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An Essential Service: Experiences of Australian Deathcare Workers during COVID-19

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with the DeathTech Research Team

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DeathTech Research Team

The DeathTech Research Team (<https://deathtech.research.unimelb.edu.au>) is a group of anthropologists, social scientists, and human-computer interaction specialists based at the University of Melbourne and Oxford University. The team have been studying questions at the intersection of death, technology, and society for more than a decade. The team members are Michael Arnold, Tamara Kohn, Martin Gibbs, Elizabeth Hallam, Bjørn Nansen, Fraser Allison, Hannah Gould, and Samuel Holleran.

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Abbreviations

AFDA	Australian Funeral Directors Association
DHHS	Department of Health and Human Services, Victoria (now DH)
GMCT	Greater Metropolitan Cemeteries Trust, Victoria
NFDA	National Funeral Directors Association
PPE	Personal Protective Equipment
SMCT	Southern Metropolitan Cemeteries Trust, Victoria



Jessica Silovic, Funeral Advice Line Consultant
Tobin Brothers Funerals

Executive Summary

Deathcare is an essential service. It upholds the dignity of the dying and deceased, addresses the emotional, cultural, and spiritual needs of the bereaved and the community, and protects public health. It provides necessary support associated with the processes preceding and following a death, including the disposal of remains, ceremonial farewells, and commemorative activities. Deathcare supports the dying, dead, and bereaved. Its workers include palliative care staff, funeral directors, cemetery and crematoria workers, celebrants, and bereavement counsellors.

Failure to recognise deathcare as essential during the COVID-19 crisis has impeded the sector's ability to deliver high-quality care and to support the welfare of its workers.

This report presents the results of a scoping investigation into the experiences of Australian deathcare workers during COVID-19, for the period between June 2020 and June 2021. It is based on qualitative data collected via a survey of Australian deathcare providers and semi-structured interviews with workers representing different segments of the sector. It focuses on the professional and personal impacts of COVID-19.

Because deathcare has not been officially recognised as an **essential service**, most workers have been unable to access priority testing and vaccinations, faced an insecure supply of personal protective equipment (PPE), and continue to experience poor lines of communication with government in pandemic response planning.

While contact with the living at funerals poses the greatest risk of transmission to deathcare workers, additional infectious control guidelines were implemented by morticians around **interactions with deceased persons**. These guidelines, including protocols for PPE use and family viewings, vary significantly between facilities. Deathcare workers must balance a desire to care for the dead and the bereaved with considerations of their personal safety.

Funerals have been deeply affected by moderate to severe limits on attendance, with deathcare workers having to perform the emotionally and logistically challenging work of enforcing restrictions and leading families through radically transformed services.

Culturally and linguistically diverse (CALD) communities throughout Australia and the deathcare providers that serve them face specific challenges during COVID-19. Many restrictions related to deathcare still assume a white, secular, or Protestant model of what funerals and memorialisation looks like.

New ritual practices have emerged in response to restrictions, including the widespread adoption of live streaming and recording of funerals. Live streaming, digital recording and the **digitisation** of documentation has provided remote and thus safe access, although it has significant drawbacks.

Cemetery visitation has also been curtailed dramatically under COVID-19, in some cases restricted to only those immediately attending a funeral or committal. Not only have cemetery authorities had to interpret and enforce these rules, but they have also been asked to plan for the potential possibility of mass death scenarios.

Both the lived reality of caring for the dead and bereaved during COVID-19, and the imagined possibility that the situation could deteriorate significantly, impact deathcare workers' **wellbeing**. The long-term impacts of extended work hours, increased risk of transmission, and the emotional toll of care in the face of death are still to emerge.

This report calls for official recognition of deathcare as an essential service, and for public acknowledgement of work performed by deathcare workers, often at great personal cost, during the pandemic. It also advocates for improvements to governance and communication structures within and beyond the sector, so as to better prepare the sector to face future major events. These changes will enable Australia to better support those who care for others during the most difficult times of their lives.



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COVID-19 & Australian Deathcare

The novel coronavirus SARS-CoV-2, henceforth 'COVID-19', was first detected in Australia on 25th January 2020, in Victoria. Concentrated around a series of cluster outbreaks and then waves, COVID-19 spread across Australia over the course of 2020 and 2021. International borders were closed to non-residents from 20th March 2020, and differing levels of social distancing restrictions and lockdowns have been put into place by state and territory governments in response to outbreaks. At the time of publication (1st September 2021), 1006 deaths have been attributed to COVID-19 in Australia, with the majority of these occurring in Victoria (820) and New South Wales (150).

Not only has COVID-19 severely affected people's lives and livelihoods over the past two years, it has also transformed Australians' experiences of dying, death, grief, and memorialisation. Alongside the impact of deaths from COVID-19, many of the regular operations of the deathcare sector were upended by the pandemic and its associated restrictions.

The Australian deathcare sector is complex and fragmented, and many existing structural challenges have played a role in shaping the effects of COVID-19. Writ large, the sector encompasses multiple distinct segments, performing functions including the transportation of bodies, disposal of human remains, hospitality and event planning, cemetery management, horticulture, and pastoral care, among others. There is no professional body that represents all of the major players in any one segment of this sector or across the sector. There is also no single regulatory authority or legislative framework at the federal or state level that oversees the entire sector. Governance structures vary between states and territories. For example, in Victoria, cemeteries and crematoria are run exclusively by public trusts, whereas in New South Wales, cemeteries are managed by a mixture of public, private, religious, and local government bodies. Lines of communication and reporting between different industry bodies and regulators can be opaque.

The deathcare sector is also characterised by significant major players and vertical integration. The two major commercial funeral operators, InvoCare and Propel Funeral Partners, together with Victorian-based Tobin Brothers, account for approximately one-third of industry revenue, and market concentration is projected to increase (IBIS 2020, p. 21).

In recent years, scholars have drawn attention to the poor regulation of the Australian deathcare sector (Van Der Lann & Moerman, 2017). This regulatory environment gives rise to a lack of transparency, predatory pricing, anti-competitive behaviour, and other practices currently under investigation by the Australian Competition and Consumer Commission.

To date, Australia has avoided many of the more dramatic impacts on deathcare experienced around the world in response to COVID-19. These include mass burials, as seen in Brazil in April 2020 (Phillips & Maisonnave, 2020), funerals banned altogether, as seen in northern Italy through March and April 2020 (Goia, 2020), and crematoria functioning at over-capacity, as seen in the USA in January 2021 (Wong, 2021) and in India in May 2021 (Hopper, 2021). However, COVID-19 presents extreme challenges for the sector across a number of distinct domains.

Scope

This report presents the results of a scoping investigation into the experiences of those working in the Australian deathcare sector during COVID-19 between June 2020 and June 2021. While clinicians and other staff working in healthcare and aged care institutions have been severely impacted, the focus of this investigation is perimortem and post-mortem care. Our analysis specifically develops a qualitative understanding of the personal and professional impacts of the pandemic in an effort to supplement quantitative industry reporting and analysis of the pandemic's financial effect on deathcare, which is expected to be substantial.

The impact of COVID-19 has been unevenly felt across Australian states and territories. During our scoping period, the state of Victoria experienced the highest rate of confirmed infections, the highest number of deaths from COVID-19, and the longest and strictest public health measures. This meant that Victoria's deathcare sector has faced unique challenges, and as such, this is where we focus the majority of our analysis.

At the time of publication, New South Wales is facing an extended COVID-19 crisis brought about by the spread of the highly infectious Delta strain. This spread of this strain has resulted in reoccurring lockdowns across the east coast of Australia. Although to date, the New South Wales outbreak has not resulted in the number of deaths witnessed in Victoria in 2020, many of the impacts are shared, and future impacts are uncertain. As an immediate review in an evolving landscape of COVID-19, we anticipate that our understanding and conclusions will require amendment via further investigation.

