Do Funeral Directors really care?

The changing capacity of a community to care for its bereaved and dying through increased use of professional services - a phenomenological study.

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Introduction

How people deal with death, dying, grief and loss come from a long line of rituals, rites and traditions. Rituals at the end of life and following death bring comfort critical to both the grieving and healing process. Rituals once included the immediate community in a very personal manner e.g. washing and tending to the body, a final show of love and respect. Many traditions focus on the care of the soul both for the living and the dead. Rituals are now entrusted to paid professionals e.g. Funeral Directors.

Aims

Investigate the capacity of professional services to care for the practical and social requirements of their communities just before and following a death. Identify and assess the impact of stress and anxiety of their profession to the delivery of their services.

Methodology

Using mixed methods research both of qualitative and quantitative data collection this phenomenological research concentrates on the meaning of professional service individuals to their lived experiences, with a focus on uncovering prevailing themes, finding meaning in experience and exposing social worlds.

(Ritzes 2011, Rynner & Swanson, 2007; Connell, 2003; Van Manen, 1992)

1800’s – 1860’s

Pre 1860’s
- Majority of people buried in mass graves
- 1829 Catholic Emancipation
- 1845-52 Irish Famine –(1,000,000 die)
- 1841 Paupers Graves
- 1860’s on
- Rise of the middle classes

Wakes in Home remain commonplace (along with their rituals)
- Coffins for sale in major department stores
- 1860’s Undertaking to manage funerals becomes a ‘profession’

1860’s – 1900’s

1904
- First Motor Car (Lmk) Registered
- 1914-1918 World War I (30,000 die)
- 1930’s Use of horses with hearse begins to decline (along with their rituals)
- 1919-21 Irish war of independence (2,000 die)

1900’s – 1940’s

1890’s
- World War I (50,000 die)
- 1960’s Deceased stop wearing shrouds, swapped for ‘Sunday Best’
- 1960
- Black Mourning Clothes (Diamonds) begin to fade out
- 1960-70 Lace Mantillas worn on women’s heads
- 1978
- Pirate radio starts to announce deaths (huge success)

1940’s 1980’s

1980
- Crépes on doors are no longer commonplace (burglary)
- Embalming is commonplace, along with makeup and hairstyling
- Rise of the ‘after’ in Hotels and a three course meal

1980’s

1980’s
- First Drink Driving Laws
- Rise of the 'afters' in Hotels
- 1990-2005 Rise of the Celtic Tiger
- 2006
- First Drink Driving Laws introduced
- Rise of the internet

1980’s - 2010

1980’s
- Helium Balloons used (mainly for children’s deaths)
- Pre Birth Deaths
- Death by Social Media widely discussed
- 2008 World Wide Recession
- 2010 & beyond

Discussions

The KEY elements of funeral direction has not changed in centuries

Simply put these are the “PREPARATION” “TRANSPORTATION” & “DISPOSAL” of the body.

Funeral Directors feel neither part of the family or part of the governmental services; and remain outsiders, until invited in. However, there is a longing to be incorporated into or become a natural part of the wider services provided to the terminally ill.

“We mind them” we make sure they have some place to be’ juxtaposed against practicalities of their job ‘paid journey men” we bury people, fix a time, people attend...that's it really, that's it.”

Traditions are CENTRED on meeting social and practical needs of the bereaved and the dying. Traditions are evolving and dying collectively. With each generation the traditions that are deemed no longer useful or relevant to that generation are disappearing. Very aware of this the funeral directors pay heed to important traditions and stay abreast with the new ones (such as RIP.ie, helium balloons)

“If you don’t change you get left behind”

There’s a DICHOTOMY between being a professional business and a caring profession, which brings stress, worry and anxiety.

Anxiety for funeral directors much like many professions is centred around having little time to perform many tasks, worry if there are mistakes, worry about asking for money. However, the significance of a funeral to the bereaved and the compassion the situation demands conflicts with a business acumen.

“You bring up finance with the families they look at you like you have stuck a knife in their heart.”

“Last thing people want to talk about is money.”

“You only have one chance to do it right”

Death is DIFFICULT for everyone including Funeral Directors. Even though they put in a lot of effort to remain professional their job is still challenging. Some deaths are just very difficult to come to terms with.

“We see things…..(sigh) its not easy, we don’t relish some parts.”

“There are times when it’s very very sad, you have to cut yourself out”

Discussion

- Being COMPASSIONATE is a significant part of the job. Funeral directors are acutely aware of the distress their customers face. Again this causes them anxiety to ensure their customers are looked after.
- A need is felt to reduce clients worry, provide guidance and serve their community twenty four hours a day all year round.
- “The worst part is the ‘24/7’. Christmas day is the only day we take off unless someone dies at home and we will go and collect them”
- “I don’t take peoples sorrow because then I am unable to help, if I am unable to help I cannot do my job....”

Conclusions

Funeral directors have the capacity to carry out their jobs within their communities with compassion. Stress associated with the profession may be impacting on the ability to provide an appropriate and professional level of compassion.

As part of a compassionate community, professional services may benefit from access to support networks.

Some of the communities needs identified by the study centre about the understanding of the finances associated with funerals prior to their immediate or imminent requirement.

Funeral directors possess a wealth of knowledge concerning bereavement, which should be exploited in the development of support services.

Funeral directors as ‘outsiders’ involved in a very intimate final act on behalf of a loved one have a very real sense of isolation in their profession relative to the penultimate services (such as palliative care). This poses the possibility to create a more inclusive role for the profession alongside associated healthcare service.

(2,000 die)

Pre Birth Deaths
- 1919-21

Hearse begins to decline
- 1919-21

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