

The Last Memory - An Incomplete Journey

Hadley Quadros¹ and Dr. Vatika Sibal²

Associate Professor Department of Sociology²

St. Andrew's College (Affiliated to University of Mumbai) Bandra, Mumbai, Maharashtra, India

hadleyquadros57@gmail.com¹ and vatika.153@gmail.com²

Abstract: *A final good bye during disease or pandemics are even more distressing as they defy the concepts of an ideal death or perfect death. Family members may not have the opportunity to achieve closure by resolving unfinished business. The pain and guilt of not physically seeing or being with their loved ones during their suffering exacerbates the grief. Furthermore, a lack of social recognition with impaired support system along with the absence of last rites results in a state of disenfranchised grief. This is likely to result in a prolonged grief disorder, a condition which imperils the physical and psychological well-being of an individual. Irrespective of race, religion or culture death is almost universally followed by a funeral service or ritual. Across the globe, communities have developed these rites to enable individuals and families cope and deal with the loss of their loved one. The way in which individuals react to the death of a loved one varies across cultures. The coping mechanisms to this grief however, remain remarkably constant. A funeral ritual allows for a culturally accepted expression of emotions, emphasizing the irreversibility of death. It also initiates the recovery processes of continuity, transition and transformation. Lack of familiarity with cultural and religious practices on the part of personnel involved in dead body management can have serious consequences for the society. This article will aid in understanding the different perspective on management of the dead, and how last rites might be adapted to minimize the possible risk of further infection in relation to the COVID-19 pandemic. The current experience throughout the world has shown the vulnerability of health-care systems is a disaster with mass casualties. Handling the dead without hampering the dignity of the deceased and of the surviving family has become a challenge for all. Before any crisis overwhelms responders and resources, emergency response plans should be established and activated to ensure the reliable identification and documentation of the dead. The current review was carried out to recommend the proper management of dead bodies in the COVID-19 mass disaster with a particular focus on resource-poor countries, such as India.*

Keywords: Infectious Disease, Mass Disaster, Public Health System, Death, Pandemic

REFERENCES

- [1]. Hanley B, Lucas SB, Youd E, et al. Autopsy in suspected COVID-19 cases. *J Clin Pathol.* 2020;73(5):239-242.
- [2]. Rothan HA, Byrareddy SN. The epidemiology and pathogenesis of coronavirus disease (COVID-19) outbreak. *J Autoimmun.* 2020;109:1024-1033.
- [3]. Chin AWH, Chu JTS, Perera MRA, et al. Stability of SARS-CoV-2 in different environmental conditions. *Lancet Microbe.* 2020;1(1):e10.
- [4]. PHA Canada. Interim guidance: Death care services and handling of dead bodies during the coronavirus disease (COVID-19) pandemic.
- [5]. The Novel Coronavirus Pneumonia Emergency Response Epidemiology Team. The Epidemiological characteristics of an outbreak of 2019 novel coronavirus diseases (COVID-19) in China. *Zhonghua Liu Xing Bing Xue Za Zhi.* 2020;41(2):145-151.
- [6]. Lobar SL, Youngblut JM, Brooten D. Cross-cultural beliefs, ceremonies, and rituals surrounding death of a loved one. *Pediatr Nurs.* 2006;32:44-50.
- [7]. Li J, Tendeiro JN, Stroebe M. Guilt in bereavement: Its relationship with complicated grief and depression. *Int J Psychol.* 2019;54:454-61. 10.1002/ijop.12483
- [8]. World Health Organization. Field situation: How to conduct safe and dignified burial of a patient who has died

- from suspected or confirmed Ebola virus disease. Geneva
- [9]. Carr D, Boerner K, Moorman S. Bereavement in the Time of Coronavirus: Unprecedented Challenges Demand Novel Interventions. *J Aging Soc Policy*. Verma A. 2020 Explainer: COVID-19 Dead Body Management – India & World.
- [10]. Lu L, Zhong W, Bian Z, et al. A comparison of mortality-related risk factors of COVID- 19, SARS, and MERS: A systematic review and meta-analysis. *J Infect*. 2020..
- [11]. Fiona Bowie, 2006. *The Anthropology of Religion: An Introduction*, Oxford: Blackwell, 168. 2
- [12]. Aidan Kavanagh, 1973. 'The Role of Ritual in Personal Development', in *The Roots of Ritual*, ed. James Shaughnessy. Grand Rapids, MI: William B. Eerdmans, 145–160
- [13]. Faunce, W. a. 1958. *The Sociology of Death: A Neglected Area of Research*. *Social Forces*, 205-209.
- [14]. Kearl, M. 1989. *The Social Psychology of Emotions*. In M. Kearl, *Endings: A Sociology of Death and Dying* (pp. 472-477). New York: Oxford University Press.
- [15]. Ravichandran, N. (2020, July 06). Many Frontline Workers Have Been Left to Fend for Themselves in the Pandemic. *The Wire*, pp. 15-20.
- [16]. Reuters. 2020. As Delhi families bury coronavirus victims, a gravedigger watches on. *India Today*, 10-14.
- [17]. Shoshana, A. a. 2006. Coming Out of the Coffin: Life-Self and Death-Self in Six Feet Under. *Society for the Study of Symbolic Interaction*, 557-576