Methods

The data discussed in this report was collected through three methods:

- An anonymous survey of workers in the Australian deathcare sector;
- Interviews with key figures in the Australian deathcare sector;
- Analysis of academic literature, media reporting, and public materials;

In addition, researchers were able to undertake limited in-person fieldwork at funerals held under Stage 3 restrictions in Victoria in mid-2020. The research is limited by constraints on access, which place internal reporting and financial information of private companies operating within the sector out of reach.

The survey, entitled *Deathcare during COVID-19*, was launched on 1st September 2020 and circulated via the DeathTech mailing list, the AFDA mailing list, LinkedIn, and other social media. Analysis in this report is based on 78 valid responses (n= 78) from deathcare workers, up to and inclusive of January 2021. The survey contains 31 substantive questions on services, technology, communications, funerals, and wellbeing.

Interviews were conducted via teleconference or in-person with key actors in the deathcare sector between June 2020 and June 2021. The interviews lasted approximately 1-2 hours, were semi-structured in nature, and focused on how individuals and organisations responded to the challenges of COVID-19. Interview subjects were purposefully selected for diversity of perspectives in the sector, self-identification in the survey response, and via the snowballing method of introductions. Several of the subjects have elected to remain anonymous. A total of 30 interviews were conducted. Interviews were recorded and transcribed, and the transcripts were coded via qualitative analysis.

Those interviewed for this project include:

- Mariam Ardati, Independent Funeral Director, NSW
- Adrian Barrett, Senior Vice-President of the Australian Funeral Directors Association
- Dean Edney, Customer Experience & Sales Manager, SMCT
- Fr Michael Elligate, St Carthage's Parish
- Deb Ganderton, CEO, Greater Metropolitan Cemeteries Trust, Victoria
- Kimba Griffith, Funeral Director, Last Hurrah Funerals
- Fred Grossman, CEO, Melbourne Chevra Kadisha
- Stephanie Longmuir, Independent Funeral Celebrant, Melbourne
- David Lutterman, COE OneRoom Funeral Streaming Services
- James MacLeod, Managing Director, Tobin Brothers Funerals
- Cam Moray-Smith, General Manager Commercial, Greater Metropolitan Cemeteries Trust
- Sr Ven Thich Nguyễn Tạng, Abbot, Quang Duc Temple
- Robert Pitt, CEO, Adelaide Cemeteries Authority
- Palliative Care Specialist, Victoria
- Cemetery Ground Staff A, Victoria
- Independent Funeral Director A, Melbourne
- Independent Funeral Director B, Melbourne
- Independent Funeral Director C, Melbourne
- Independent Funeral Director D, Regional Victoria
- Independent Funeral Director E, Queensland
- Crematoria Operator A, Victoria
- Crematoria Operator B, Victoria
- Embalmer A, Victoria
- Embalmer B, Victoria
- Body Transfer Staff A, Victoria
- Body Transfer Staff B, Victoria

Deathcare: An Essential Service

Deathcare is an essential service, one that upholds the dignity of the dying and the deceased, addresses the emotional, cultural, and spiritual needs of the bereaved and their community, and protects public health. However, the ongoing lack of recognition for deathcare as essential during the COVID-19 crisis, both within public health directives, and more broadly, by the media, non-governmental and commercial bodies, and the wider community, has impeded the sector's ability to delivery high-quality care and to protect the welfare of its workers.

During COVID-19 lockdowns in Australia, the term "essential worker" came to designate those whose labour was considered necessary to the continued functioning of society and the economy, and which could not be performed remotely. However, there remains significant ambiguity in exactly who is designated as essential, by what credentials, and how this designation is recognised in the public sector and across different levels of government. As the Law Council of Australia and Australian Medical Association note, "[t]he term 'essential services' is not defined in Commonwealth legislation and is not consistently defined at the state and territory level" (2020).

Although some functions of the deathcare sector can be performed remotely, many cannot, and staff at cemeteries, crematoria, and funeral companies have continued working on-site throughout 2020 and 2021. Not only do deathcare workers face new challenges in the handling of COVID-19 deaths, but - as many of our participants noted - the regular, time-sensitive work of caring for families, burying or cremating the dead, and maintaining cemeteries has not abated during the pandemic.

The failure to recognise deathcare as essential has wide-reaching impacts. Although funeral companies generally reported ease in securing permits to attend work in-person and travel across state or territory borders (including for the inter-state transport of human remains), other provisions awarded to essential workers were less equally applied to the sector. In both surveys and interviews, deathcare workers expressed frustration at being only partially, or insufficiently, recognised as “essential”. Many participants noted that this sidelining began with the industry not being awarded a ‘seat at the table’ in government pandemic response planning, or being treated as an “afterthought” (Independent Funeral Director A). For many, these issues spoke to a broader concern about the identity and regulation of the sector. As Independent Funeral Director B noted, “if the government has no idea who or how many funeral directors there are, how can it possibly provide us with PPE?”

Often, limited recognition and access were only awarded after active representations by industry groups. Adrian Barrett, Vice President of the Australian Funeral Directors Association (AFDA) reported that:

A lot of the time we spent with the AFDA was around lobbying state governments, federal governments, to have assurance that we could move across borders and regions and things like that, with deceased people, that we had access to PPE, that we could have priority testing for our staff and everything.

The AFDA has argued for deathcare workers to be treated the same as healthcare workers, a popular sentiment across the industry. However, Barrett reflected that “we never had a great deal of success with it”. Industry leaders and other representative bodies have reported limited success in their efforts to lobby state and federal health departments, or make direct appeals to political leaders.

Communications

The deathcare sector was not officially briefed on public health directives and lockdown restrictions before their public announcement. Upon announcement, funeral companies and cemeteries reported being immediately flooded with panicked calls from bereaved families regarding the impact of restrictions on upcoming services.

Particularly in the early stages of the pandemic, deathcare workers struggled to gain clarity about restrictions. Recognising their role as public advisors on all things related to death, workers were eager not to spread misinformation, particularly if that misinformation caused further distress to families and damaged their professional reputation.

Across the board, deathcare workers have reported poor communication between public health departments and cemetery and crematoria authorities regarding the impact of restrictions. For example, one cemetery staffer recalled being placed on hold for three hours, then passed between multiple departments, in order to clarify whether restrictions related to indoor 'funerals' extended to outdoor graveside committal services.

Information dissemination did improve over time. The same cemetery staffer noted that while "it was a lot more chaotic ... trying to keep up with the rules and implement them" the first time around, communication in the second lockdown (July to October of 2020) was "more planned and structured. Obviously, the government has learned from the first time... the reaction as well from the families has been different as well."

The compartmentalised nature of the industry further hampered communications. In Victoria, funeral companies received non-industry-specific information from the Australian Business Council, while cemeteries and crematoria could appeal directly to the DHHS. Directives from the Premier's office needed to go through the DHHS before they came to the cemetery trusts. From this point they were further disseminated by trusts, often moving from better-resourced A-class trusts to B- and C-class trusts and finally to funeral directors. Larger organisations were better positioned politically to access clarifications from official sources, and some did take on a role in funneling information to smaller players. Independent funeral companies not associated with the major players reported particular challenges in receiving timely communications. In many cases, deathcare workers were forced to rely on informal channels of sharing information via social media.

Testing & Vaccination

Deathcare workers face increased potential exposure risk in contracting the virus due to the nature of their work, which brings them into contact with large numbers of strangers (during funeral services) and with deceased persons who have a confirmed or suspected COVID-19 infection.

A lack of priority access to testing for COVID-19, particularly during Victoria's second wave of 2020, was of particular concern. Transport and mortuary staff at Tobin Brothers, Victoria, reported that they had to line up at public testing sites in order to access tests, despite being in direct physical contact (albeit with strict PPE protections) with persons who had died from COVID-19. Many chose to self-isolate from friends and family during this period, given the uncertain risks of transmission.

At the time of publication, deathcare workers do not qualify for priority access to COVID-19 vaccinations in Australia. This is despite significant advocacy and direct appeals to government from industry representatives. Deathcare workers frequently attend healthcare and aged care facilities to collect the deceased, but they are unable to access vaccinations, while the staff at these facilities can access them.

