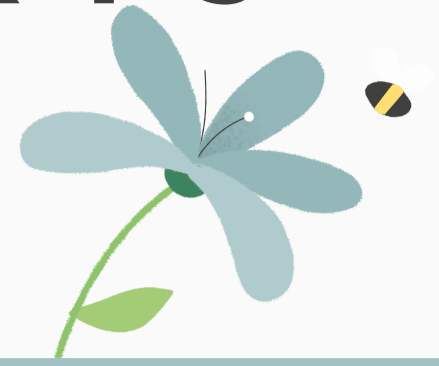


FUNERAL EXPERTS

by experience

WHAT MATTERS TO THEM?

Dr Julie Rugg and Dr Sarah Jones



background

- Wanted to understand evidence base for good funeral care.
- Literature review revealed evidence was anecdotal and opinions of professionals.
- Review identified need to establish what bereaved people see as key elements of a funeral (“funeral factors”).

method

- Qualitative research method with ethical oversight from advisory committee including academics and industry bodies.
- Using traditional and social media 53 participants were recruited (50 included).
- Participants were not from pre-selected groups, to reflect “normal” UK funeral experience.
- Data from interviews analysed to identify key themes.

results

In-depth analysis revealed **five funeral factors** but also that the funeral experience occurred over a more extended time-scale than usually considered.

FUNERAL FACTORS

WERE FUNERAL WISHES KNOWN?

Leaving some wishes (however small) was helpful as fulfilling those wishes was a gift to the person who has died. The absence of wishes was problematic as caused uncertainty.

WAS DECISION MAKING INCLUSIVE?

Family dynamics underpin how decisions were made and play a significant part in whether funeral was meaningful or satisfactory. Most families worked hard to be inclusive, but family conflict was often made worse.

WAS THE FUNERAL DIRECTOR RESPONSIVE?

Funeral director responsiveness was a major factor in whether the experience was satisfactory. The first meeting set the tone and if not constructive then the arrangement process became a “battlefield”. People had different needs for information, choice and personalisation and one approach would not meet different family’s needs consistently.

WAS THERE THE RIGHT LEVEL OF CONTACT WITH THE BODY?

People had very different needs regarding contact with body, and this might occur at different times during the funeral timeline (i.e. upon death, in the hospital mortuary or at the funeral director). How the body was treated was important and embalming was spoken about negatively.

DID THE FUNERAL SERVICE MEET EXPECTATIONS

The service could be deconstructed into different elements, such as the journey, bearing the coffin, officiant, eulogy, music and readings and funeral tea. Of note, different aspects were meaningful for different people. Getting the right tone was important and the funeral service, as one point on the funeral timeline, had variable significance.

key points

- Last wishes are important and funeral activities extend way before and beyond the funeral service itself.
- Funerals occur in the context of a family dynamic and how this is managed impacts on satisfaction.
- People have individual needs about spending time with the person who had died.
- People have strong opinions about how the body was cared for and articulate strong negative views when intervention occurred without their active consent.
- People find meaning in different parts of the funeral so we must not be prescriptive about where attention should be focussed.
- People want different amounts of information, control and involvement and any generalised statements about the needs of the bereaved are likely to be inaccurate.



EXTENDED FUNERAL TIMELINE AND PROFESSIONALS INVOLVED

CARING FOR BODY
EMOTIONAL LABOUR OF PREPARING FOR A FUNERAL

Expression Of Wishes

- Solicitors • Funeral Plans
- Health and Social Care Staff

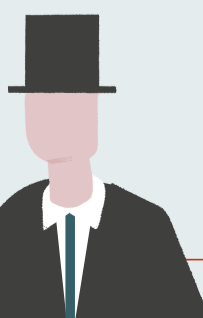
Death

- Hospital • Coroner
- GP • Bereavement Teams
- Nursing Homes • Nurses
- Mortuary Staff

First Meeting With FD

- Hospital • Coroner • GP
- Bereavement Teams
- Nursing Homes
- Nurses • Mortuary Staff

Ongoing Dialog With FD



FUNERAL DIRECTOR

Funeral Service

- Officiant
- Cemetery
- Crematorium Staff

Final Disposition (Headstone/ Ashes)

- Cemetery and Crematorium Staff

