The Deritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved

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A dissertation submitted for the degree of Doctor of Philosophy at Stellenbosch University, South Africa

August 2016

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Declaration Statement

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C. Lynn Gibson, DPhil, CFSP

December 2016
Epigraph

“To live grief can become an act of human dignity.”

- Daniël Louw
Abstract (English Version)

The problematic field of investigation for the dissertation was a focused concern for the pastoral care of bereaved human beings in the context of significant cultural shifts now shaping the twenty-first century. Deritualization was identified as a significant interdisciplinary concern for bereavement care practitioners. The objective of the research was the development of a practical theology of compassionate caregiving for the bereaved with deference to the problem of deritualization. The theoretical framework was guided by the Oxford Interdisciplinary Research model and the Loyola Institute of Ministries model of practical theology. The study was designed for applied research for funeral directors and vocational pastors utilizing qualitative research methods. Hermeneutical and empirical components addressed six research questions through two domains of inquiry: disciplinary perspectives and educational dynamics of bereavement caregiving. Using the method of hermeneutics to critically evaluate the first two research questions, three disciplinary fields of knowledge were examined and integrated from the perspective of pastoral care: funeral service, bereavement psychology, and practical theology. Each discipline individually converged upon meaningful caregiving, meaning-reconstruction, and meaning-reframing as significant modes of bereavement care. Using ethnographic semi-structured interviews to critically evaluate the remaining four research questions, data were collected from a Christian university and a mortuary college. The interview questionnaire included twenty-five main questions organized in four parts: Philosophy of Education, Hermeneutics of Bereaved Families, Care of Bereaved Families, and Encounter of Bereaved Families. The study utilized two cycles of qualitative coding techniques to report the findings of each participating school. A hybrid form of in vivo and holistic
coding as well as a second cycle of pattern coding distilled the interview responses into actionable statements that reinforced bereavement caregiving. By synthesizing all of the findings, a compelling case was made for a paradigm of comforting presence supported by principles from a Louwian perspective of practical theology, including theological anthropology, promissiotherapy, bipolarity, and hermeneutics. The study connected a philosophy of meaning-reframing and a paradigm of comforting presence to a meta-theoretical framework within a narrative approach to care. The research elucidated an interdisciplinary understanding that contributed toward a compassionate practical theology of caregiving for the bereaved.
Abstrak

Die deritualisering van dood.

Ontwerp vir ‘n praktiese teologie van rousmartpastoraat aan treurendes

Die agtergrond van die navorsing is die kulturele skuif binne die Amerikaanse samelewing, naamlik ‘n toenemende deritualisering van dood, veral tydens die fase van die begrafnis en die tref van reëlings deur die familie en die begrafnisondernemer. Die navorsing poog om te verstaan hoe pastoraat in rousmart aan treurendes en lydendes, troos en hoop kan gee, veral aan naasbestaandes wat worstel met die afskeidskrisis na die dood en sterwe van ‘n geliefde.

Die navorsingsvraag is die volgende: wat is die moontlike impak van deritualisering op die interaktiewe verband tussen verlies, treurwerk en die spirituele dimensie van singewende hanteringsmeganismes? (Onder andere, veral die worsteling met die vraagstuk van sin en die internalisering van verlies binne die eksistensiële realiteite van die lewe).

Deritualisering is geïdentifiseer as ‘n beduidende interdisiplinêre vraagstuk vir professionele pastorale sorg en alle ander partye/professies betrokke by die proses van treur en rousmart.

Die Oxford Interdisiplinêre Navorsingsmodel asook Loyola Instituut se Bedieningsmodel vir Praktiese Teologie is gekies as die teoretiese raamwerk vir die navorsingsprojek. Die studie-ontwerp fokus op toegepaste navorsing met die oog op die professionele werk van begrafisondernemers/direkteure en gemeentelike pastors. Vir dié doel is gebruik gemaak van ‘n kwalitatiewe navorsingsmetodologie wat ruimte laat vir beide ‘n hermeneutiese sowel as empiriese navorsingskomponent.

Binne die raamwerk van ‘n hermeneutiese metodologie, word drie dissiplinêre kenvelde vanuit die perspektief van pastorale sorg ondersoek: die diens van die tradisionele begrafnisondernemer, die insigte van teurwerk vanuit ‘n psigologiese perspektief, en die dissipline van praktiese teologie. Die basiese aanname is dat al
drie hierdie velde op een of ander wyse betrokke is by die sinvraagstuk, naamlik (a) sinvolle sorg, (b) rekonstruksie van sinvelde en (c) paradigmatiese herkonstruksie van sin-raamwerke. Al drie word beskou as beduidende modi van rousmartpastoraat.

Die navorsing is vooraf gegaan deur 'n piloot-studie. Navorsingsdata is daarna versamel by 'n Christelike universiteit asook 'n kollege vir die opleiding van begrafnisondernemers en lykbesorgers. Daar is gebruik gemaak van etnografiese, semi-gestructureerde onderhoude. Die vraelys vir die onderhoude het vyf-en-twintig vrae ingesluit. Dit is in vier afdelings georganiseer: filosofie van opvoedkunde; hermeneutiek van families wat treur as gevolg van die verlies van 'n geliefde; gesinspastoraat aan treurendes; en die ontmoetingsgesprek met gesinslede tydens die fase van afsterwe.

Die studie het gebruik gemaak van twee sirkels van kwalitatiewe koderingstegnieke ten einde die bevindings van elke deelnemende groep te rapporteer. 'n Hibriede vorm van in vivo en holistiese kodering, asook 'n tweede siklus van patroon-kodering is gevolg ten einde die onderhoudsresponse te verfyn en te verwerk met die oog op aksie-gerigte stellings wat die prosesse van treurpastoraat en sinverwerking kan versterk.

Deur middel van 'n proses van sintetisering is die volgende bevinding gemaak: die noodsaak van 'n vertroostende teenwoordigheid. Hierdie vorm van daar-wees-pastoraat moet ondersteun word deur 'n prakties-teologiese model van teologiese antropologie, bipolêre epistemologie en hermeneutiese metodologie soos voorgestel in D. J. Louw se promisioterapeutiese model vir hooppastoraat en 'n teologiese hermeneutiek van heling in lyding.

Ten einde die vraagstuk van deritualisering en reritualisering aan te spreek, verbind die studie die paradigma van vertroostende teenwoordigheid, en die filosofie van die herstrukturering van paradigmas vir singewing en sinneming, aan 'n meta-teoretiese raamwerk wat ruimte laat vir 'n narratiewe benadering tot pastorale sorg.

Die bydrae van die navorsingsprojek lé op die vlak van Christelike spiritualiteit binne 'n interdissiplinêre verstaan van rousmartpastoraat aan treurendes en die professie van pastorale sorg as afdeling van die dissipline: praktiese teologie.
Acknowledgements

I would like to acknowledge the following individuals without which this research would not have been possible.

- Reverend Glenn Grubb – for being a key source of inspiration. “What’s wrong with me?” Nothing, dear man – we all live, love, and grieve.

- Dr. David Ward – for modeling faith-learning integration and interdisciplinary research at Oxford Graduate School/ACRSS. I am grateful to have such a dear soul-friend.

- The Staff who represent Smith Life & Legacy – my real-world mission field. I stand amazed at the constant work of your hands each day toward the common good of our community in East Tennessee. Keep sharing our stories!

- My Business Partners, Lisa, Jason, and Justin – for endless support. How blessed I am to have supportive partners in the journey of our common vocational calling in life.

- Professors Daniël Louw and Christo Thesnaar – for welcoming my research. I remain thankful for Stellenbosch University – truly a global exemplar of practical theology. Being cradled in a natural lush beauty of the countryside, Stellenbosch stirred my deepest affections for pastoral care and cura vitae.

- Dr. Jason Troyer, Maryville College & Mt. Hope Grief Services – for scholarship and guidance through the field of grief and bereavement psychology. Interdisciplinary minds make for great friendships...and lunches.

- Becky Gabehart – for much research assistance and a listening ear. I am delighted to participate in the training of an emerging funeral service professional who has a true heart for the art of pastoral care.