Personal Protective Equipment

All participants reported an initial scarcity of Personal Protective Equipment (PPE) during early outbreaks of March and April of 2020. The sector was not assisted in the supply of PPE by federal or state governments, and scrambled to secure an adequate supply of certain products, particularly hand sanitiser, masks, and gowns. One funeral director located in Euroa, Victoria, reported that at first, PPE was obtained via Amazon or eBay. National Funeral Directors Association of Australia President Nigel Davies told the ABC (March 2020) that some staff were reusing plastic gowns, body bags and other PPE items designed to be single use, given the shortages and unsecure supply chain. Others similarly reported difficulties with private PPE suppliers, including insufficient stock, slow delivery times, and price gouging. Although the initial scramble for PPE has significantly eased at the time of writing, insecurities within the supply chain remain. Those within the mortuary sector have also expressed concern that staff have been given insufficient training in the proper use of PPE (see Treatment of the Deceased).

Securing PPE, priority testing, and vaccinations is not only a matter of protecting staff but places our public deathcare infrastructure at risk. Without sufficient numbers of healthy, trained staff, which are not isolated in quarantine, the bare minimum of tasks required to safely and efficiently dispose of the dead cannot be performed.

Waste

The increased use of PPE affected the regular collection of hazardous waste. During the pandemic, public reporting described how at aged care companies across Melbourne, contaminated waste was spilling out of bins and onto public land. This attention followed DHHS advice that care homes with active COVID-19 cases treat all waste as medical waste. Similar, although less well-reported, conditions were experienced by funeral companies and mortuary facilities across the country. Embalmer B described piles of contaminated waste sitting outside the building for over five weeks at the height of the second wave outbreak of COVID-19 in Victoria. They related that:

We have waste piling up in the car park and in the mortuaries. This includes COVID waste. I've had to contact another service provider to assist with waste removal. The smell and the risk to staff and the public is huge, but we are just not considered a priority. As far as future planning goes, we need to consider a pandemic from start to finish - including waste.

Public Recognition

Almost all research participants reported that they felt disheartened, as a result of their work not being recognised as 'essential' by the media, corporations, and broader community. Community outpourings of gratitude and respect to frontline healthcare workers, including the extension of supermarket shopping hours, offers of free food and coffee, and the coordination of public displays of appreciation such as the 'Clap for Frontline Workers' social movement (known as 'Clap for Our Carers' in the UK) were generally not extended to those working within the deathcare sector. Funeral directors, crematoria and mortuary workers, and others who worked through the pandemic were rarely recognised as 'heroes' in the same way that healthcare professionals, or indeed supermarket staff were. Like healthcare workers, deathcare workers also reported instances of having to confront COVID-19 skepticism and denial within the community.

The sidelining of deathcare during COVID-19 compounds the invisibility and stigma traditionally associated with the sector (Thompson, 1991). As we discuss in the section on Wellbeing, this treatment of deathcare, during one of the most challenging times in history for its workers, has potentially negative effects for mental health.



Treatment of the Deceased

Mortuary Capacity

Most private funeral companies manage mortuary facilities where the deceased are stored and prepared for services. In the early part of the outbreak in 2020, state and territory health departments asked the industry to confirm mortuary capacity at their facilities during emergency response planning for the pandemic. News reports that plans were being considered to transform key landmarks, such as the Melbourne Convention and Exhibition Centre (e.g. Towell et al., 2020) into temporary hospitals and mortuaries further highlighted concerns about storage capacity for the deceased.

To date, Australia has not faced a crisis in mortuary capacity as a result of the COVID-19 pandemic on the same scale as some other nations. However, differing patterns of restriction continue to place pressure on deathcare facilities. James MacLeod of Tobin Brothers, Victoria, described how recurring, short lockdowns have challenged industry capacity for mortuary care. During Melbourne's extended second wave in 2020, families generally elected to hold small (10 person) funerals, given the uncertainty as to when lockdown would end. Only a small proportion of the bereaved decided to delay the burial or cremation of the dead by storing remains, either through cold-storage refrigeration or embalming. However, more recently, across a series of short, sharp lockdowns of approximately two weeks each in Victoria in 2021, families have been more likely to elect to delay funeral services and to place bodies in storage. For companies who typically embalm the majority of the cases in their care, this pressure is felt in raised embalmer workloads. The overall embalming rate across Victoria is low, however, and so most funeral companies rely on cold storage. During 'Lockdown 6.0' (from August 2021) in Victoria, mortuaries were in high demand, with at least one major company electing to bring in temporary storage units to secure capacity.

Transport & Mortuary Services

The regular work of deathcare professionals continues throughout the pandemic, with the hosting of viewings for families, mortuary services, the organisation of funerals, and other day-to-day tasks of the trade. These services have to be carried out despite the evolving knowledge of patterns of transmission of COVID-19 to deathcare workers from (living) clients and from the deceased, whose infectious status is not always known.

In the earliest stages of the global pandemic, deathcare workers received conflicting information about how to manage risk as scientific understandings of COVID-19 evolved. Mortuary staff relied both on professional bodies and networks (including the Coroner's Court and the British Institute of Embalmers), and on informal social networks to develop guides for best practice. Protocols for handling bodies evolved with scientific knowledge, requiring flexibility from deathcare workers and careful communications with bereaved families. For example, early advice from some overseas sources suggested that freezing bodies for 24 hours could reduce the possibility of transmission. This practice is in direct conflict with many cultural and religious mortuary traditions, including Judaism, which calls for rapid burial of the dead. However, it was nonetheless adopted as protocol by the Melbourne Chevra Kadisha in the earliest stages of the pandemic, before it was superseded by new advice.

Initial transmission concerns within the industry about contact with the deceased infected with COVID-19 have largely been replaced with concerns about close contact with large groups of mourners at funerals and memorial services (see Funerals). Despite popular perceptions, the funeral is the most significant site of potential transmission of disease to those working in deathcare (Australian Government Department of Health, 2020). As one Victorian celebrant noted: "At first it seems counterintuitive to think that the person putting out the crackers should be wearing PPE of the same quality as those removing bodies".

There have been significant changes in the handling of the deceased within the sector in order to lower the risk of any potential transmission. Experienced mortuary workers in the industry have advocated strongly for the adoption of universal precautions for encounters with all the deceased, regardless of whether their infectious status has been confirmed. Additional precautions for the care of confirmed COVID-19 positive deceased differ between companies.

A key case study is that of Tobin Brothers Funerals, located in Victoria. Their team cared for their first COVID-positive deceased on 23rd March 2020, and cared for the majority of deaths from COVID-19 during Victoria's second wave outbreak, equating to approximately one-third of the total deaths from COVID-19 in Australia in 2020. Drawing on their experiences in the first wave and with advice from the Coroners Court of Victoria, Senior Embalmer Robert Ridi developed step-by-step infectious control guidelines (MacLeod, 2020). Tobin management instigated a specialist workforce who transferred the deceased from the place of death (frequently nursing homes) to the care of specialist embalmers. Working on the team was voluntary, and staff were separated from others in the organisation so as to lower potential risks of transmission. Transfer staff were supplied with additional PPE that far exceeded the expected risks of transmission. This included white disposable coveralls, boots, disposable gloves, and N95 masks. Heat-sealed hermetic BioSeal bags, conventionally used for international repatriations and cases of infectious disease, were used to transport the deceased to the mortuary. The embalming team also developed additional levels of PPE, including white disposable coveralls, multiple layers of gloves, glasses and face shields, and multiple layers of long aprons and gowns. The team also changed their practices, carrying out embalming later into the evening in a separate, aerated room with designated hot/cold decontamination zones surrounding it. They avoided embalming techniques that might induce aspiration (the omission of particles from the lungs). Any personal items or jewellery present on the deceased were thoroughly cleaned before being returned to the next-of-kin.

At the Melbourne Chevra Kadisha, the majority of staff involved in preparing the dead for burial are volunteers. In response to COVID-19, the organisation trained its volunteer workforce in appropriate infection control protocols and supplied them with PPE. The organisation management also made the decision to ask those over 60 years of age, at times the majority of their volunteer population, to refrain from service due to the increased risk of significant disease in older populations.

