

A MANUAL CONCERNING DEATHS, MEMORIAL SERVICES AND ARRANGEMENTS FOR FUNERALS

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The material in this booklet has been prepared by David Sammons, the Minister of the Mt. Diablo Unitarian Universalist Church, in Walnut Creek, CA, as an aid for those who are either confronting the death of a loved one, or who want to look ahead to the time when such an event will happen.

THE PURPOSE OF THIS BOOKLET

Although few people want to think very much about their own deaths or the death of a loved one, death is a reality we will all, eventually, have to encounter. When it comes there are many decisions that will have to be made. For this reason it's helpful to think through what we would like to have done before being overwhelmed by the events that surround death. This booklet is designed to help people think about the decisions that will have to be made at the time of death and to suggest some of the alternatives normally considered by those who approach the issues of life and death from the perspective of a liberal faith.

UNITARIAN UNIVERSALISTS AND DEATH

Death is a fact of life from which we cannot escape. Sooner or later not only we, but those with whom we are close, will die. Death, even when it comes under the best of circumstances, represents a loss and requires changes of those who live on. When the person dying is someone with whom we've been particularly close the sorrow and grief may seem almost impossible to bear. Yet, as hard as death is, it's our belief that the Divine calls us into life, not away from it. So, we grieve, mourn and move on. The faith of a religious liberal religion is both realistic and filled with hope. Realism calls on us to accept death for the reality it is. With it comes loss and separation.

Hope calls on us, even in the face of death, to affirm life and its possibilities. The issue isn't to avoid the feelings that come with death. It is to move through them and find a way to move on with our lives enriched by all that we've shared with the person who has died and enriched by all it is of them that lives on in us.

Of help in dealing with the feelings which surround dying is thinking in advance about what it is we would like to have happen when death comes. How do we want to approach the end and what do we want to have happen after we've gone. It's important to discuss this with those who care about us, for if we don't, we may leave those who survive confused and vulnerable to unwarranted pressures. And we ourselves may become trapped in humiliating medical procedures, buried or cremated in overly lavish and costly ways or memorialized in a manner inappropriate not only for us but those who live on.

In most cases there are many people available to help as death approaches and finally arrives, including professionals like physicians, hospice personnel, clergy and funeral directors, but few of us want to give up our ability to make whatever decisions we can about our lives, even at the end. Talking with others in advance about our attitudes towards death, the sort of limits we would like on medical treatment and the kind of arrangements we would like made after we actually die - including plans for a funeral

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or memorial service helps ensure that whatever decisions are made will be ones with which all who are involved will be satisfied.

THE ISSUE OF MEDICAL TREATMENT

An encounter with the possibility of death used to be a rather simple matter. Something happened and people either died or survived, depending on the strength of their bodies. These days it's not so simple. Medical science has made it possible to survive all sorts of things that would have previously resulted in death. But this doesn't mean that the prolongation of life made possible by medical science is always worth having. Living with pain, a lack of consciousness or serious disabilities may not be what we want to do - and we may not want our families saddled with what can be the enormous cost of keeping us alive when we, ourselves, feel our lives should be allowed to end. We owe it to those we love to have a discussion about what should be done if we are not able to make decisions about medical treatment ourselves.

In many states, people may use an instrument called a *Durable Power of Attorney for Health Care* to designate others who can make health care decisions for us in the event we cannot make them ourselves.¹ In the document we can spell out the types of treatments or placements we do not desire, such as extraordinary measures to save our lives. It is one of the most important documents to fill out in advance of death and those admitted to hospitals will be informed of it.

THINGS TO DO AT THE TIME OF DEATH

The first thing that must be done is to contact a funeral director who can make arrangements for the disposition of the body. Most would be happy to discuss options and costs ahead of time and many have programs for arranging needs in advance. Alternatives to conventional funeral directors are local nonprofit societies (see <http://www.funerals.org/directry.htm>). A local church office can also be of help in suggesting a funeral director to call if arrangements have not already been made. Most churches and synagogues these days have information of help to a family at the time of death - as do the chaplains and social service staff at local hospitals.

AUTOPSIES

Among the requests that may be made at the time of a death is for permission to perform an autopsy in order to obtain information that may be of help in furthering medical knowledge. In some cases an autopsy may even be required. The physicians doing this work try to be as respectful as possible of the body of the person who has died. The purpose is not be intrusive, it is to find information that can be found in no other way.

¹ For forms see <http://www.ilrg.com/forms/index.html#healthcare>

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A "GIFT OF LIFE" IN DEATH

Because of advances in medical technology it is often possible for a person who has died to be able to provide life-giving help to someone else. Vital organs and other parts of the body can be transplanted after death or used in other ways. Many states and medical schools provide legal channels through which all or parts of our bodies can be donated, including saying one is willing to be a donor when applying for a diver's license. Further information about organ donations or the donation of one's body for medical research can be obtained from the U.S. Department of Health and Human Services <http://www.organdonor.gov/>.