- My wife, Angelia and our children, Will, Owen, Nate, Netsa – for your love and understanding that allow me to pursue my passion and scholarly abstractions. My family truly means the world to me – they are indeed my legacy, my story.
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Chapter 1
Problem Identification

1.1 Introduction and Background Information

The problematic field of investigation for the current research is a focused concern for the pastoral care of bereaved human beings in the context of significant cultural shifts now shaping the twenty-first century.\(^1\) The study is principally undergirded by a pastoral impulse to assist the bereaved in affirming life and hope in the wake of death and acute loss. The dissertation seeks a deeper understanding for how bereavement caregivers may assuage human suffering and provide wholeness in hope among care seekers who are facing the death of a loved one (Louw 2015).\(^2\) Bereavement

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\(^1\) The operationalization of three (3) specific terms utilized in the study are notably significant: pastoral, caregiving, and bereaved. First, the term “pastoral” is operationalized in the study to reflect a broad intercultural framework for faith-based caregivers who are guided by Christian compassion. The term “pastoral” is not used in a formal clerical sense that limits pastoral care exclusively to ordained clergy, preachers, or other formalized sectarian ministries (Farley 1983). Instead, pastoral care is more broadly understood as “a mode of hospitable outreach to all human beings irrespective of race, gender, and cultural diversity” (Louw 2014:24). Second, the term “caregiving” is utilized in the dissertation to describe the activity of nurturing care before, during, and after the experience of a loss of a significant other to death. Caregiving seeks to establish an “inclusive public space for doing pastoral care” framed in terms of relational and inter-relational networking (Louw 2014:24). Third, the term “bereaved” is operationalized as a person or persons to whom the experience of loss has affected. Bereavement is understood as the existential experience of being “torn apart” or “having special needs” with regards to a significant personal loss to death (Wolfelt 2013:1; Wolfelt 2006:29).

\(^2\) Louw explains that even in the “chaosmos” of daily life, “it should be possible to link all the fragments and splinters in our daily experience together in such a way that hope is instilled and a sense of wholeness sets in” (2015:119). “Chaosmos” is an insightful term for pastoral care to describe how ordinary life in the world is not simply constructed by order and design, but partly by disorder and chaos as well (Louw 2015:163). In this way, bereavement caregivers traffic in the chaosmos that often exists at the margins of life and death.
caregiving, recognized as an essential element in the art of pastoral care, is the subject matter of the current study.

At a fundamental level, the dissertation explores the interplay between the more formalized industry of the caretaker (i.e. the funeral service industry), the local pastoral caregiving of the ministerial praxis (i.e. vocational pastors), and the impact on theory formation, namely on a pastoral theology of compassion in bereavement care. During an initial impact phase of acute grief, when a bereaved family needs to make important decisions regarding the funeral, the question regarding different forms of rituals comes into play. Even within secularized approaches to ritualization, the question about the spiritual realm of death surfaces: should death be regarded as merely the ending of biological life? Or could death challenge human beings to reflect anew on issues like destiny, life fulfilment, and the realm of the transcendent? How do the bereaved experience comfort, wholeness, and hope in suffering?

Bereavement in post-mortem ritualization implies thus more than how to get rid of a deceased physical body; it awakens questions about an integrative approach to human embodiment and ensoulment.\(^3\) In an integral and ‘wholistic’ approach to death and dying, a fundamental question surfaces: how are we going to deal with a ‘spirituality of death and dying’ within rituals facilitated by both funeral caretaking (as a profession) and funeral caregiving (as a ministry)? This dissertation argues principally that deritualization could hamper sound processes of mourning.\(^4\) Deritualization is operationalized in the study as a key term to broadly denote the growing trend in the United States of a public openness to revise, replace, minimize the significance of, and even eliminate/avoid long-held traditional funerary rituals to

\(^3\) Louw, Ito, and Elsdörfer (2012:86) suggest that “a healthy body is due to the inhabitation of the Spirit (in) an embodied soul and ensouled body.”

\(^4\) Deritualization describes a breakdown, disruption, or loss of ritualized activities in daily life, but does not necessitate a total collapse of all ritualized forms (Sarabia and Knottnerus 2009; Thornburg et al. 2007). The Latin prefix *de* does not require negation, but points to a removal, separation, or privation (i.e. lacking usual comforts or necessities). The term deritualization does not suggest the loss of a particular prescribed ritual form, but is useful to describe current cultural shifts affecting the context of bereavement care. The deritualization of traditional forms does not preclude a re-ritualization of new and creative symbolic forms (Cann 2016).
assist in the adaptation of loss. In a description of high impact issues facing professional funeral service caregiving, Long and Lynch describe “the curious downsizing of funeral rituals” and “the increasing number of people who specify ‘no service’ to mark their deaths” (2013:157). If these new tendencies reported by the funeral industry proliferate and point to less formal modes of ‘saying goodbye’, how should bereavement liturgy in the pastoral ministry respond if traditional forms are becoming outdated? On the other hand, how should the funeral service industry respond? If funeral caretaking implies more than being a business (i.e. merely doing a job for monetary compensation), how should it put into practice the notion of a ‘spirituality of death and dying’ and cooperate with local communities of faith and the ministerial practice of a liturgy of bereavement in order to foster ‘wholeness’ and spiritual healing in processes of mourning?5

The dissertation is purposely motivated by a particular posture toward bereavement care. In specific terms, the study embraces a Christian faith-based approach to caring for bereaved people. The basis for choosing a Christian perspective is the ubiquitous need for comfort, hope, and wholeness in deference to how death disturbs the horizon of future orientation and meaning.6 There is an important connection between the core issues in the Christian faith, namely the connection between the grief and compassion of Christ in the gospels, as well as the interplay between the cross and death in the narrative of salvation and the human quest for hope and meaning. Moreover, there is also a connection between the Christian tradition of the care and cure of souls (i.e. cura animarum) and the phenomenon of vulnerability that families experience during

5 The phrase, ‘a spirituality of death and dying’, is operationalized as a ubiquitous human need for comfort, wholeness, and hope within the processes of suffering and the adaptation of loss. ‘Spiritual’ in this sense is connected to the idea of a transcendent source or means not confined by the mundane. In other words, a ‘spirituality of death and dying’ relates to the internalization of loss within the existential realities of life.

6 A Christian perspective is also the framework wherein the researcher operates as a caretaker. Working within the parameters of a Judean-Christian philosophy of life regarding the human predicament of suffering, the researcher recognizes the challenge of how to integrate faith with the realm of death and loss. Within the current American context and ubiquitous human need for comfort in loss, the role of the Christian faith significantly shapes the researcher’s profession as a caretaker within the praxis of bereavement.
times of emotional suffering incurred in the tumultuous liminal space of acute grief. Kelly explains: “Bereavement care shared within the Christian community, where the Christian metanarrative is the main resource utilized to aid reflection on, and reinterpretation of, the deceased’s story and the survivor’s grief is pastoral care” (2008:44).⁷ In support of a Christian metanarrative, the dissertation suggests that vital to faith-based bereavement care is the relational role of compassion.⁸ As a mode of hospitable outreach, Christian compassion is nuanced in a literal sense – cum passio – where “caregivers suffer with care seekers” (Doehring 2015:xvi). In this way, a compassionate response to human grief and suffering from a hopeful Christian perspective governs the thinking throughout the research.

The basic presupposition of the current study is that within a religious approach that is sensitive to the dimension of meaning and human dignity, a Christian understanding of compassion could enhance the caring skills of two (2) primary professions associated within the problematic field: funeral directors and vocational pastors. Each of these caregiving professions traditionally work together in a mutual collaboration of care (i.e. a team approach) for bereaved families and individuals. Yet, the current study suggests that in a very secularized environment like the United States of America,⁹ there seems to be a paucity of research that fully recognizes the pastoral

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⁷ A Western Christian metanarrative is often described by terms that represent movement through key biblical themes, such as Creation, Fall, Redemption, and Consummation (Garber 2005). Though beyond the scope of the current study, it is recognized that an Eastern Christian metanarrative might utilize different terms to emphasize other aspects of the Christian faith, such as Creation, Incarnation, and Re-creation. Where a Western approach may accent the role and significance of individual sin in life, an Eastern (or Byzantine) approach may place more emphasis on the corporate need to deal with principalities and powers (Webber 2008:169; Meyendorff 1999.). The former concentrates on the sacrificial response of Christ (e.g. the Penal-Substitutional view of the atonement); the latter concentrates more on the triumph of Christ over sin, evil, and death (e.g. the Christus Victor view of the atonement). For the current study however, both perspectives are useful paradigms that support the pastoral impulse to care for bereaved individuals, families, and communities.

⁸ In Chapter 2: Literature Review, the dissertation discusses the challenges of how a Christian perspective functions in a postmodern Western context (see 2.5 Part II: How the World Should Be According to Practical Theology).

⁹ Taylor’s masterwork (2007) identifies three senses of secularization, including the retreat of religion from the public spaces, the decline of religious belief and practice, and conditions of belief. Volf argues that the first two aspects of the secularization thesis cannot be fully supported globally today with empirical data (2015:79).

To be sure, though some bereaved families have the benefit of turning to a vocational pastor or to a local church for support during times of loss, nevertheless and perhaps to a greater extent, most all families utilize some form of caregiving services provided by a funeral director when faced with the loss of a loved one.¹⁰ Though the current study focuses on both professions (i.e. vocational pastors and funeral directors), the role funeral directors have in bereavement caregiving will be emphasized in order to advance their inclusion in a multi-disciplinary network of care providers integrating spirituality within the liminal space between death and grief (Beardsley 2009:239; Bregman 2010). To provide a vital example, the study recognizes the fact that licensed funeral directors and embalmers touch deceased bodies and prepare deceased bodies for the last event of farewell. In this way, touching, washing, embalming, and dressing a deceased body needs to be thus reconsidered as a spiritual act of caregiving and part of the rituals regarding death and dying. Is the body merely a corpse or does the body indeed represent the whole of human life (Van Beck 2015)?¹¹

¹⁰ The study notes that even the small percentage of families who choose to conduct their funerary rituals without the assistance of a licensed funeral director often hire a funeral establishment to assist with the final disposition of the deceased body as well as to complete key administrative tasks, such as the processing of certified death certificates by State authorities and obituary notices for local and national newspapers. Nevertheless, there are groups, such as the National Home Funeral Alliance, that advocate for a complete “do it yourself” approach to funerals and body disposition (Kaleem 2013).