Additional precautions significantly increased the amount of time that staff spent providing transport and mortuary services. Full arterial embalming for a confirmed COVID-positive case could take twice the amount of time as usual. Worn for many hours a day, PPE is cumbersome and uncomfortable, and embalmers reported limiting the number of toilet breaks and breaks for food during shifts in order to avoid repeating the lengthy processes of donning and doffing PPE (see Wellbeing). These precautions also incur additional costs. One funeral company estimates that the additional cost is approximately \$400-\$500 per transfer. In all reported cases, these costs were taken on by funeral providers and not passed on to families.

Mortuary staff throughout Australia have adopted different COVID-19 and PPE protocols. In interviews, Embalmer B described what they worried was a largely fear-driven, although understandable, “overreaction” by some within the sector. This embalmer drew on their memories of working in Asia during SARS, and the impact that overzealous precautions, such as hazmat suits, could have on bereaved families. Across the board, deathcare workers emphasised the importance of making sure that COVID-19 precautions did not compromise their ultimate goals of respecting the deceased and caring for the bereaved. Embalmer B said:

Personally I don't treat a COVID case any differently. I guess maybe because I came into the industry at the tail end of HIV, I've just seen what that level of discrimination does and that level of ignorance. I think my teachers really instilled into me the need for universal precautions, and the idea is to act in a manner that is safe all of the time and then it won't matter what the person died from. That's how I present myself on a daily basis.

Embalmer B argued for greater training for industry staff in infection control and disease prevention, so as to avoid actions that might stigmatise the deceased, or limit the experience of the bereaved in farewelling their loved one.

Crematoria Operator B expressed their discomfort at how COVID-19 seemingly transformed the relationship between deathcare workers and the deceased:

The thing is I don't like the fact that I'm meant to feel uncomfortable touching an “infectious” coffin. I feel like everyone deserves dignity and sensitivity and respect. And if I have a coffin coming in, and they died of HIV or they had Hepatitis C and there's this nervousness about them, I really dislike that. And I really feel like that's just incredibly.... it's just not necessary.



Viewings & Dressing

Concerns about the transmission of COVID-19 from the deceased has also impacted ritual practices of viewing, washing and dressing the dead, which are common in many cultural traditions around death in Australia.

Several funeral directors and morticians have noted that viewings have become more important and frequent in the context of COVID-19. One explanation for this increase is that with the shut down of visitations to aged care and palliative care facilities, access to elderly and dying loved ones became severely restricted. As many families have been unable to have face-to-face contact with loved ones for the period leading up to their death, the viewing or funeral has taken on new significance as a 'final goodbye' and has offered a chance to come to terms with the death. Live streamed viewings have risen in number. Workers at some funeral companies have reported an increase in requests for mortuary practices that have extend the preservation of the deceased's body, particularly during periods when the communities surrounding those who died from COVID-19 were required to enter quarantine.

Protocols for family interactions with the deceased during COVID-19 have varied widely between facilities. In Victoria, some companies have banned all viewings at their premises, while others have mandated the use of perspex shields placed over the coffin to separate the living and the dead. In some locations, the bereaved have been able to participate in the dressing and washing of the dead, as long as PPE and social distancing regulations have been maintained. The result of this variation is that families have had widely unequal experiences depending on which funeral director, cemetery, or organisation they have employed, and may not have been informed of the full possibilities of viewings and dressings during COVID-19.

There has also been some concern expressed by celebrants, funeral directors and morticians that protocols have been arbitrary, or based on internal politics rather than the latest scientific evidence. One funeral director told us:

I don't believe there was any consultation done with our industry or communities. Grieving people have already been greatly affected by the restrictions on funerals and to have this option taken away is disgusting behaviour. Neither can actually give an explanation of how they came to this determination.

As discussed further in the section on CALD communities, restrictions have a particularly negative impact on communities with traditions of participation in preparing the dead body. Mariam Ardati, an Islamic funeral director working in Sydney, noted that restrictions on the number of people able to perform the washing and dressing have been “excruciating” for families and the wider community. Community members have also been unable to participate in the communal prayer that takes place immediately after the process of washing and dressing: “it’s having that ripple effect on not only the person who’s died, but the immediate family and then the wider community as well.”



Funerals

Arrangement

Social distancing restrictions have transformed the frequency, manner, and nature of how the sector communicates with clients in the lead up to a funeral. Under moderate social distancing restrictions, families are able to attend funeral company premises to make arrangements. The industry convention of making home visits to the bereaved is not permitted under stricter stages of lockdown. Face-to-face meetings for arranging funerals have largely been replaced by teleconferencing services and phone calls (see Digital Innovation).

Several participants noted that the move to online communications transformed the nature of their interactions with customers. Sensitive and compassionate interpersonal communication is a valuable professional skill within the sector, and key to forming trusting relationships with families in order to deliver meaningful funeral services. Digital communication, however, can erase nuance and affect. Cam Moray-Smith of the Greater Metropolitan Cemeteries Trust reported that:

COVID has forced the realisation that the value of social interaction cannot be measured in pure numerical terms. You can work remotely, but it's highly impersonal.

Adrian Barrett, of the Australian Funeral Directors Association, echoes this sentiment:

Traditionally when you'd sit down, it's really like you're meeting people and you build a rapport with people. You learn a lot more from conversations, go on tangents more, and learn about the person's life. But then when it's Zoom or telephone, I've found it's very much the nuts and bolts. Like, here's the form, let's go through the form kind of thing... you don't have that same level of comfort or maybe intimacy in being in a room and looking at photos and going through old picture albums and all that sort of thing.

The process for at-need purchasing of grave plots has also been affected. High-tech solutions that utilise virtual or augmented reality to model the cemetery and sell graves, although emerging in markets overseas, are not yet widely available in Australia.

Dean Edney of the Southern Metropolitan Cemeteries Trust reported a potential spike in the number of people pre-purchasing and pre-planning funerals in response to the events of the pandemic. He also quoted market research to show that more people are web searching for funeral services, although the exact reasons behind this increase, and whether it translates into increased purchases, needs to be investigated.

Attendance

Different stages of lockdown have imposed differing limits on public gatherings, including funerals, wakes, viewings, and other services and are partly contingent on whether they take place inside or outside. These limits ranged from the most restrictive: a complete ban on funerals during South Australia's snap 'circuit breaker' lockdown of November 2020, to limits of 10, 50, 100, or 300+ people during various stages of lockdown in Victoria, NSW, and Queensland. The restrictions both affirm the social and moral importance of funerals, while attempting to protect public safety.

Rules for social gatherings have restricted the number of attendees at a funeral and the density of people per square metre. As such, funerals held in outdoor locations like parks and gardens have been able to host far more guests. However, funeral companies reported that outdoor services were not widely adopted and they created additional logistical issues such as AV equipment and transporting the coffin. Chairs have been removed from chapels at funeral companies and cemeteries across Australia to ensure the spaces complied with COVID-19 guidelines. Smaller facilities, like rooms for witnessing a cremation, presented a challenge to maintaining social distancing.

Density restrictions have had an unequal impact on funeral companies. Independent celebrants or smaller operators without their own premises have found it difficult to rent space for funerals, as many function venues have been closed. As a result, some suggested that the restrictions negatively impact industry competition. One funeral director told us, the situation "restricts smaller funeral companies in what they can offer to their clients... As far as consumer trade goes they will lose business to the bigger conglomerates".

Funeral staff described that the overwhelming majority of their families were understanding of the strict rules imposed on funeral numbers and the importance of these public health measures for limiting the spread of COVID-19, despite the heartbreaking situations that sometimes have resulted. Adrian Barrett of the AFDA relates:

It wasn't common that people would be upset or angry or annoyed with us or anything. Most people are very understanding, if upset, about the situation and they couldn't do what they would want to have done in normal times.

That being said, the unpredictable timing of the announcements and opaque communications from the government (see Communications) have meant that funeral companies have a difficult task in managing expectations, interpreting restrictions, and helping families adapt to rapidly changing circumstances.