VIEWING THE BODY

There are some families who choose to have the body of a loved one "lie in state" for a period of time before a funeral or memorial service at a mortuary or some other appropriate place. This provides a way for friends and acquaintances to pay their respects. If people decide to do this, they should understand that it is not necessary for everyone (or even anyone) to be at such a viewing all of the time. If they choose not to have a viewing, they should know that many others make the same choice. It is far less common these days than it was in the past. There are many other ways in which people can pay their respects and convey their sympathies.

RITEs USED TO RECOGNIZE DEATH

It is fitting at the conclusion of our lives to give our families and friends a chance to come together for a service of some kind in which they can honor our memories and be offered words of comfort, strength and support for the task of getting on with their lives. Among the options available are:

A Memorial Service is one held at a church, mortuary, chapel or a home without the casket with a person's body in it being present. It is what usually happens with a cremation, but it may also be used with a separate and more private internment of the body when a burial is desired. The service consists of things like music, selections of prose or poetry, comments about the person and the meaning his or her life, thoughts about coming to grips with the experience of death and words about moving on. The service is held at whatever time is convenient for the family and those who will attend. This may be soon after the person has died, which is of help in dealing with feelings, or it may be at a later time, especially when it's difficult to quickly gather together the people who should be at such a service. Special services are also sometimes held in addition to the initial memorial service or funeral, such as in other places where the deceased has friends.

A Funeral Service is similar to a memorial service in its content, but is held with the casket present at a mortuary, chapel, the graveside or church. Unless the funeral is held at the graveside, a service of committal is also held there for the family and whomever else they would like to attend. No matter where a funeral is held, it is the preference of most Unitarian Universalist ministers that the casket be closed before the service takes place. If it is the

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preference of the family, however, that the casket remain open during the service, the minister will usually understand.

A Service of Committal

If people are to be buried, it helps even those who are reticent for those who are close to go to the gravesite for a service of committal. An actual, physical, leave-taking from the body after the committal provides an emotional release and closure.

IF THE BODY IS TO BE CREMATED

In the case of a cremation the ashes may be interred in a grave, as would be a body, "inurned" in a mausoleum, kept at home or scattered by the family (or by a commercial service, if one prefers a scattering in the mountains or at sea). They may also be scattered or buried in a Memorial Garden. The choice of cremation versus burial is a matter of personal taste and conviction and should be made not only with one's own feelings, but considering the feelings in mind of those who will live on.

GIFTS IN MEMORY OF THE DECEASED

When a person dies, family and friends may want to pay tribute to their memories in a way that's tangible. The traditional thing to do has been to send flowers. A preferred option for many is to suggest that, in lieu of flowers, a contribution be made in memory of the deceased to some worthwhile cause. The *Church of the Larger Fellowship* has established a Memorial Fund to which contributions can be made, if a person or family so wishes. An acknowledgement of the gift is sent to the donor and to the family of the person memorialized.

A WORD ABOUT WILLS

Though many have not taken the time to draw up a will, everyone should have one. It's the surest way to ensure that one's wishes be followed after death. Without a will state law comes into play and the way assets are divided may or may not be what the deceased wanted. If, as a part of a person's will, the person would like to name the Church of the Larger Fellowship as a beneficiary, the Unitarian Universalist Association has people who are well-versed in the benefits of the various ways one can give money. The committee can be reached through the church office. Similar advice is offered by colleges, universities and other charitable organizations.

EXPENSES AT THE TIME OF DEATH

The major expense at the time of death is the cost of the burial or cremation and services of a funeral director. Normally, the funeral director's fees are packaged together. They include the cost of the casket, professional help, obituaries, transportation, preparation of the body, death certificates and various incidentals. They can range from a few hundred to several thousand dollars. Funeral directors can be very helpful, so don't hesitate in asking whatever questions you may have, not only

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about funeral arrangements, but about whatever else it is you may have to do after a person has died.

Some people prefer making their arrangements with funeral directors in advance, so their families will be free from pressure at the time of their deaths. Others prefer making arrangements with a non-profit group to ensure a minimization of costs. Funeral directors can also help with the selection of a gravesite or place for ashes to be inurned, but arrangements for this can also be made directly with cemeteries or mausoleums.

One of the unfortunate things that can happen when plans have not been made or discussed in advance is that people can be talked into spending far more money than is appropriate for their means. Though they may choose to have them, elaborate caskets, large quantities of flowers and the use of limousines are not necessary parts of showing one's respect for the deceased. In making arrangements for a funeral, memorial service, cremation or burial, one should pay only for those things that they feel are appropriate.

The least expensive method of handling death is to have an immediate cremation with a memorial service held in one's home or at a church. In such cases embalming is not necessary. If burial is preferred, there is no need for an expensive casket - and in some cases, embalming also may not be necessary. As for the cost of burial, it varies, depending on the cemetery chosen. Cemeteries require not only the purchase of a lot and a fee for opening and closing the grave, but also a vault to house the casket.