¹¹ Dignifying a dead human body through rituals of preparation is a deeply spiritual function of deathcare professionals and caregivers. While the term “spiritual” or “spirituality” sometimes functions as a vague synonym for religion, or is even used in opposition to organized public religion, spirituality can also imply a sense of “essential humanness…capable of universal application, and an almost infinite range of meaning” (Beardsley 2009:233). In this way, spirituality offers a flexible term that may “facilitate conversation and communication between specialists of different disciplines” (Beardsley 2009:233). While spirituality is a contested term, many prefer it to the term religion in certain contexts. Volf explains that when ordinary people say they are spiritual, they typically mean that “their relationship to God or to the transcendent realm matters to them but that they don’t care much for religious institutions, dogmas, and rituals” (2015:208). Given the ubiquity of death, the current study is interested in the human proclivity to relate to a transcendent realm when faced with human mortality. Spirituality in this sense suggests a comprehensive quest in life for comfort, wholeness, and hope amid “the existential realities of daily experiences and the demands posed by happenstances and different encounters within the reality of suffering and death” (Louw 2013:1).
In order to maintain a pastoral approach that is sensitive to both the spiritual dimension of meaning and the anthropological dimension of human dignity, the study suggests that a team approach to bereavement caregiving is paramount. In this regard, the researcher wants to revisit the role of the funeral director in order to propose a paradigm shift, namely from the materialistic perspective aimed at business and industry goals (Doody 1995) to the perspective of ‘spiritual service’ and compassionate caregiving. In short, the research wants to probe into the theological dimension of comfort in pastoral care (i.e. a theological paradigm for compassionate caregiving).

As an important note of personal disclosure, the researcher is a licensed funeral director with over fifteen years of professional experience in working with vocational pastors in caring for bereaved families and individuals through funerary services and ceremonies. As such, the researcher is a participatory observer within the problematic field. Subsequently, based upon years of accumulated anecdotal evidence, the foreground of the research underpins a robust control belief that funeral rituals are indeed one significant means to achieve effective ministry of caring for the bereaved (Fowler 2004:1). At the same time, what needs to be made clear is that the current research is not aimed at a nostalgic attempt to return to a fixed or static paradigm of

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12 The researcher is a second generation licensed funeral director and Certified Funeral Service Practitioner (CFSP) committed to providing his community with a culture of care when facing a loss and honoring life. Independently owned and operated funeral homes in the United States of America are often managed by family members. In this way, a second generation funeral director indicates that a prior family member worked within a given firm. In this case, the researcher’s father, C. Don Gibson, was a first generation funeral director who began his practice in 1958. The researcher is also a part owner of two licensed funeral establishments in the State of Tennessee. Smith Funeral & Cremation Service, in operation since 1962, is a full-service funeral establishment located in Maryville, Tennessee that is aimed at honoring the life and legacy of families through meaningful rituals, ceremonies, and personal experiences. A second funeral establishment was opened in September 2012 – Cremation by Grandview. This licensed establishment is located just one mile from the Smith campus in Maryville, Tennessee, and is designed to address a distinctly different family need. While both business entities assist families living in Blount County, Tennessee (population 127,000) who are facing the death of a loved one, Cremation by Grandview is aimed at reaching a different demographic – a segment of the population who desire or opt for direct cremations with minimal or no formal services or rituals provided by the funeral home. The number of bereaved families served each year by the researcher’s two firms may convey a degree of expertise that substantiates the current study’s emphasis on the importance of pastoral caregiving for bereaved families. In specific terms, the researcher’s two funeral homes on average assist about 500 families per year with bereavement care (approximately 400 families by Smith Funeral & Cremation Service and 100 families by Cremation by Grandview).
traditional funeral rituals, nor is the study entrenched in a personal quest to save the funeral industry from necessary change amid significant cultural shifts. Instead, the dissertation is fundamentally about the role of pastoral care to aid bereaved individuals and families in the adaptation of loss and thus to revisit the interplay between pastoral caregiving and the professional dimension of funeral caretaker.

**Background Information Regarding Cultural Shifts of Ritualization**

Turning now to the present context of bereavement support extant in the United States, many caregivers are alarmed with a current growing trend towards deritualizing death (Irion 1991; Wolfelt 2005; Taylor 2011a). Increasingly, many people in America are choosing to have their deceased loved ones removed from the place of their death and cremated with minimal or no ceremonies, or buried without any traditional funeral services that accompany the dead (Light Bulbs 2013). Taylor opines: “the elimination of the funeral by more Americans every day suggests that public confidence in their efficacy is lacking” (2011b:3). In fact, the National Funeral Directors Association (NFDA) reported that only 42% of respondents now feel that having a religious service is very important to cope with death (Gillespie and Defort 2015:64), marking a steady 7% decline in just the past three years (see Figure 1). Indeed, the cultural trend away from meaningful religious ceremonies as a means to cope with loss is a growing concern for bereavement care typically provided by a caregiving team of funeral directors and vocational pastors.

![Figure 1: The Deritualization of Religious Services](https://scholar.sun.ac.za)
Conversely, closely related to the trend of ritualistic downsizing is the growing preference toward simple cremation with no ceremony rather than traditional burial with ceremony. One industry report states that the U.S. cremation rate grew rapidly from 26.2% in 2000 to 38.6% in 2010 and will continue rising by an average of 4.0% per year through year 2015 (State of the Industry 2011:9). In another report compiled by the NFDA, the cremation rate is predicted to eclipse the burial rate for the first time in the history of the United States in 2015 (NFDA Stats 2015:8). According to the report, the cremation rate will be 48.5% and the burial rate will be 45.6%, with the trend expecting to continue through 2035 (see Figure 2).

![NFDA U.S. Projected Cremation & Burial Rates](image)

**Figure 2: Projected Cremation and Burial Trends**

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13 The statistical projections of the NFDA report did not designate the possible number of families who may choose both cremation and burial for their deceased loved ones. In fact, there was some movement within contemporary funeral service practice to think of cremation as just another mode of final disposition of a deceased body. In these cases, cremation of the deceased body could have occurred either before or after the funeral ceremonies, depending upon the family’s wishes.

14 The 2015 NFDA data is consistent with a prior 2014 report stating that the projected burial rate for 2015 will be 45.8% and the projected cremation rate will be 48.2% (The NFDA Cremation Report 2014:2). Further, the 2014 report projects that by 2030, the national United States burial rate will be 23.2% as compared to the cremation rate of 70.6%.
Chapter 1: Problem Identification

The Cremation Association of North America (CANA 2011) reports similar findings and estimates. According to a CANA report, the cremation rate in the U.S. will indeed exceed 46% by the end of 2015, demonstrating a sharp increase in cremation preferences as a mode of disposition of human remains for United States citizens (see Figure 3).

![Cremation Date & Predictions: U.S. Data Trends](https://scholar.sun.ac.za)

**Figure 3: U.S. Cremation Projections by CANA**

Of course, just because a family chooses cremation does not mean that they cannot have meaningful funeral services, or even a ground burial (Starks 2014). In fact, some families who choose cremation today still have the deceased body of their loved one embalmed and prepared for a private farewell viewing in a cremation-oriented casket, and then placed in a quiet funeral chapel or slumber room before going to the crematory. Moreover, some families who choose cremation still have a visitation period or a time for receiving friends in order to mobilize their community of support. Further, those families who choose cremation may also decide to have a traditional funeral ceremony with the deceased body present before going to the crematory, or even a memorial service without the deceased body present. There are indeed a variety of final disposition options for cremated human remains that are placed in urns, including being interred just like traditional caskets in the burial grounds of a cemetery, being entombed in an above ground mausoleum or columbarium niche, and even
being scattered with a ceremony in a cemetery’s nature garden or other meaningful location.\textsuperscript{15}

To be clear, cremation does not preclude traditional funeral or burial ritual (Beck and Metrick 2009).\textsuperscript{16} At the same time, regardless of the numerous options available for families choosing cremation, many are increasingly choosing to opt for a simple or direct cremation with minimal or no funeral ritual at all.\textsuperscript{17} A direct cremation typically includes a funeral establishment picking up the deceased body from a nursing home, hospital, or personal residence, attaining the necessary documentation and authorizations, taking the body to a crematory in a rigid cardboard container, completing the cremation, and shipping the cremated remains to the family – all without body preparation, ceremony, or funeral ritual of any kind. The NFDA reports that a direct cremation (i.e. cremation without a final viewing of the deceased and without formal ceremonies) currently accounts for 35% of all cremations in the U.S. with no signs of decline (NFDA Stats 2015:8; The NFDA Cremation Report: 2014:7).