Applications for exceptions to strict rules on funeral attendance numbers have had mixed success. On 30th August 2020, the Victorian DHHS announced that infants (children under the age of one) would no longer be counted in the attendance limit for funerals, after a successful appeal to the rule from the family of Jarrod Fox, a young electrician who died in Croydon, leaving three children behind (Pearson, 2020). However, direct applications for exemption were often unsuccessful. Tobin Brother Managing Director James MacLeod related that of the close to 500 applications that his company submitted, not one was accepted, even in clearly compassionate circumstances, such as allowing a carer to attend with a disabled guest, or to allow for the eleven siblings of the deceased to all attend the funeral.

Inevitably, tensions ran high, and there have been several cases of people attempting to break the rules for restrictions on social gatherings, most notably, by arriving unannounced at funerals or cemeteries in large numbers. One funeral director suggested that “restrictions [on attendance size] have been flaunted since day one [with] guards of honor etc”. Many deathcare workers have found themselves in the position of having to enforce the restrictions directly. Several funeral directors remarked that this was a complete reversal from their usual attitude of acquiescence toward clients, seeking to make happen whatever was possible. Barrett of the AFDA described the new-found role of funeral staff as “bouncers”:

Usually you'd just, whatever the family wants, that's what they have and you make it happen, you make it work. Through this whole period, we've had to be bouncers as well. "No, sorry, you can't come in. You've already got your 10 people."

On rare occasions, funeral and cemetery staff were forced to call in the police to enforce restrictions. However, this was seen as a last resort for staff, who have faced a difficult balancing act of expressing empathy for the situation and enforcing the rules.

Attendance limits and their enforcement have placed a significant emotional strain on workers, who have often witnessed, or have been the object of, the distress and anger of families unable to come together in person to farewell a loved one. Numerous funeral workers have described the particular anguish associated with the funerals for young people or parents with young children. As Fr Michael Elligate noted, the emotional contexts for some funerals may already be heightened because restrictions on visitation to hospitals, aged care, and palliative care facilities have meant that some families have not had a chance to farewell the deceased when still alive. He stated: "there are many raw funerals, but all pandemic funerals are raw".

As well as the emotional strain and risks to personal safety, attendance rules also pose threats to company reputations. A CEO of an independent funeral company in Victoria described an "environment of fear" created by both the potential threat of fines for not enforcing the rules, and the potential reputation damage of becoming the site of a coronavirus outbreak. If the strict enforcement of restrictions risked being viewed as heartless, then any lax behaviour risked public backlash and accusations of unfair treatment. Dean Edney of SMCT related that even when somebody was granted a legal exemption to travel internationally or interstate to attend a committal or funeral, the situation had to be managed carefully, to ensure that all boxes had been ticked and it indeed was safe for them to attend. Given the hyper-mediated context of funeral services during COVID-19, the risk of photographs being posted to social media that evidence bad behaviour has been high, and thus funeral companies have had to be especially mindful of their public presentation.



Services

As well as altering attendance capacity, COVID-19 has changed the nature of funerals, with restrictions on traditional ritual elements alongside emerging innovation. The economic impacts of COVID-19 cannot be overlooked. The impact of job insecurity and strains on household income during 2020 (ABS, 2021) were experienced within the industry as a general unwillingness to spend on funeral services. Funeral companies reported a rise in 'no service' or direct cremation (the cheapest option for handling a body), and a significant drop in the elaborateness of funeral services.

Some established ritual elements of funerals have been rendered impossible under COVID-19, such as post-service meals and catering. Fr Michael Elligate of St Carthage's Parish described the emotional impact of banning choral singing. A single vocalist or instrumentalist would be permitted to perform; however congregations have been unable to join in what Fr Elligate describes as the "united experience" of singing and the emotional and spiritual benefits it brings. Other rituals that involve direct contact with the deceased, such as hugging or kissing the body or the coffin, have been similarly impossible in most cases. Fr Elligate added that for certain religious institutions, such as the Catholic Church, who have set protocols for funerals, the disruption and experimentation created by pandemic conditions have been quite a challenge, and indeed, has exacerbated debates about orthodoxy and experimentation occurring long before COVID-19.

The financial impact of COVID-19 on funerals is of substantial concern within the deathcare sector. When interviewed during the height of COVID-19, several funeral companies and celebrants reported an increase in the number of families choosing to delay the funeral service until restrictions would ease, or to some uncertain date in the future, and thus opted simply for unattended 'direct cremation' or burial. This shift is significant, as these basic service packages exclude many of the key services involved in more elaborate funeral services, such as celebrancy, AV support, and catering, where funeral companies have the highest profit margins. After extended periods of lockdown, it appears that funeral companies are not experiencing a carry-over bump in memorial services for those who died during the pandemic. One funeral director in Melbourne suggested that people do not wish to "open the wound twice", even if the first, restricted service was less than ideal.

New kinds of funeral services have also emerged in response to COVID-19. Most notably, we discuss the wide array of digital technologies adopted for live-streaming funerals and their implications in Digital Innovation. Attendance restrictions has also led to many funeral companies offering mobile, multi-stage, or satellite viewings and funeral services. Tobin Brothers has held a number of 'satellite' funeral services, allowing small groups to gather (in a socially distanced manner) to jointly view the funeral online. The Last Hurrah Funeral Company in Melbourne, utilising their 1973 Cadillac Hearse, transported the deceased to multiple locations throughout Melbourne, allowing small groups of people (socially distanced household groups) to be with each other and farewell the deceased, which often involved playing music and placing mementoes or flowers on the coffin. This service is in many ways a reinvigoration of the tradition of funeral cortèges or processions, and has been readopted in a number of locations globally during pandemic lockdowns. For example, it has replaced the tradition of wakes in some parts of Ireland (RTE, 2020).

Attendance restrictions have resulted in more intimate services, and in many cases have changed the relationships between celebrants and congregations, and between the bereaved and their community. Catholic Priest Fr Elligate noted that funerals under COVID-19 restrictions have been more informal and direct, leading to down-to-earth conversations about the deceased and about death, rather than the usually more performative aspects of the celebrancy role. There have been fewer casual acquaintances present at restricted funerals, and several celebrants suggested that this situation has led to less performative displays and more authentic expressions of grief. Fred Grossman of the Melbourne Chevra Kadisha reflected that part of the work of a funeral director at large funerals pre-COVID-19 was to ensure that the bereaved family did not become overwhelmed by the (sometimes hundreds of) mourners lining up to pay their respects. As he stated, "I will basically run quarterback for you... to ensure you are not unnecessarily burdened by your third cousin crying on your shoulder, for instance". This kind of emotional shielding, however, has not been necessary given the small congregation with only close personal relations to the dead present.

Mariam Ardati pointed out that smaller funerals might in fact be welcomed in the case of a 'bad death', or one that goes against social expectations and wishes for dying. She described how funerals after somebody died from suicide, for example, could be a cause of great anxiety for families in the Islamic community, such that an excuse not to hold a large funeral because of COVID-19 is a relief.

Stephanie Longmuir, a celebrant based in Melbourne, told us that many families “decided to turn the situation to their advantage and the outcomes were beautiful.” She reflected:

As a funeral celebrant I have never worked harder for my families but I have never seen families more engaged either.

She gave the example of a 90-year old artist, Val, who died in 2020. Val's mid-century home had been the site of many important family events in the past and thus was the preferred venue for the funeral. Working closely with the DHHS, Longmuir was able to meet the restrictions on gatherings (including masks and gloves for all guests) and hold the funeral in the backyard. She organised a telemeeting via Zoom for family overseas, which allowed the grandson located in New York to perform a song live, and in-person attendees decorated the coffin and offered their own reflections and thoughts. Longmuir relates a later email from Val's granddaughter:

I can't imagine that we would have had as good a send-off if it was non-Corona times. It was intimate and moving and you made the family all feel at ease.

In this manner, some families have found that intimate, smaller services with adapted rituals have met their needs to grieve.

