Care in Funerals: project summary

What we did

The Care in Funerals project studied how death rites and ceremonies were disrupted and adapted in the first years of the COVID-19 pandemic. We listened to people’s experiences through this difficult time in order to learn more about what matters in funeral provision.

We interviewed (a) people who had been bereaved, (b) funeral directors and people who provide burials or cremations, and (c) religious and non-religious funeral officiants. We asked about their experiences of funerals in the pandemic and about the idea of funerals as ways in which people show care for the dead and bereaved.

We included people of different genders, ages (18 to 75+ years) and religious and ethnic backgrounds, from England, Northern Ireland, Scotland and Wales. In total, 68 people spoke to us in depth about funerals held between March 2020 and March 2022. We also gathered information from news reports, official guidance, and funeral directors’ websites.

What we learned

Diverse forms of disruption and distress

Disruption to funeral provision was particularly severe in the early stages of the COVID-19 pandemic. New laws and regulations were introduced and changed as people grappled with uncertainty about how the virus was transmitted and with varying risk levels. These laws and regulations, together with funeral service providers’ own decisions, variously restricted:

- activities involving contact with or closeness to the bodies of people who died (for example washing, embalming, shrouding or dressing, and visiting people in coffins);
- how far people could travel and how many people could gather (including to visit the dead or bereaved, for burials or cremations, and for prayers, memorial services and wakes); and
- what people could do in gatherings (for example requirements to keep physical distances between people, to not sing and to not touch coffins or pass on objects)

The timing and length of burials and cremation services were also affected when high death rates strained the capacity of local funeral systems, and when funeral professionals or key mourners were sick or needed to self-isolate because of COVID-19.

All this meant that people often could not do what they usually expected to do when someone died. Of course, what people considered 'usual' varied. It depended on their religion, cultural background, and family traditions among other things. Different people were impacted in different ways as various death rituals with different meanings were affected and adapted. For example:

- Many people were upset when those who died were left in body bags or otherwise not washed, dressed or treated with the expected forms of care or respect.
- Religious communities, including Jewish, Muslim and Hindu communities, were at first unable to complete important religious rituals of washing and shrouding people who died. People who usually led these rituals often worked quickly to develop COVID-safe processes consistent with their beliefs.
- Families and communities who usually pay respects to a person who died in an open coffin, and who spend time mourning privately or socially in their presence, were...
often unable to do so. The Irish custom of holding wakes in a family home was, one of the traditions affected.

- Delayed access to crematoria and restrictions that prevented the dispersal of ashes in flowing water disrupted the timing of several important Hindu rituals linked to beliefs about how and when people’s souls move on from their bodies.
- People were often unable to support those who had been bereaved, whether by participating in customary practices such as sitting Shiva (in Jewish traditions), celebrating Nine Nights (in African-Caribbean traditions) or through less formal neighbourly visiting.
- Funeral professionals felt constrained in the support they could offer bereaved families.
- Scottish family members were sometimes precluded from ‘taking a cord’ to lower a coffin. Some funeral directors made this possible by cutting the cords and having people take their part away or put it in the grave.
- Some African-Caribbean mourners were prevented from taking part in the backfilling of graves. Some then made this possible by taking their own spades to gravesides.
- Many families and communities were unable to gather in the numbers they usually would for their funerary ceremonies. Adaptations to broaden participation included:
  - planning hearse’s routes to allow more mourners to come out and show their respect as a coffin passed by; and
  - livestreaming and recording funeral services so people could participate in or witness the funeral online (although people who lacked the required technology or skills to use it still missed out).

Although the activities affected were diverse, project participants from different backgrounds had a lot in common in terms of how they experienced the disruption. Most people accepted that some precautions were necessary for community protection, and some who had been bereaved by COVID-19 urged more caution because they did not want a funeral gathering to contribute to another death. Some people considered the funerals they achieved “good in the circumstances” and a few saw silver linings - for example, if families welcomed a smaller, more intimate funeral gathering. Overall, however, the disruption had significant adverse impacts. Some funeral professionals, as well as people who were bereaved, were deeply distressed by their experiences.

Reasons for distress

The depth of distress is understandable because death is a significant event in each person’s life and represents an important loss in relationships and communities. Taking part in ritual activities when someone dies is often regarded as a matter of significant responsibility, as well as being important for emotional wellbeing. If people cannot ensure or contribute to a ‘good' funeral for those they take responsibility for (whether in family, community or professional roles), they can feel a sense of disappointment and moral distress. This distress is not fully relieved by knowing that circumstances were beyond their control.

The ways in which people felt they had let others down or been let down by not being able to organise and take part in funerals ‘as usual’ are summarised in general terms in the Table on the next page.
<table>
<thead>
<tr>
<th>Disappointments caused by funeral disruption</th>
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<tr>
<td>We did our best in the circumstances, but:</td>
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<tr>
<td>• We couldn’t give the people who died the funeral they should have had.</td>
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<tr>
<td>• We couldn’t support the people who were bereaved at their time of loss.</td>
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<tr>
<td>• Our families and communities missed out on occasions to be together and strengthen social bonds.</td>
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The people who took part in this study agreed that funerals are important practices of care for the dead and the bereaved, although they exemplified this in diverse ways. Our research confirms that a variety of death rites serve a range of important purposes in:

- the care of people who have died (including their bodies, souls, reputations and relationships);
- the care of people who have been bereaved (including the needs of the bereaved to participate in funeral rites to show care for those who have died); and
- care within the broader community and the fostering of social relationships.

**Ongoing challenges for good funeral provision**

Our study has also highlighted that ensuring good funerals for all can be practically, ethically and politically demanding. Among mourners, differences of opinion about what matters (most) for a particular funeral are not always easy to resolve well, and tensions can be harder to deal with at a time of grief. The costs of funerals remain a significant challenge for many, and service provision varies around the country and between providers.

Minoritized groups bore disproportionate burdens during the COVID-19 pandemic not just because of higher death rates among people who were racialised and/or socioeconomically disadvantaged, but because some important religious requirements and cultural traditions were not well understood when policy and service priorities were set. A background of social discrimination also made some minoritized people wary or even fearful of reprisals for any perceived non-conformity. Project participants anticipated that discriminatory practices and other problems affecting funeral provision would continue beyond the pandemic.

**Conclusion and recommendations**

Significant harm was done and distress caused when people were thwarted from fulfilling the various caring purposes of funerals during the COVID-19 pandemic. There is a strong case for prioritising the safe accommodation of diverse funeral needs in future emergency planning, and for attention to the quality of funeral provision more routinely.

**Care in Funerals Casebook**

We will be publishing the Care in Funerals Casebook to help ensure that this project informs professional development and broader conversations about the practical ethical aspects of funeral provision. This free-to-access online resource contains 12 case stories with accompanying questions and commentaries to support reflection and discussion. The Casebook will be available from January 2023.

Other publications arising from this project will also be made available via our project website at [www.abdn.ac.uk/sdhp/philosophy/care-in-funerals-2015.php](http://www.abdn.ac.uk/sdhp/philosophy/care-in-funerals-2015.php).