To meet the changing demands of consumer preferences regarding simplified cremations, some state legislatures are issuing new guidelines. For example, the Florida Senate (2011) developed a minimal licensing process in 1979 for deritualized specialists to legally operate in the State of Florida – the direct disposer license. As a result, families living in Florida who chose direct cremations with no funeral ritual or

\textsuperscript{15} A columbarium was a term that described an above ground physical structure with recessed chambers, called niches, designed especially to house cremated remains. In addition to simply retaining cremated remains in urns or other keepsakes at one’s home, some chose scattering options by sea or air (e.g. using boats, balloons, aircraft, pyrotechnic displays). Cremated remains were also made into jewelry, trees, or structures that create a marine water reef.

\textsuperscript{16} In funeral service vernacular, a memorial service was regarded as a ceremony without a deceased body present. Some families who opted for cremation also chose to re-ritualize with a memorial service in order to honor their deceased loved one (i.e. to step outside of a traditional paradigm of a funeral ceremony with the deceased body present followed by a burial in a cemetery) (Sewell 2011).

\textsuperscript{17} Alkaline hydrolysis was an ongoing debatable issue regarding a water and chemical based process of cremation in lieu of the traditional fire-based method (Alkaline 2015). Some argue that alkaline hydrolysis (also known as Resomation® or biocremation) used less energy and created less pollutants than traditional fire-based cremation. Currently, alkaline hydrolysis has not been approved by all states.
burial services captured nearly 20.0% of the cremation market by year 1999 (Chevalier 2011:11). Florida is an important state to consider as it represents a state where cremation is the preferred choice of disposition. In fact, Florida currently cremates more deceased bodies per year than any other state, except for California (CANA 2011:5). Other states who have higher cremation rates than the national average, include Nevada at 73%, Washington 69%, Hawaii at 68%, Oregon at 67%, and Montana at 64% (CANA 2011:5).

The rapid growth in consumer preferences toward direct “no-frills” cremations without funeral or burial services is surprising some funeral directors (Clary 1985), though this trend appears to be consistent with what is happening in the United Kingdom and Canada (Cann 2016:133). For example, the cremation rate in Canada was 58% in 2010 with a projection of 62% by year 2015; similarly, the cremation rate in the United Kingdom was already at 73% in 2010 (CANA 2011:13, 20).

A Brief History of Burial Ritual
What is important to the current research is to recognize that the trend toward deritualization stands in sharp contrast to the ubiquitous practice of funeral ceremony and ritualistic burial occurring throughout antiquity. Acclaimed poet and licensed funeral director Thomas Lynch (1997:24) explains:

\[ \text{The track record was pretty good on this. We'd been doing – the species, not the undertakers!} \]

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18 Though cremation was first discussed in America in the late 19th century (Eassie 1875; Cobb 1892), as late as 1965, the US Cremation Rate was still less than 4%. Currently, some countries have much higher cremation rates than the United States, such as Japan (99.9%), Hong Kong (89.9%), and Sweden (78.6%) (The NFDA Cremation Report 2014). Other countries still have very low cremation rates, such as South Africa (3-6%) (International Cremation Statistics 2011).

19 The term “undertaker” was now both a colloquial and antiquated term once used to designate individuals who had given themselves to the vocation of funeral service. Today, given the professionalization of funeral service, the more accepted term used to identify a funeral professional was “licensed funeral director.” In the United States, the American Board of Funeral Service Education (ABFSE) was the sole accrediting agency recognized by the US Department of Education and the Council on Higher Education Accreditation (CHEA). Licensed funeral directors were governed by individual state laws and regulations. The ABFSE and the International Conference of Funeral Service Examining Boards maintained the National Board Exam recognized by all states and necessary for licensure.
up while digging down, trying to make some sense of all of it, disposing of our dead with sufficient pause to say they’d lived in ways different from rocks and rhododendrons and even orangutans and that those lives were worth mentioning and remembering.

What appears problematic about the current trend toward deritualization is that every culture throughout human history up to the present time has attended to the care and disposition of their deceased, which included funerary ritual and burial ceremony (Laderman 2003:xvi). Taylor explains:

_Increasingly citizens are opting out of any type of ceremony whatsoever and instead are having the body disposed of as expeditiously, simply, and cheaply as possible. This is a fundamental change in centuries-old death care practice that is unparalleled in any other culture...there is no other culture on earth that disposes of its dead without ritual in the way that is gaining popularity in the United States (2011b:6-7)._ 

Kastenbaum (2004:6) maintains that “through the millennia, our ancestors performed rituals both to affirm communal bonds among the living and to secure the goodwill of the resident deities.” Despite the variety of particular funerary practices and religious beliefs in early human societies, the connection between humanity and death rituals has been solid throughout a very long and complex history (Pettitt 2011; Van Gennep 1960). To be sure, death ritual and ceremony appears to be inextricably connected to humanity much farther than even a few thousand years ago. Current interdisciplinary research conducted by experts such as anthropologists, geologists, biologists, and archeologists has now converged upon a generalized consensus – the origins of humanity coincided with a monolithic practice of funeral ritual. Davies (1999:2)

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20 A recent finding in 2013 of fossils at the Rising Star Cave system near Johannesburg, South Africa, provided compelling evidence amid an often ambiguous fossil record of the intimate connection between cognitive ability, complex behavior, and the desire to extend respect to the dead – arguably a hallmark of human characteristics. Homo naledi (i.e. a Sotho term meaning star), a possible new pre-human species, was found to have treated their dead in a ritualistic manner. Prior to this finding, only homo sapiens and possibly some Neanderthals were capable of deliberate disposal of bodies. Accurate dating of the homo naledi was yet to be determined (Shreeve 2015).
explains that as far back as 4500 BC, “the Ancient Near East was covered with death memories and death memorials, and with graves, sepulchers and cemeteries, the repositories of cultural comment on death.” Yet, there is compelling evidence that funeral and burial practices even predate the Ancient Near Eastern findings reported in the Neolithic period. In fact, anthropological studies are replete with reports of human funeral behavior dating back from 11,500 BP\(^{21}\) (Potter, Irish, Reuther, Gelvin-Reymiller, and Holliday 2011) to 24,000-25,000 BP (Formicola and Buzhilova 2004, Alt et al. 1997). Even in the Upper Paleolithic period, approximately 40,000 BP, burial rites and funeral behavior are evident (Formicola, Pontranddolfi, and Svoboda 2001).

A relevant consideration for the current research is the development and nature of these ancient funeral rituals to aid in pastoral care among the earliest hominids. Within this very old history of funerary behavior, anthropologists have identified significant evolutionary shifts occurring within the Paleolithic period.\(^{22}\) First, funeral caching in the Lower Paleolithic period (i.e. Old Stone Age) emerged as early as 500,000 BP, referring to the intentionality given to the structured disposition of a corpse, such as the use of a cave. This quite remarkable funerary practice occurring in both the Lower and Middle Paleolithic periods suggests that structured mortuary activity was a common cultural practice, where early hominids began investing meaning into specific locales for the disposal of the dead (Pettitt 2011:56). Evidence of early funerary caching has been discovered in excavations in the Sima de los Huesos (i.e. Pit of the Bones), Spain. Pettit contends that the repeated disposition of at least 28 different individuals indicate conscious dispositions of the dead “were already in existence around half a million years ago” (2011:57). Yet, it is debatable if these discoveries marked the true beginnings of human history.

\(^{21}\) BP was a common reference in scientific literature denoting years “before present.”

\(^{22}\) The Paleolithic period, also known as the Stone Age, was commonly dated from about 2.6 million years ago to 10,000 BP, including a Lower period from 2.6 million years ago to 300,000 BP, a Middle period dating from about 300,000 BP to 30,000 BP, and an Upper period dating from about 50,000 BP to 10,000 BP.
Perhaps a better starting point for human history, and the subsequent death rituals that appear to be intrinsically human, is found with the rise of a second major development in funerary practices dating approximately 150,000-160,000 BP. Evidence for the ritualistic practice of *defleshing* was discovered in excavations in Herto, Ethiopia (Clark et al. 2003). Defleshing describes the practice of intentional cut marks on the deceased not associated with cannibalism, but more with ornamentation invested with meaning. Defleshing also includes soft tissue removal by very sharp stone tools indicative of mortuary practices. Though the practice of defleshing is not the same as burial, it is conceivable that this development by *Homo sapiens* represents a meaningful ritual for the dead.

