highlights, “there isn’t a straightforward ‘yes’ or ‘no’ answer” to viewing the body and particular measures needed to be taken for reducing the risk of transmission.
Viewing the body and its related ritual practices like washing and dressing, became one of the most important topics of discussion and distress during the pandemic between FDs and bereaved people. This has been particularly evident where post-death practices are more institutionalised within specific religious and belief traditions.

These following examples from Sikh and Hindu interviewees are meaningful in this regard.
Conclusions

- Government Guidance allowed viewing the body of the deceased with restrictions (use of PPE) and empowered Funeral Directors with role of “overseeing and keeping under control”

- Funeral Directors posed limitations and opened a space of dialogue with bereaved people about viewing the body and more generally in the territory of post-death practices.

- Sometimes viewing and specific death rituals had to be refused by Funeral Directors. This impacted in particular on religious traditions and cultures in which viewing (and other post death rituals) is a fundamental and institutionalised practice in post death care.

My presentation highlighted how practices of viewing the body are more and less institutionalised in different cultures (e.g. Sikhs and Hindus), and how funeral directors as institutions have influenced whether, how and by whom these practices can be enacted.

Government Guidance allowed viewing the body of the deceased with restrictions (use of PPE) and empowered FDs with role of “overseeing and keeping under control”: viewings would be subject to their agreement and discretion following their own risk assessment.

Therefore FDs had to pose limitations according to that guidance and for safety of their staff and people. Our interviews with some of them and with bereaved people, and our analysis of funeral directors’ websites, show variation and shifting in their reasoning and approach with some considering viewing the body as a fundamental human right.

FDs tried to open a space of dialogue with bereaved people in the territory of post-death practices where the need of viewing the body is felt differently important depending on the culture and believes of the mourners and the deceased. In this struggle FDs sometimes found themselves in the critical position to refuse viewing and to accomplish specific death rituals as they were used to do before the pandemic. This impacted in particular on religious traditions and cultures in which viewing (and other post death rituals) is a fundamental and institutionalised practice in post death care.
We’ve focussed our thoughts about hybridization on crematoria today, partly because early in the pandemic they were the only indoor spaces where UK funerals were permitted, but also because some 75% of UK deaths lead to cremation – these are spaces where hybridization will likely continue to be popular.

But our observations about preference, and about the availability and quality of provision can be extended to other institutions and spaces.

Whether a hybrid funeral is indoors or outdoors, it’s important to consider the experience of those who are not there physically, or may wish to re-visit a funeral at which they were also physically present.

It is hard to know quite how the ground will settle around hybrid funerals – they boomed during the pandemic, but their popularity beyond the acute necessity of the emergency context remains to be seen. But we expect them to have greater significance beyond COVID-19 than they did before it, and therefore encourage providers to think about hybridization not only in terms of preference, but also in terms of practicality.
Funeral Hybridization

**Hybrid funerals:** Streaming, videoing and recording funeral services in order to share these with people not physically present at someone’s funeral, typically in addition to hosting a small (and, in this case, restriction-compliant) gathering.

Widespread and significant in the UK – and in our interviews

PREFERENCE - Met with varied views and assessments

PROVISION - Availability, quality and feasibility varied significantly

Streaming, videoing and recording to digitally ‘hybridize’ funerals, typically in addition to a small, restriction-compliant physical gathering, represented widespread and significant responses to the Coronavirus pandemic in UK funerals, and were important topic across most of the 67 interviews conducted for the Care in Funerals project.

That is not to say everyone had positive views, or that everyone had wanted or been able to hybridize a funeral. People’s evaluations differed along with significant variation in how feasible it was. This was particularly pronounced at the beginning of the pandemic, but disparities persisted throughout.
What makes a good hybrid funeral?

• What is – and isn’t – included in a live or edited recording
• Access and privacy
• Quality of audio and video
• Thinking about both audiences
• Professional videographers versus mourners

Where hybridization was both possible and preferred – what made for a good hybrid funeral? Well – several things, many of which participants took different views on. Our interviewees described a variety of approaches – and preferences - to what was included and what wasn’t: should a film only capture what happened in the crematorium, or include corteges, musicians outside, people gathering along the route, or the slides and photos? Could those joining from home see the mourners gathered in the crematorium, or only the celebrant and coffin?

Similarly, while some were clear that livestreams should be strictly private, so only those given access could view it live or later, others felt hybrid funerals ought to be public, much as a funeral might have been before the pandemic.

Participants had things to say about quality: while poor quality audio or video could detract from the experience of engaging with a funeral online, executed well they could enhance it. Did the filmer use one, static camera, or multiple angles and perspectives? How old was the camera, and how reliable was the Wi-Fi? Did the audio allow people to hear words clearly, or were eulogies muffled and accompanied by background noise? All of these practical considerations arose in interviews.

Many UK crematoria use one of two audio-visual providers, whose hardware and formats may meet some needs, but not all.

Additionally, crematoria took different views on who ‘counted’ towards the number permitted to be physically present – which some crematoria also chose to keep lower than government
guidance required, out of concerns about safe capacity, social distancing, and safeguarding time for rigorous cleaning. If a videographer ‘counted,’ this meant organisers already making onerous decisions about funeral guest-lists also had to work out whether and how to set up a live-stream or a recording. Some mourners chose particular venues based on their particular limits, and whether or not a videographer would ‘count’ towards them; others explored having a member of the congregation film or stream the service, which some felt detracted from those mourners’ ability to participate.
Website and Blog

Our project website is at https://www.abdn.ac.uk/sdhp/philosophy/care-in-funerals-2015.php

It contains a link to our project blog, where we have written about some of these issues – and others!

https://www.abdn.ac.uk/hsru/blog/category/care-in-funerals/