The full implications of these shifts for the future of funeral services is uncertain, although several research participants identified COVID-19 as a turning point in how Australians approach funeral planning. They suggested that the inability to carry out traditional funeral service during COVID-19 has prompted some families to rethink exactly what is necessary or desirable about this format, and to ask more questions and be empowered to do more research about possible new options for a final farewell. This trend exacerbates the demand for greater personalisation in funeral services that the industry has already witnessed. Robert Pitt, of Adelaide Cemeteries, notes that this shift has become particularly noticeable in recent generations:

We are seeing far greater customisation of funerals, partly through technology, partly through the consumer demands of the current generation... I'll avoid the boomer word, but certainly individual funerals with music. You know, it's not 30 minutes with a vibe with me and the Lord's prayer. It's now in one hour 15 with the PowerPoint and you know, ACDC or something.

However, it should be noted that several celebrants that serve religious communities suggested that the enduring format of the funeral service is unlikely to “be shaken” by the disruption of COVID-19. Further, newer creative practices do not appear to diminish the importance of funerals altogether. Quite the contrary, Pitt argues that COVID-19 “made people realize the value of people and relationships and the need to get together and acknowledge these events”. Indeed, some of the most intense public reporting and public outcry in relation to COVID-19 and death in Australia in 2020 concerned tragic circumstances of bereaved family members being unable to travel across borders to attend funerals (Mullins, 2020). This suggests that funeral services and in-person attendance at funerals remain strong moral values shared within Australian society.



Stephanie Longmuir
Celebrant

Cemeteries

Response Planning

In early 2020, with local COVID-19 infections rising and reports of mass death around the world, cemetery authorities had to confront the very real and disturbing possibility of a mass death event in Australia.

Initial images of the pandemic that underscored its seriousness came from Qom, Iran, where a satellite imaging company captured aerial photos of pre-dug trenches (Borger, 2020). This grainy set of photos, taken on 1 March 2020, helped to catalyse previously sluggish preparations in some countries and put cemeteries front-and-centre in the media discourse on pandemic vulnerability and mortality.

In several Australian cities, government leaders asked cemetery directors to inventory their sites, and note the amount of available acreage for pit graves. This sobering task was done, in the words of one cemetery CEO, “with a very small group of people” who determined “how many transport vans they had, where mass burials would occur, and how many could occur in one day.” This group was “fairly insular” because of the sensitivity of the task and because many staff were working from home. Their charge “wasn’t to be alarmist but... to do what needed to be done.” While some cemeteries had existing plans in place for a crisis that would overwhelm the state’s morgue capacity, many of these had not been updated since the outbreak of avian influenza in 2005. This CEO noted that a positive outcome of COVID-19 has been a commitment to review emerging planning annually.

As with many funeral companies, cemeteries separated their workforce into multiple teams that were isolated from one another, to ensure the human resource capacity required to continue burial and cremation during an outbreak. Cemetery trust managers who had already invested in multi-skilling strategies noted that these programs provided the additional security that staff would be able to cover any gaps that might emerge in workforce capacity due to infections among their staff.

Despite limited news reporting on plans to transform public buildings into hospitals and morgues (Towell et al., 2020), the majority of the sector's disaster planning - including any potential plans for burial en masse - has happened behind the scenes. Still, images of trench graves overseas placed a spotlight on long-standing cemetery practices for the disposition of the destitute and the handling of unclaimed bodies. The pandemic also saw an uptick in end-of-life start-ups and funeral planning (Miller, 2020), services that may change the way cemeteries operate in the future.

Visitation

Cemetery authorities have found themselves on the front line of interpreting and then enforcing some of the strictest lockdown restrictions, including those around funeral attendance and grave visitation. As discussed in Communications, sudden changes to restrictions have placed stressors on organisational capacity to respond.

Restrictions on visitation to graves and columbaria at cemeteries have required careful interpretation for the public. People have been permitted to attend cemeteries for funerals and committal services, but not for the purposes of visiting graves or columbaria. This restriction extends to special memorial days or events in the religious calendar, such as All Souls Day or Tomb-sweeping Day (Qingming), when gravesite visitation is expected. According to staff, the impact of these restrictions for the recently or traumatically bereaved is potentially devastating, and greater allowances for 'compassionate attendance' at cemeteries should be considered in lockdown restrictions.

When 5km or 10km travel restrictions have been in place, people living within distance have generally been permitted to visit cemeteries as green space for the purposes of exercise. However, in August 2021, the managers of Rookwood Cemetery in Sydney made the decision to close the cemetery to all but funeral attendees and staff, reportedly in accordance with advice from NSW Police, who, at the time of writing, guard the gates (Barnsley, 2021). As with funeral directors, the cemetery workers that we spoke to expressed extreme discomfort with calling police to enforce restrictions related to funerals, although they admitted it was sometimes necessary.

Australian cemeteries have increasingly recognised their role as providers of public green space during the lockdowns. Green space has become particularly important for those residing in urban areas who have been restricted to a 5km or 10 km radius for exercise. Our research participants reported an uptick in the number of people attending the cemetery for purposes other than grave visitation, such as walking the dog, although overall visitation has been down.

Restrictions on in-person visitation have also curtailed cemeteries' ability to sell graves. One cemetery manager reported that face-to-face appointments were critical because "people want to experience [the cemetery] where they're purchasing." While much of the sales team has shifted to virtual appointments, there have been some elements of the gravesite purchasing process that are best done in person. When restrictions have loosened, cemeteries have reported that they saw a small spike in purchases, perhaps because of purchases delayed during lockdown, or because of increased public awareness of death and an uptick in preplanning.



Barry Dawson
Grave Presentation Team
Fawkner Cemetery



Mariam Ardatti
Funeral Director
Photo by Alisha Gore

CALD Communities

Australia is home to diverse religious and cultural traditions related to death and memorialisation. However, this diversity is often erased within public discourse by the assumed universality of Anglo-Australian traditions. COVID-19 and related restrictions have affected Australia's culturally and linguistically diverse (CALD) communities and the deathcare workers who serve them in specific and significant ways. Future approaches should consider these differences if we are to maintain respectful and dignified treatment of the dead and the bereaved.

Diasporic ties to the countries and communities hit hardest by COVID-19 have been a source of distress to many, particularly when unable to travel overseas to attend funerals or help with the crisis. At the same time, these international networks have also served as sources of knowledge transfer and support, sometimes pre-dating local information networks. Some communities have reported that they have felt better prepared to handle COVID-19 deaths because they have been in contact with funeral companies serving their community in Italy or New York, for example. These networks have also provided an additional avenue to secure PPE supplies.

During the pandemic, regulatory authorities have been criticised publicly for failing to provide or delaying communications about restrictions in community languages. Community-led funeral services do not necessarily have public-facing websites, and in this case, funeral directors have become important conduits for translating and disseminating this information to their communities. As prominent figures within their communities, this role could be better utilised in the future if deathcare workers are given the proper recognition and support.

The assumed universality of Anglo-Australian death traditions can be seen in the use of the word ‘funeral’ in early government communications of restrictions on social gatherings. Exactly what constitutes a funeral in contemporary Australia, in regards to its location, format, scale, and timing, is unclear. Further, whether and how regulations on funerals also extend to ritual events like open-casket viewings, sitting Shiva, vigil prayers, rosary services, and grave sweeping visits is also unclear within federal and state communications.

For example, members of Melbourne’s Vietnamese Buddhist community visit a temple to make offerings and participate in ritual services at regular intervals leading up to 49 days after a death. The Venerable Thich Nguyễn Tang, Abbot of the Quang Duc Temple, described how his community have adapted to COVID-19 conditions, by live streaming the recitation of Buddhist sutras to individual households and sending out ritual supplies such as incense.

In contrast to Australian restrictions, in the UK, Public Health England and the Department of Health & Social Care, in consultation with the Deceased Management Advisory Group[2], released advice that covers all “Religious, belief-based or commemorative events linked to a person’s death”. The Cabinet Office advice details the impact of restrictions on different events, from “funeral prayer as part of a communal act of worship”, to “washing the body at home”, “ash scattering service” and even a “fireworks display”.