The clearest evidence for ancient ritualized funeral and burial behavior is found with the emergence of *inhumation*, the process of creating an artificial location for containing a corpse, as evidenced by the practice of digging a grave and marking the place of burial with stone. For example, excavations of individuals in Skhul and Qafzeh Israel, date around 90,000-120,000 BP. It is likely that the practice of inhumation represents the earliest and clearest evidence for ritualistic burial with personal ornamentation and symbolism that was distinctively human. Pettit explains that by “~120,000 BP at least, funerary practice formed part of the wider cultural repertoire of *Homo sapiens* that includes personal ornamentation” (2011:77).

The point of this brief historical overview of the development of funerary customs is not to resolve the debate over the precise origins of intentional human burial (Harder 2001), but to highlight the fact that ritualistic funeral behavior has been practiced since the beginning of known human history, as far back as 120,000 BP within the Middle Paleolithic period (Lieberman 1991:162-163). To be sure, Lieberman states that “if we assume that the minds of our distant ancestors worked like ours, we can take burials that included grave goods as evidence for religious beliefs that predicate an afterlife, rebirth, or perhaps even reincarnation” (1991:164; Benore and Park 2004). Through extensive archaeological research, scientists have delineated a development pattern in funerary rituals throughout human history, including the advanced practices of funeral caching, defleshing, and inhumation (see Table 1). What is important in the
research is that the grand notion of having a symbolic capacity, such as the ability to perform funeral and burial ritual with personal ornamentation, is a defining characteristic of humanity. In short, funeral ritual and ceremony are an intrinsically human phenomenon designed as an essential means to care for the bereaved.

Table 1: Paleolithic Developments in Human Burial Ritual

<table>
<thead>
<tr>
<th>Date</th>
<th>Funerary Practice</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>~500,000 BP</td>
<td>Funeral Caching</td>
<td>The intentional structured disposition of a corpse in a cave.</td>
</tr>
<tr>
<td>~150,000-160,000 BP</td>
<td>Defleshing</td>
<td>Intentional ritualistic cut marks and soft tissue removal on a corpse not associated with cannibalism but more with ornamentation.</td>
</tr>
<tr>
<td>~90,000-120,000 BP</td>
<td>Inhumation</td>
<td>The process of creating an artificial location for containing a corpse, as evidenced by digging a grave and marking the place of burial with stone.</td>
</tr>
</tbody>
</table>

The research seems to indicate that funeral ritual is as old as humanity itself. Moreover, these rituals and burial practices are connected to human consciousness as meaningful, and perhaps even necessary. Laderman (2003:xvi) explains:

*The final ceremonies that accompany a corpse’s disposal, as well as its preparation for these ceremonies and the manner in which it vanishes from living society, reveal a great deal about the animating cultural values and integrating social principles at work in any particular community.*

If final ceremonies truly reveal a great deal about society, what does a dearth of final ceremonies signify? A significant question is, of course, what happens if a preponderance of human beings decide that death rituals are no longer of value or helpful for bereavement care and spiritual well-being? There appears to be a paucity of research on the anthropological and spiritual consequences of the deritualization of death. Nevertheless, Kastenbaum (2004:5-6) describes the seriousness of the very recent trend towards deritualization of funeral behavior:
The spiritual health of a society can be evaluated by the vigor with which it continues to perform its obligations to the dead. Something crucial to the survival of a society is endangered when the living are unwilling or unable to continue customs and rituals intended to regulate relationships with the dead.

1.2 Problem Identification

The current study maintains that the deritualization of funerary practices is a growing interdisciplinary concern for pastoral caregiving of bereaved human beings (Bregman 2010:xvii). For numerous complex reasons, including the secularization of life (Marsden and Longfield 1992), the rising prices of traditional funerals in today’s ever-tightening economy (Bern-Klug, Ekerdt, and Wilkinson 1999), and increased environmental sentiments to better preserve the earth (CANA 2011), consumer preferences regarding the ritual care for the dead are changing. Within these changing perceptions of funerary customs and services, there is indeed a growing segment that prefer minimizing or even removing ritual and ceremony from funeral and burial practices. The consequences and implications of deritualizing death are largely unknown. At the same time, Taylor argues:

Not only can there be psychological harm to those most closely affected by the death because of unresolved grief; on a broader and longer-term level, there is a risk that the complete cultural record of this period of history will be lost due to the elimination of funerary artifacts (2011b:10).

A National Funeral Directors Association 2012 Consumer Awareness and Preferences Survey (Gillespie and Defort 2012)\textsuperscript{23} explains that fifty-four percent (54%)
of the respondents prefer cremation, and only twenty-two percent (22%) prefer burial, compared to a 2004 national consumer study where forty-three percent (43%) prefer cremation and forty percent (40%) prefer burial. Even more telling is that only sixteen percent (16%) of respondents in 2012 indicated a preference for a viewing, visitation, and/or a funeral service prior to a cremation, contrasted with twenty-nine percent (29%) in a similar study in 2004 (see Table 2).

Table 2: Changing Consumer Preferences for Cremation

<table>
<thead>
<tr>
<th>In planning your own funeral, which do you prefer?</th>
<th>2012 Consumer Study</th>
<th>2004 Consumer Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cremation</td>
<td>54%</td>
<td>43%</td>
</tr>
<tr>
<td>Burial</td>
<td>22%</td>
<td>40%</td>
</tr>
<tr>
<td>Not Sure or Other</td>
<td>24%</td>
<td>17%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If cremation, would you still wish to have a funeral service with a viewing and visitation prior to cremation?</th>
<th>2012 Consumer Study</th>
<th>2004 Consumer Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>16%</td>
<td>29%</td>
</tr>
<tr>
<td>No</td>
<td>57%</td>
<td>47%</td>
</tr>
<tr>
<td>Not Sure / No Preference</td>
<td>27%</td>
<td>24%</td>
</tr>
</tbody>
</table>

Most reports contend that as burial rates continue to plummet, cremation rates will continue to steadily rise (NFDA Stats Report 2015). In 2010, there were 2,458,022 deaths of which 998,547 were cremated (CANA 2011:8). And of the nearly one million families who chose cremation, many preferred minimal or no funeral services at all. This increase in cremation preference is the most significant change in U.S. mortuary customs in the past 50 years (Lucas 2010; Decker 2007). At the same time, the study notes that a choice for cremation does not necessarily imply deritualization. In fact, cremation as a mode of disposition of a deceased human body, is a ritual in and of itself – cremation is an intentional act to dispose of a deceased body, and can be administered with great respect, dignity, and participatory ritual.24 However, the

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24 Cremation as a simplified mode of body disposal can open the door to new and creative forms of ritualization that bring much meaning and comfort to bereaved families and friends, such as interacting in virtual (i.e. private) spaces like on-line tributes from funeral home websites, social media platforms like Facebook, and even live streaming of funeral ceremonies from the privacy of one's home or office (Cann 2016; Geraci 2014; Stacey 2007).
cultural shift toward cremation, with the possible danger of becoming a quick and instant approach to death and dying changes perceptions on our being human (an anthropological problem), as well as the meaning, significance, or purposefulness of life (a spiritual problem). The issue with deritualization is not merely death and different forms of burying, but how bereaved families understand life and the spiritual realm of life. Thus, there is great motivation to explore the impact of deritualization, cremation, and how it is performed on processes of mourning and bereavement.

The cultural trend toward deritualization represents an unprecedented move in human history that warrants serious consideration and study among pastoral caregivers. Hence, there is an apparent concern for the negative effects deritualization may have on normative grief adjustment. What needs to be clear, however, is that although the full impact of deritualization on human and societal well-being is currently unknown, the current study does not attend to the causality of deritualization, but to an exploration of an adequate pastoral response to bereaved human beings within the context of cultural conditions through which deritualization emerged and proliferated.

To consider the problem of pastoral care amid a culture that fosters deritualization, it is helpful to examine perspectives across several disciplinary fields. Repko (2008:4) explains that a “discipline is a particular branch of learning or body of knowledge whose defining elements – i.e., phenomena, assumptions, epistemology, concepts, theories, and methods – distinguish it from other knowledge formations.” At the same time, Repko acknowledges that some “disciplines may be considered part of one category at one university but belong to a different category at another” (Repko

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25 In America, there is a general consensus of disciplinary categories. The National Academy of Sciences organizes academic disciplines in terms of the life sciences, physical sciences and mathematics, engineering, social and behavioral sciences, and the arts and humanities (including religion and theology) (see National Academy 2006). The undergraduate programs of Princeton University organize their 34 departments into the humanities, social sciences, natural sciences and engineering (see Princeton University 2015). Allen F. Repko, a leader in the field of interdisciplinary studies (i.e. former director at the University of Texas, coeditor and board member of the Association for Interdisciplinary Studies (AIS)), classifies the disciplines as the natural sciences (e.g. biology, chemistry, physics, mathematics), the social sciences (e.g. anthropology, economics, psychology, sociology), applied professions (e.g. business subfields, nursing, criminal justice, education, engineering, law, medicine), the fine and performing arts (e.g. art, dance, music, theater), and the humanities (e.g. history, literature, philosophy, and religious studies) (Repko 2008; Repko 2014).
Chapter 1: Problem Identification

2014:94). Though an official taxonomy of disciplines may be debated among academicians, three traditional disciplinary domains of study appear particularly well-suited to examine the problem of deritualization on grief adjustment – the applied professions, the social sciences, and religious studies.