FEELINGS THAT ARE BOUND TO ARISE

Not only is it helpful to think about the kinds of arrangements that must be made at the time of death, it helps to be aware of the sorts of feelings that are bound to arise. An emotion like grief, while it is a normal reaction to death, can result in a whole range of secondary symptoms of which it's helpful to be aware. The research of Dr. Erich Lindemann shows that any of the following might be expected:

- (1) Grief can cause physical distress, such as a tight throat, a shortness of breath, a feeling of emptiness in the stomach, a lack of energy or feelings of inner tension and pain. Such physical distress can also result in hyperactivity, hand-wringing, aimless walking and hair or clothes pulling.
- (2) Grief can create a feeling that what's going on is unreal, as though the survivor is standing on the outside looking in at what's going on. This may result in a distancing from people and/or a preoccupation with the image or memory of the deceased.
- (3) Another common symptom of grief is guilt. The bereaved are likely to be flooded with thoughts of all the wrong things they did in relation to the deceased, as well as

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all the good they failed to do. Guilt is especially common after a long illness. The survivors, if they feel relief over the end of the ordeal, as they should, may then feel guilty because they're relieved. People can also feel guilty because they've worked through their grief during a long illness and have nothing left to grieve. Even the fact of being alive, after someone else has died can create guilt.

(4) Grief is sometimes accompanied by a cold, irritable, even hostile feelings towards others. A grieving person often doesn't want to be bothered by others during his or her time of bereavement and may become critical or upset with those who try to comfort them.

(5) Many activities which were previously a part of a grieving person's life may, at least for a time, lose their significance. This can result in a feeling of restlessness or a seeming inability to find anything to do.

(6) A final symptom of grief may be an attempt to take on the characteristics of the person who has died or to begin to do things in a certain way "because that's the way they would want it."

Any one or any combination of these symptoms or others may appear during mourning.

COPING WITH GRIEF

When someone has died feelings like grief must be dealt with if we are to be able "walk through the valley of the shadow of death" and move on with our lives. In doing this it helps to be able to share our feelings with someone who is supportive and understanding. On the other hand, trying to deny the feelings of bereavement or seeking to avoid painful memories associated with a loss is one of the worst things a person can do.

Another bad thing to do is to feel ashamed of the depth and sadness of your feelings. The depth of people's feelings testifies to how deeply they care about a person who has died. Unfortunately, some people feel it's a sign of weakness to let their emotions show, even though fighting back tears and denying feelings is seldom wise. Grief and sadness are normal responses to a loss, as are guilt and anger. To try to push them out of sight is not to get rid of them: It's to set oneself up for having them emerge in unpredictable and destructive ways later on. Dealing with feelings as they arise gives people a chance to understand and move beyond them - to get on with their lives without being immobilized by a loss. It lets the memories of the lives have shared with a person who has died - whether they are positive or negative - find an appropriate place as people move on with their own lives.

FURTHER HELP THAT'S AVAILABLE

Not only are ministers and counselors available for those who need to talk with someone outside of their family and friends, there are many support groups in the community for people facing death with a disease, such as cancer, or trying to cope with the problem of

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being alone. There are also many excellent books on dealing with death and dying, including not only the work of Elisabeth Kubler-Ross, but the Beacon Press's Rabbi Earl Grollman. The staff of the Church of the Larger Fellowship is available to talk with anyone who would like help. They also have a wealth of information about community resources. Call the Rev. Jane Rzepka, CLF Minister.

ONE LAST SUGGESTION

It would be helpful to our families if, long before we have to face the prospect of death, we made an inventory of all the personal, financial and other information that will be of use to those who will have to handle matters at the time of our deaths. Available on our web site is a form that can be used to detail the information that would be helpful to the family, as well as for the minister who will be working with the family on arrangements for a memorial service or funeral. These forms can be kept on file with the next of kin, as well as at home. We encourage everyone to fill one out.

Making a planned donation to the CLF prior to death can provide lifetime income as well as offering tax and other advantages to the donor. Information about making a planned gift can be found at www.clfuu.org/giving/planned_giving.html

Finally, those who find it difficult to think about what should be done at the time of death might either want to talk with a minister or refer to the several web sites that have helpful materials.

Advance Directives Living Wills, Medical Powers of Attorney
<http://www.partnershipforcaring.org> includes state specific documents

Alzheimer's Information Site
<http://www.hospicefoundation.org/alzheimers/pdf/resources2004.pdf>

Organizations concerned with end of life
<http://www.hospicefoundation.org/links.htm>

Making end of life decisions – NPR program
<http://www.npr.org/programs/morning/features/2003/dec/endoflife/>

Caring Conversations™ - Making Your Wishes Known for End-of-Life

Care – a consumer education initiative that helps individuals and their families share meaningful conversation while making practical preparations for end-of-life decisions.

Center for Practical Bioethics <http://www.midbio.org/mbc-cc.htm>

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