The impacts of certain restrictions on different CALD communities also need to be taken into account by regulatory authorities. Mariam Ardati, an independent Islamic funeral director operating in Sydney noted that restricted access to the dying during COVID-19 have had a distinct impact on the communities she serves, as they have been unable to perform specific communal prayers around the dying. This inability to perform rituals can cause great anxiety, both for the dying and the family, the latter who may feel “they are not able to honor the person at the end of life”.

[2] The Deceased Management Advisory Group (<http://www.dmag2020.org>) consists of members from associations representing the breadth of deathcare services in the UK. It has acted as a central hub for the dissemination of information related to COVID-19 restrictions for the sector.

Seemingly arbitrary rulings on the numbers of attendees also have unforeseen consequences on the performance of different rituals within Australia's multi-faith society. Such was the case during the height of Victoria's second wave, when funeral attendance was limited to ten people (later ten adults plus infants). Fred Grossman, CEO of the Melbourne Chevra Kadisha explained that ten adults (usually men) are required to be in attendance to form the minyan or quorum necessary to give a mourning prayer or Kaddish, a central part of the funeral and the service the living pay to the dead. The restrictions have meant that bereaved families who have wished to have the Kaddish performed have had to make the difficult decision to leave most female relatives at home to watch the funeral over Zoom.

At the same time, CALD communities and deathcare professionals have demonstrated remarkable resilience and creativity in adapting funeral and mourning rituals to adhere to COVID-19 restrictions. To give just one example, when limited numbers were permitted to gather in private residences in Victoria, one bereaved family organised Shiva using an interactive spreadsheet to arrange for different people to visit the home in 15-minute blocks, spread over seven days.



Digital Innovation

Digitisation

The COVID-19 pandemic has been the catalyst for a greater digitisation of the deathcare sector across multiple arenas. In the survey, one funeral director from Queensland noted that “our funeral home has become more modern during the pandemic”.

One of the most positive changes identified by participants has been the move, including by government departments, towards electronic acceptance of accounts, repatriation documents and certificates (including the vital ‘Medical Certificates of Cause of Death’), which previously had to be delivered by hand. With this change “thousands of hours of labour and ridiculously unnecessary delays are being greatly reduced” (Independent Funeral Director B, Victoria). Other functions of the deathcare sector, such as retailing graves, has also moved online during periods of strict lockdown.

The rapid pace of change contrasts with the relative conservatism and analogue operating practices of the sector up until 2020. This digital recalcitrance is in spite of concerted advocacy efforts by some funeral companies, celebrants and others over many years. For example, one survey respondent reported having tried to transition to a paperless payment procedure for 18 months, and then doing so within 48 hours after the pandemic arrived. As Dean Edney of SMCT summarised: “a digital transformation that would take many years of planning occurred overnight”. And, as Robert Pitt of the Adelaide Cemeteries Authority stated: “We are not going back”.



Digital Streaming at Quang Duc Temple

Funeral Streaming

Audiovisual recordings and live webcasts have been offered within the funeral industry for many years. They are particularly well-established in funeral companies that serve diasporic communities. For the Melbourne Chevra Kadisha, for example, the religious requirement to bury within one day and the prevalence of overseas guests prompted the organisation to set up a live-streaming service via their website. During COVID-19, demand for live streaming and recordings has radically increased, even amongst older funeral attendees. Online video services have also extended to viewings of the deceased and graveside recordings of the committal. Continued restrictions on international and interstate travel have meant that live streaming has become popular even in states with few lockdown restrictions or COVID-19 outbreaks. In this manner, live streaming has become a default service offering across the sector.

COVID-19 has required companies to expand their technological capabilities. Streaming from outdoors or external venues has led companies to invest in new video equipment, secure internet connections, and in many cases, hire dedicated videographers on staff. Of the total valid respondents (n=78) to the survey, approximately half (n=43) identified themselves as having responsibility for live streaming. Of those, close to half (n=20) responded that they integrated live streaming into their company website, rather than rely on external services such as Skype or Zoom.

Funeral streams can be embedded in existing tribute walls or memorial sites, facilitating ease of access for visitors. In-house videography can also be subsumed into the company's "professional services" fee that is passed onto customers. Publicly reported charges for the live streaming of funerals in Australia during 2020–2021 vary widely, from free of charge to several hundreds of dollars, depending on the company and professional quality offered.

Survey respondents identified other advantages to in-house streaming. One respondent noted that their company "used to outsource streaming, but external providers are now overwhelmed". External streaming platforms and videographers are also not necessarily familiar with the work involved in funerals; they are 'technology specialists' but not 'grief specialists'. As one respondent conveyed:

Those companies did not take into account attendees' possible distress at having lights/cameras graveside, as an example a family was asked to stand in a particular spot or look a particular way whilst the livestreaming of the interment took place. It was more like being part of a movie set than caring for the family.

Specialist funeral streaming services such as OneRoom have emerged as popular alternatives to general streaming platforms. OneRoom CEO David Lutterman estimated that his platform used to average 7 online attendees per funeral in the pre-pandemic era, and that this rose to 35 online attendees per funeral in late 2020 and early 2021. The vast majority of attendees, however, chose to view the funeral asynchronously as a recording at a later date; a trend also recognised by a number of funeral directors working in Australia. OneRoom does not interface directly with customers, but rather offers its services to funeral companies, a decision that Lutterman explained recognises the specialist skills of funeral directors in caring for bereaved families.

Funeral live streaming has not been without its disadvantages. Questions of privacy and access have been of concern. Some families have elected not to stream the service live, or to significantly limit access to the stream and subsequent recordings. For example, Mariam Ardati, an Islamic funeral director working in Sydney, reported that some families preferred to keep the service private, or to organise unofficial recordings themselves via personal devices. In-person funerals are often announced in newspapers or social media and many are open to the public. Access to funeral streams requires the distribution of specific links, and funeral directors must negotiate with bereaved families about who should be allowed access. For example, one funeral director recalled the challenge of receiving requests to access funeral streams via the company's Facebook page. Security concerns motivated many funeral companies to host live streams on their own website, to recommend the use of passwords, or to require that people register their attendance beforehand.

Technical difficulties take on new significance when they interrupt the progress of a funeral. OneRoom CEO David Lutterman likened the pressure to succeed to "a Broadway production showing for one night only". Several celebrants and funeral directors relayed to us stories of suddenly losing internet connectivity or running into buffering issues, sometimes resulting in extreme reactions from those in attendance and online.

There are significant accessibility issues with live streaming. Older generations of mourners, particularly those living in shared living facilities or care homes, do not necessarily have access to, or competency using, the digital technologies required to attend funerals virtually. Some funeral companies have set up dedicated hotlines with staff available to slowly talk people through the process, from turning on their computer, to connecting to the stream.

Finally, for many, live streaming is inevitably seen as a poor facsimile of attending the funeral service in person. Helping families to come to terms with this reality is a continual challenge for deathcare workers. Streaming platforms generally offer limited interactivity for the remote audience. Although one or two celebrants reported that they preferred using two-way 'meeting'-style teleconference calls to enable the remote audience to chat amongst one another and to contribute to the in-person service, this was a minority amongst our respondents. Many celebrants cited concerns about security, or losing control of the flow and timing of the service if remote participants were given opportunities to intervene. Some companies have reverted to or extended offline offerings to bridge this gap. For example, SMCT has been sending hand-written sympathy cards to their families. Tobin Brothers has set up a service enabling people to send catering or care packages to bereaved families via memorial pages on their website.



Preparing ashes for transport

Wellbeing

Emotional Impact

The potential worsening of COVID-19 in Australia remains a terrifying possibility that has impacted the wellbeing of many working in deathcare. In particular, workers have felt the impact of international news coverage featuring scenes of mass cremations and burials. As Adrian Barrett of the AFDA recalls:

Just being in, working in funerals and deathcare and everything like that... if the shit does hit the fan and it does get out of control and we are seeing the kind of deaths that you'd get in Italy and Spain and New York...it's a scary place to be.