In the broad disciplinary domain of the applied professions, the field of funeral service is uniquely positioned to provide much insight into the actual context of the problem, as funeral practitioners are faced daily with responding to changing expectations of families facing the death of a loved one. In the broad disciplinary domain of the social sciences, the field of grief and bereavement psychology is essential to surface current theories on how deritualization may threaten or disrupt grief adjustment in individuals. In the broad disciplinary domain of religious studies, practical theology is a promising academic field of theology to elucidate possible trajectories that may map the way forward in terms of pastoral care dealing helpfully and constructively with the bereaved, including the effects of deritualization on communities. In fact, pastoral caregiving, recognized as a sub-discipline within the field of practical theology, provides the basis in the study for a theological approach to caregiving in order to engage the normative event of death with pastoral outcomes of healing and wholeness for the bereaved in view.

1.3 Research Problem

What needs to be made clear is that deritualization represents the current cultural ethos of bereaved families facing the loss of a loved one in the United States today. Deritualization does not mean that there is a total loss or demise of all death rituals per say. Instead, deritualization is a helpful term to denote a developing cultural

26 Repko explains: “It is important to note that for administrative reasons, universities pretend that the boundaries between the social sciences and the humanities or between the social sciences and the natural sciences are clear, but in reality they are fuzzy” (Repko 2014:94).

27 In Repko’s taxonomy, representative of the American context, religious studies is a sub-discipline of the humanities and “includes theology, which understands a religion from an insider’s (i.e. believer’s) perspective, but also draws on history, philosophy, anthropology, and literature to understand the religion from an outsider’s perspective” (2008: 76). Repko explains that one key assumption of the discipline “is that there is something inherently unique about religion and those who study it must do so without reducing its essence to something other than itself, as sociologists and psychologists tend to do” (2014:111).
openness to revise, replace, minimize the significance of, and even avoid established funeral rites of the dead. Deritualization describes the prevailing mode of thinking regarding contemporary responses to death. In this way, what do various disciplinary fields offer caregivers in understanding the challenges of contemporary bereavement care? Also, how can the learning be appropriated to assess and improve educational training programs of bereavement caregivers to respond to the current social trends regarding death, dying, and burial? Furthermore, in the interplay between the human dimension of mourning and the sacred quest for meaning, can a practical theology of compassionate caregiving for the bereaved emerge in order to deal with new forms of ritualization, even the tendency to opt for cremation rather than merely the traditional forms of burial? Such important questions give rise to the current research problem.

To state the research problem succinctly: For bereavement caregivers, the current cultural shift toward deritualizing death is a multifaceted concern that may inhibit grief adaptation and adjustment among the bereaved. The research is therefore designed to elucidate a deeper understanding of bereavement caregiving in order to better address the pastoral needs of those who have experienced death amid a cultural climate that supports deritualization. As such, the research proposes to examine bereavement caregiving from an interdisciplinary pastoral perspective that triangulates three domains of knowledge to produce multiple angles or perspectives on the research problem.

- Funeral service, as an applied profession, will surface a perspective of bereavement care and the problem of deritualization from the concern of an industry with new challenges regarding the connection between death, dying, and spirituality.
- The psychology of grief and bereavement, as a social science, will surface a perspective on the problem of deritualization from the concern of the mental health of individuals facing acute grief in the earliest stages of bereavement.
Practical theology, as a field of religious and theological studies, will surface a perspective of bereavement care and deritualization as related to the function of communities of faith during times of severe loss and grief.\(^{28}\)

The research problem is therefore broadly organized for study around the concerns and mutual interplay between the professional industry of funeral service, the mental as well as spiritual well-being of individuals and the perceptions of loss and mourning, and the pastoral ministry to families as an outcome of effective caregiving and comfort emanating from the church as the body of Christ (i.e. *koinonia* as a mode of comfort and compassion). The organization of the research is designed to explore the connection between grief, farewell, rituals, and meaningful separation from the deceased in an effort to give shape to a theological paradigm for compassionate caregiving and a religious-spiritual perspective on bereavement as an inherent component of grief care.

**The Funeral Service Industry**

First, deritualization is notably a large problem for the funeral service profession – a multi-billion dollar industry in the United States, due in part to the reduction of net profit margins that threaten sustainability, also known in business vernacular as the “bottom line.” Direct cremations and direct burials obviously do not carry the same profit margins as traditional funerals that include a casket, ceremony, funeral vehicles, and an outer burial container. Also, as people begin utilizing specialized “cremation only” businesses over traditional funeral homes, service call volume (i.e. the number of families assisted by a traditional funeral home per year) is threatened and may even decrease over time (Mignat 2014).

Funeral directors are known for being ritual specialists; however, if the trend continues where more and more people choose to bury or cremate without ceremony, or even conduct ceremonies void of professional assistance, job duties for funeral directors will change considerably. Yet, are funeral service professionals adequately prepared

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\(^{28}\) As an important clarification, in South Africa as well as some universities and seminaries in Europe, practical theology is rendered as a specific discipline of theology instead of the more generic field of religious studies, as reported in many American academic contexts (Cilliers 2007).
to address the needs of a newer and growing segment of the population who have chosen not to participate in the death rituals of old? Do funeral directors truly understand the latest science of bereavement and how it may combat the problem of deritualization? In an industry typically marked by materialistic aims and quantifiable metrics, what is the pastoral dimension for funeral directors who may act without showing sufficient compassion towards the requests of families?

**The Mental Health of Individuals**

Second, deritualization is also a problem for the mental health profession as bereaved individuals who choose to bypass long-standing behaviors of funeral and burial practices may not receive adequate support they need to effectively integrate the loss of a loved one into their lives. Again, what is the pastoral implication of deritualization on bereavement care? Is deritualization having a negative impact on grief adjustment? This appears to be a provisional proposition as deritualization may unwittingly discourage the importance of adequately marking the occasion of the loss of a loved one and mobilizing a supportive community for healing. As a result, deritualization is possibly having a negative, albeit unintended, effect on psychological well-being and spiritual wholeness.

Bereavement theorists and clinicians have long based their research and assumptions on the normative practice of transitional rituals. Nevertheless, if deritualization continues to trend and proliferate, how will the mental health profession, including specialists in bereavement care, respond? What effects do the problem of the deritualization of death have on the psychological well-being of families and individuals attempting to cope with the realities of loss?

**The Pastoral Care of Community**

Third, deritualization is a complicated problem for practical theology as well, as distrust continues to grow toward the institutional church. Gallup (2012) reports that following a long-term decline in American’s confidence in religion since the 1970’s, only forty-four percent (44%) of Americans today have a great deal or quite a lot of confidence
in the church or organized religion – an all-time low in recent history.\textsuperscript{29} As fewer people are integrated within an institutional religious network that provides regular and ongoing pastoral care for themselves and their family, the church needs to examine the needs of the growing number of people outside of their own local fellowships who are experiencing grief from the death of a loved one.

Deritualization may further contribute to the breakdown of community – a larger problem facing many cities and towns in the United States today (Rainer and Rainer 2011; Block 2009; Putnam 2000). Even within local church and religious communities, deritualization is a serious problem, as some people of faith are ill-equipped (or at least are not be persuaded of the value and necessity) to provide adequate community support and care to one another when facing death without engaging in meaningful transitional ritual. Are pastors equipping their congregations to properly aid in the caregiving of their own bereaved? Are pastors themselves understanding the latest science of bereavement in order to better prepare their congregations for ministry to the bereaved? What would new, more effective forms of ritualization look like?

Fortunately, the field of practical theology offers much promise in the research of changing funeral behavior and the problem of deritualization, especially in the area of pastoral care (Gerkin 1997). In contrast to the more cognitive based theological studies, such as biblical, systematic, and historical theologies, practical theology is a powerful academic field of study that is designed to examine the reflective practice of theology in life and the interplay between spirituality and loss experiences. The more rationalistic and contemplative aspects of theology necessarily begin in the biblical text, with a trajectory aimed at orthodoxy, or right thinking or opinion. Practical theology, however, has a point of departure in real-life and real-world social problems, with a trajectory aimed at orthopraxis, or the efficacious practice of faith (Browning 1996). As such, practical theology recognizes that Christianity is not primarily about belief or a set of propositions; rather, it is “embedded in a community of practices that make those beliefs themselves work and give us a community by which we are

\textsuperscript{29} It is not surprising, given these numbers reported by Gallup, that the NFDA reported similar findings of declining interest in having religious services to cope with death (Gillespie and Defort 2015).
shaped” (Swinton and Mowat 2011:4). To operationalize the term “practical theology” as an important and distinct academic discipline, a provisional definition is helpful:

**Practical theology is critical, theological reflection on the practices of the Church as they interact with the practices of the world, with a view to ensuring and enabling faithful participation in God’s redemptive practices in, to and for the world** (Swinton and Mowat 2011:6).