Even for those used to working with the dying and dead on a regular basis, the realities of the COVID-19 pandemic could bring new realisations. As Crematorium Worker B told us:

It is such an exhausting time trying to adapt to everything and trying to work out for myself how to deal with it. And I realised that, holy fuck I really am mortal. I know because you think that you'd be desensitised by now. But when there is something that is so bloody insidious and people are dropping like flies all over the world. It's such a frightening time.

First-hand exposure to sites of mass death was a source of particular emotional distress for those working in the sector during Victoria's second wave. Body transfer staff described picking up the deceased from aged care homes, only to travel half-way back to the mortuary and receive a call to return to pick up another person who had just died. Some staff returned to the same care home or ward several times a day to collect the dead, often completing their task in direct view of living patients who were on ventilators, battling a COVID-19 infection themselves. Some of the most harrowing accounts of this work described walking through corridors of nursing homes, seeing more and more doors marked to indicate infection, and hearing the sounds of people crying out or struggling to breathe. During our interviews, workers appeared hesitant to relate the full details of their experience, indicating that their processing of such events and the emotional implications have continued.

The increased risk of infection from working in the sector during major outbreaks has been a source of intense concern for many. One independent funeral director described the vulnerability of their profession, who, "working on the coalface", are constantly being asked to "interact with people who may or may not be infected". Deathcare workers have been unable to predict or control who they would interact with or their adherence to COVID-19 safe behaviours. The concern was compounded by instances of insufficient or unsecure supply of PPE towards the beginning of the pandemic.

Some tasks have carried a higher risk (perceived or actual) of infection than others. In the early stages of the pandemic, when the risks of infection from the deceased were still uncertain, staff were asked to volunteer to work on the body transfer team, which regularly attended nursing homes and other high-infection sites to collect deceased. Tobin Brothers Managing Director James MacLeod himself elected to spend more than twenty nights working on this specialised COVID-19 taskforce, in order to lend confidence and support to his team. As he noted, "If I won't do it, I'm not going to ask any of my staff to".

The emotional impact of COVID-19 on families has been another major source of concern for those working in the sector. Being unable to demonstrate one's sympathies through simple physical gestures such as handshakes or hugs has been exceedingly difficult. One funeral director described their distress at watching an elderly gentleman weeping as he sat apart from other members of the funeral party who were socially distancing, and being unable to reach out. Mariam Ardati described her distress at witnessing a disruption to communal prayers in her community:

We are very much social beings that thrive off being very physically close to each other. The communal prayer that's held for the deceased is made up of rows that stand shoulder to shoulder, and they actually do need to physically be touching each other to keep those rows nice and straight. Then after the prayer, there's a lot of handshaking and hugging to pay those condolences. Of course there's a lot of hugging and, and physical support offered to the bereaved as well. That's all gone out the window... the majority of us that really wanted to have our hands held physically through this very difficult life event, it's been really, really hard, really hard. It further reinforces that feeling of isolation, particularly in grief, which is what it's been, it's been quiet.

Celebrants and other deathcare workers have witnessed first-hand the impacts of grief on the communities that they have served. As such, the long-term effects of COVID-19 on the community, in the form of unresolved or disrupted grieving, has become a substantial concern for the deathcare sector.

Workload

During peak periods of COVID-19 outbreak, crematoria and mortuary staff reported increased pressure to perform in their roles, often for extended hours. Crematoria Operator B estimated that they performed 50–60 cremations per week during Victoria's second wave, peaking at 90 cremations in a week in August 2020 after two local nursing homes were affected by the coronavirus. COVID-19 increased time pressure for some key tasks. Mortuary staff reported both an uptick in specialised COVID-19 cases, which took longer to prepare, and increased demands on all preparation activities. This included a higher number of families requesting viewings, as well as more extensive embalming to facilitate longer-term storage of the deceased until after social distancing restrictions eased and a large funeral could be held. Sudden announcements of lockdowns, travel restrictions, and border closures also resulted in demands for expedited services from families so that funerals could be held before restrictions came into effect. Embalmer B, located in Victoria, described the impact of these changed conditions on their working life:

So you're very reactive and you've kind of got to throw out the window, I guess, the idea of a routine. We're very, very stringently trying to hold onto the bare minimum routines like the disinfection and the cleaning and the housekeeping, all of those kinds of things. We want to keep those paramount, bring a structure to a day. There's no such thing as what time you'll have lunch or what time you might have a coffee. That sort of stuff's out the window. You've just got to do what you've got to do.

The sector-specific effects of COVID-19 have been compounded by the shared impact of ongoing border closures, lockdowns, and economic downturn within the general populace. Many staff have had partners who lost their jobs, and many were asked to work from home. Essential workers commuting throughout the pandemic have been unable to support their spouses or help their children undertake schooling from home. Although demand for some roles has increased, the sector as a whole has not been immune to COVID-related redundancies, forced leave arrangements, and reduced hours for casual staff (AWU, 2020). Staff in ancillary services, such as catering and limousine driving, have been particularly affected.

Extended working hours, restricted travel bubbles, and evening curfews have meant that some workers have had very little access to recreation time outside of work. Some staff have chosen to isolate themselves as a precaution to minimise the potential transmission of COVID-19 from their workplace to friends and family. Crematoria Worker B reflected on her life at the height of the second wave in Victoria:

Every death certificate as soon as I saw the word Covid, it really brought me down. And also I live on my own and that also really affected the way that I was feeling, not work related but that certainly compounded it. Living on my own, the 5km came in. Couldn't see my family. Couldn't see my friends. Going to work and cremating people that had passed from Covid and then coming home and I was just, the overarching term I could use is just 'exhausted'.

Many companies in the deathcare sector have organised additional support services for their staff to assist with meeting the pressure of COVID-19. These have included access to confidential counselling, carers and family leave, home-delivered care packages, and social programs (with activities ranging from trivia nights to cocktail hours).

Support services have varied greatly across the deathcare sector. Cemetery management authorities and larger funeral companies have been able to make use of their dedicated in-house psychologists to talk to staff on a confidential basis. However, across the sector, smaller operators and self-employed sole traders have not had the same level of access to support. Many participants reported the importance of peer support networks. The impact of the COVID-19 pandemic on the mental health and welfare of deathcare workers is ongoing, and it is likely that we will not know its full effects for some time to come. There is an identified need to offer deathcare workers greater emotional support to manage situations that challenge their lives so profoundly, as demonstrated during this pandemic.



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Conclusion

Deathcare workers have faced extraordinary challenges during the COVID-19 pandemic. In surveying the sector's experience, this research uncovered a dramatic range of emotions. When asked to identify any positives to come from COVID-19, one independent funeral director in regional Victoria, who was self-isolating as a precaution, responded, "I honestly cannot think of one. I work hard for my family and now I cannot visit or see them. It sucks." At the same time, others spoke of a "new sense of purpose" (Funeral Director A) within the sector. Deb Ganderton, CEO of GMCT reflected that the pandemic had "elevated kindness and compassion" over "efficiency and profitability".

Since March 2020, death and dying have entered public consciousness on a scale perhaps not experienced in Australia since the HIV/AIDS or Spanish Flu epidemics. Public outcry surrounding attendance limitations at funerals and people unable to travel interstate to visit dying relatives affirm the continued respect for bereavement within Australian society. There is hope within the sector that this attention will translate into public discussions of mortality more generally, whether that be through community awareness campaigns or an increase in advance care planning.

While death has received increased attention, the same cannot be said for deathcare workers. The invisibility and stigma traditionally attached to the sector have continued into the pandemic. Deathcare systems appear only to become visible when they break down, such as international cases of mass burials. But attention is required now, so as to better support workers and to fortify our deathcare infrastructure for the future.

COVID-19 has revealed serious deficits in how Australia supports for those who care for the dying, dead, and bereaved. Deathcare must be recognised as an essential service and its workers provided with robust support and resources. In addition, Australia needs to increase its research and policy expertise on death, to determine how to best harmonise regulations across locations, bridge divisions within the sector, and improve communications. Technologies and rituals emerging from COVID-19 point to new directions in Australian death culture and commercial activity that are particularly deserving of further attention.

These changes will enable Australia to better support those who care for others during the most difficult times of their lives.

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