Practical theology is not just a mental assent to cognitive beliefs; practical theology is more of an embodied act. As an increasingly significant field emerging in religious and theological studies, practical theology encourages Christian practices that are consistent with the overarching timeless narrative of the gospel of Jesus Christ as the Christian faith is lived and integrated within human experiences (Copan and Litwak 2014; Miller-McLemore 2012). Death is obviously one of the more transformative events humans experience. Therefore, the field of practical theology is particularly helpful to frame the current research within a Christian faith-based perspective. Practical theology will also be key in developing an improved paradigm for compassionate bereavement care, an overarching goal of the research.

**The Dynamics of Education in Training Bereavement Caregivers**

In addition to delimiting the scope of the research to the fields of funeral service, bereavement psychology, and practical theology, the study recognizes the essential role that education plays in the training of bereavement caregivers (i.e. funeral directors and vocational pastors). As such, in order to truly improve the practices of bereavement caregivers, it will be necessary to explore the educational dynamics common in the training of funeral directors and pastors. To this end, the study is

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30 Biblical theology traced the development of a biblical author’s understanding of particular theological ideas, such as a Pauline or Johannine view of ecclesiology. Systematic theology organized doctrinal ideas under certain standardized theological categories, such as theology proper, Christology, pneumatology, bibliography, anthropology, hamartiology, ecclesiology, soteriology, and eschatology. Historical theology often traced the development of specific doctrines across Christian history. Though the current study takes a practical theological approach to the research problem, it is surmised that other branches of theology could offer valuable insights to improve twenty-first century bereavement care through further follow-up studies. Attention is given to ecclesiology in Chapter 5 to demonstrate how funeral directors and local churches can co-construct funerals together (Kelly 2008).
designed to address specific research questions that will increase understanding of both (1) the perspectives of bereavement caregiving among multiple disciplines, as well as (2) the dynamics of caregiving education among bereavement practitioners (i.e. funeral directors and vocational pastors).

**1.4 Research Questions**

A comprehensive framing issue for the research is the rather unknown impact of deritualization on the interplay between loss, bereavement, and the spiritual realm of coping (i.e. a concern for the internalization of loss within the existential realities of life). To address this fundamental concern, the study proposes that specific research questions need to be raised to facilitate a learning process that may improve bereavement caregiving specifically among funeral directors and vocational pastors. Research questions will therefore be linked to the basic question regarding both the role of the funeral director and vocational pastor in processes of mourning, specifically during the time of the severe impact of loss (a phase of shock, emotional turmoil, uncertainty and confusion). It is during this phase that vocational pastors and funeral directors should follow a team approach in order to support family members in fundamental decision-making regarding possible rituals that will facilitate sound processes of healing through times of loss and mourning.

Of particular importance to the researcher is the possibility of integrating knowledge from multiple perspectives in deathcare and then subsequently transferring that learning to assess educational programs designed to equip funeral directors and vocational pastors. That is, what does an informed interdisciplinary perspective of bereavement caregiving entail, especially with regard to the growing problem of deritualization? Further, based upon an interdisciplinary understanding of bereavement, how may funeral directors and vocational pastors improve the educational training needed for effective care, given a cultural context being shaped by deritualization? The current study addresses these concerns by exploring six (6) specific research questions. The first two (2) research questions will explore the development of disciplinary perspectives to bereavement caregiving, and then attempt to integrate the multiple perspectives to create informed interdisciplinary insights. The
remaining four (4) research questions will examine the dynamics of caregiving education for funeral directors and vocational pastors aimed at improving pastoral care for the bereaved (see Table 3 below).

**Table 3: Organizing the Research Questions**

<table>
<thead>
<tr>
<th>Perspectives of Bereavement Caregiving</th>
<th>Dynamics of Bereavement Caregiving Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>The “What” of Pastoral Bereavement Care Among the Disciplines of Funeral Service, Bereavement Psychology, and Practical Theology</td>
<td>The “How” of Pastoral Bereavement Care Among the Educational Programs of Funeral Directors and Vocational Pastors</td>
</tr>
</tbody>
</table>

**Perspectives of Bereavement Caregiving**

1: *What do the multiple disciplinary fields of funeral service, bereavement psychology, and practical theology add to a conceptualization of bereavement caregiving, given the current cultural shift toward deritualization?*

2: *What insights emerge from integrating current developments in funeral service, bereavement psychology, and practical theology, that shape an interdisciplinary conceptualization of bereavement caregiving?*

**Dynamics of Bereavement Caregiving Education**

3: *How do caregiving education models frame the goals and objectives of grief and bereavement care?*

4: *How do caregiving education models understand the context of needs facing today’s bereaved families?*

5: *How do caregiving education models integrate current bereavement research to shape directives of care?*

6: *How do caregiving education models implement rituals that meaningfully address the changing social/cultural dynamics of the bereaved?*
These are the six (6) key research questions that the current study seeks to address. The researcher hopes that the critical discussion of these questions may inform an improved paradigm for compassionate bereavement care – in short, a practical theology of caregiving for the bereaved. In addition, the intention of the research is to revisit the field of ritualization based upon the findings of the study. The researcher also wants to explore new avenues for ritualization in order to connect the notion of spiritual care and healing to the complex phenomenon of grief and mourning. For example, what new options do technology open for re-ritualization (e.g. the internet and on-line virtual communities as safe places for mourning)? Although this will not be the main focus of the research, attention will be given in the conclusion (Chapter 5) to alternative forms of ritualization in order to deal with ritualization as a networking and systemic issue within the dynamics of human relationships and interculturality.

The nature of the specific research questions above must determine the methodological approach for the current study (Agbiji 2013:10). Yet, before a clear methodology can be formed, consideration must be given to both the assumptions and objectives of the research.

1.5 Research Assumptions

All research encompasses some form of presuppositions and assumptions intrinsic both to the researcher as well as the problem of inquiry. Especially in the social sciences, humanities and religious studies, total objectivity is not possible, nor is it sought (Schutt 1999; Flyvbjerg 2001). Instead, research assumptions are typically delineated in advance in an effort to provide explanatory disclosure significant to the approach, trajectory, and development of the research.

To this end, the researcher as a licensed funeral director and a Christian scholar-practitioner, could not remove all bias and personal perspective from the given inquiry. At the same time, it is necessary to disclose fundamental assumptions that may

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31 Re-ritualization is operationalized for the study as an important term to describe an intentional act of restoring and reengaging in creative and meaningful ritual forms that give symbolic expression to significant thoughts and feelings of the bereaved within a social ethos that is no longer committed to a conventional or fixed approach to ritualization.
threaten the validity of particular research findings and interpretive conclusions. In the current study, the researcher acknowledges that the need for inquiry regarding the deritualization of death is predicated upon three important assumptions: the interconnectivity of ministry, the theoretical foundation of interdisciplinarity, and the conceptualization of distinct Christian interdisciplinary research (Hunsinger 1995).

**The Interconnectivity of Ministry**

The first significant assumption of the current study is that the ministry of pastoral care, at its deepest roots and in its broadest forms, is interconnected (Osmer 2008:15). From the viewpoint of practical theology, the interrelatedness of a ministry in pastoral care is described as a web of life. Osmer explains (2008:16): “just as the strands of a spider’s web are interconnected, so too are the bonds that link individuals, families, congregations, communities, and larger social systems.” Utilizing a broad and interconnected view of ministry, the study operationalizes the term “pastoral” not to refer to a person of a religious order necessarily, but to a motivation or attitude characterizing caregiving ministry (Mills 1990:836). The study argues the matter plainly: “ministerial tasks are part of an interdependent whole” (Osmer 2008:17).

Despite the professionalization of funeral service, both in terms of being a significant business industry and as a vocation with specific educational standards for licensing in the modern world, the research assumes that funeral service practitioners perform a vital ministry of caregiving to those facing the loss of a significant other. In deference to the current research questions proposed above, an important assumption is made that licensed funeral directors, like congregational leaders (Thesnaar 2010:266-267), both share a common core ministry to the bereaved in the web of life. As such, there is a fundamental congruency between funeral directors and congregational leaders.

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32 One biblical view for this broad interconnected perspective of ministry in lieu of the more traditional clerical paradigm was found in Ephesians 4. The Apostle Paul argued that ministry was not relegated to pastors and teachers alone; ministry extended to the whole congregational life of the church, both in terms of discipleship and to the church’s mission to the world (Andrews 2010; Grenz 2000). Ephesians 4:11-13 stated: “The gifts he gave were that some would be apostles, some prophets, some evangelists, some pastors and teachers, to equip the saints for the work of ministry, for building up the body of Christ, until all of us come to the unity of the faith and of the knowledge of the Son of God, to maturity, to the measure of the full stature of Christ” (NRSV).
with respect to the interconnected ministry of pastoral care to address the needs of the bereaved (see Figure 4 below).

![Figure 4: The Interconnectedness of Ministry](image)

**The Theoretical Foundation of Interdisciplinarity**

A second significant assumption of the current study is that the deritualization of death is a legitimate social problem best approached through an interdisciplinary lens (Repko 2014). To attain a better understanding of the problem of deritualization, the research assumes that one disciplinary perspective alone is inadequate. Multiple disciplines are affected by deritualization. Nevertheless, it is argued that deritualization is notably relegated as an in-house issue important primarily to funeral service practitioners, and largely ignored by other fields of study. The current inquiry however assumes that not only is funeral service affected by deritualization, but that the academic fields of bereavement psychology and practical theology share in the concern as well, due to the potential broad effects that are still largely unknown. In short, deritualization is more than a concern limited to the funeral industry.

If in fact the problem of deritualization affects multiple fields of study, does that necessitate an interdisciplinary approach to the research? The proposed study assumes that interdisciplinary research (IDR) is often hailed as the hallmark of contemporary knowledge and is best suited for addressing complex social problems, such as the deritualization of death. Though admittedly there are disagreements over defining the nature and extent of IDR, a broad-based consensus has emerged from a
variety of prominent scholars and professional organizations, such as the National Academy of Sciences, the National Academy of Engineering, and the Institute of Medicine that provides a solid common factors approach to interdisciplinarity appropriate for the current research. (Repko, Newell, Szostak 2012:xvii). Repko (2008:12) provides a broadly accepted operational definition for IDR that is helpful for the current study:

*Interdisciplinary studies is a process of answering a question, solving a problem, or addressing a topic that is too broad or complex to be dealt with adequately by a single discipline and draws on disciplinary perspectives and integrates their insights to produce a more comprehensive understanding or cognitive advancement.*

The logic of interdisciplinary studies is that integrating the insights from two or more disciplines produces greater insights into the problem of inquiry over a single disciplinary framework. The knowledge domains delineated for the current study aim at effective bereavement caregiving and assume that triangulating integrated-disciplinary insights from the fields of funeral service, grief and bereavement psychology, and practical theology will provide a better understanding of deritualization than if a single disciplinary perspective is pursued alone (see Figure 5 below).

![Diagram of Bereavement Caregiving](image)

*Figure 5: Effective Bereavement Caregiving*
The Conceptualization of Christian Faith-Informed Interdisciplinary Research

A third major assumption of the current study is the desire to conceptualize the problem of deritualization in terms of Christian faith-based IDR. To be clear, the inquiry into the problem of deritualization is aimed not only at an interdisciplinary understanding of the subject, but a Christian faith-based interdisciplinary understanding. Root explains that “interdisciplinarity is the organized or conceptual articulation of how two or more distinctive disciplines enter into conversation so that the integrity of both is maintained and yet theory construction can be born from within their generative conversation” (2014:272). Root’s depiction of interdisciplinarity is important for the current study as a means to open the door for a possible theological paradigm for compassionate caregiving for the bereaved to emerge. Of course, it is noted that there are a variety of Christian perspectives on the particular grammar of interdisciplinarity and how it should be done in practice. For example, there are significant differences within a correlation approach to interdisciplinarity as to the degree of commitment that should be extended to how the questions of culture are correlated to the epistemology of the divine. While Tillich’s correlational approach is centered in ontological terms, aiming at a trajectory of providing theological answers to deep questions of culture, a revised critical correlation approach of Browning and Miller-McLemore brings more flexibility to epistemology while rejecting Tillich’s deep commitment to ontology (Root 2014:275). Though a Tillichian approach can be criticized as being potentially epistemologically naïve, at the same time, a revised

33 Within various perspectives of Christian interdisciplinary research (Root 2014), the issue was not necessarily a debate over the concept of truth at an ontological level (i.e. the actuality of truth), but at an epistemological level (i.e. how truth may be actually apprehended). One area for further development in the quest for an adequate paradigm for Christian IDR is the contrast between consilience as a concept in interdisciplinary thought (Slingerland and Collard 2012; Wilson 1998) and divine concursus within a Christian interdisciplinary approach (Ward 2014; Reichard 2013).

34 Particularities of Christian interdisciplinarity can be viewed as a continuum of extremes, with the revised critical correlational view on one end and the Chalcedonian method on the other end. A revised critical correlational view, shaped in part by Tillichian thought, is criticized for potential tendencies toward antirealism. The Chalcedonian view, shaped in part by Barthian and neo-Barthian perspectives, apply the fourth-century Council of Chalcedon’s commitment of the divine and human natures of Jesus to the epistemologies of theology and the social sciences, suggesting that interdisciplinary conversations must occur without separation or division. In this way, a Chalcedonian approach is criticized for potential tendencies toward foundationalism. Don Browning and Bonnie Miller-McLemore may best represent the revised critical correlational approach and T.F. Torrance, James Loder, and Deborah van Duesen Hunsinger may best represent the Chalcedonian view.
correlational view can be criticized for its basis in antirealism. For the purpose of the current study however, a correlational approach is not favored. Instead, the interdisciplinarity is aimed at leading to ministerial action toward the needs of the bereaved, moving into a form of ministry that “attends to [a] divine and human encounter” (Root 2014:280). For this reason, the Christian approach utilized in the current study is best represented by the perspective of a ministerial transversal rationality.\footnote{The origins of transversal rationality may be attributed to the philosophy of Calvin Schrag (1999) and Wentzel van Huyssteen (1999).} To be clear, the study centers on the interplay between ministry and interdisciplinarity. In contrast to the critical correlation view, the interdisciplinarity utilized in the current study presupposes that disciplinary fields will overlap or transverse with other fields. For example, the researcher assumes that the perspectives of funeral service, bereavement psychology, and practical theology will all transverse and depart at several points. This is not a weakness of interdisciplinarity, it is a strength. Interdisciplinarity will occur at the convergence of these particular locales of thought, as each discipline presents its best account of reality, given its preferred epistemology. Root (2014:286) explains that within the perspective of ministerial transversal rationality:

\begin{quote}
The need for interdisciplinarity is not bound in the ideologies of culture (critical correlation) or the strict tradition of doctrine (Chalcedonian), but in reality itself, for reality is always more than any mind, system, discipline, or field can know in itself.
\end{quote}

To conceptualize the research in terms of Christian IDR, an adequate framework is needed. The study chose the Oxford Interdisciplinary Research (Oxford IDR) model to guide and frame the research (see Figure 6 below). The Oxford model is useful to address real-world social problems from a Christian point of view. The study noted that the Oxford model also stands in solidarity with the particularities of a ministerial
transversal rationality that are important for the development of learning in the current research.36

![Oxford Interdisciplinary Research Model](image)

**Figure 6: Oxford Interdisciplinary Research Model**

The Oxford IDR model begins with Stage 1: Need for Inquiry. In this first stage of the research, a person of faith recognizes a particular real-world social problem that warrants research from a Christian-based interdisciplinary perspective. Stage 2: Hermeneutics and Literature Review guides the research through two or more disciplinary domains in order to gain multiple disciplinary interpretations of the research problem. Stage 3: Faith-Learning Integration unites biblical and theological insights from a Christian faith tradition with the integrated insights from the other

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36 The Oxford IDR model was first developed as grounded theory by David C. Ward and C. Lynn Gibson for a doctoral program at Oxford Graduate School’s the American Centre for Religion and Society Studies, Dayton, Tennessee, 2008 (see Ward 2009: Ward/Gibson Curricular Integration Process Diagram). A further iteration of the model was developed subsequently that was referred to as “Learning...to Change Your World: Interdisciplinary Faith-Learning Integration for Social Change” (Ward 2014). For a critical review of the Learning to Change model, see William D. Dennison’s *For a Better World?* (Dennison 2014:57-72). The Oxford IDR model was referenced as the American Centre for Religion and Society Studies in the *Encyclopedia of Christian Education* as an extension of the long influence Oxford University has as a model for Christian education (Ward and Reichard 2015:914-916).
disciplines in Stage 2 in order to develop a Christian understanding relative to the research inquiry. Stage 4: Christian-Based Interdisciplinary Research synthesizes integrated insights to create a comprehensive Christian worldview perspective developed through Stages 1-3 in order to convert the original inquiry into a formal research problem or question for examination using whatever qualitative, quantitative, or mixed methods are warranted by the research. Stage 5: Critical Contextualization is the process of communicating the culminated Christian interdisciplinary research in a way that makes a case for change credible to those within the context of the research area that are facing inadequate alternatives. Stage 6: Ethical Social Orthopraxis is the world-changing application of the Christian interdisciplinary research in its ethical and social dimensions. Finally, Stage 7: Life-long Learning Evaluation examines the application of the Christian interdisciplinary research in order to surface obstacles to orthopraxis, identify new questions, and continue the process of lifelong learning.

What is important to the current study is that the Oxford IDR model is commensurate with standard approaches to interdisciplinary research with one key exception. The Oxford IDR model is designed to guide interdisciplinary research toward faith-informed orthopraxis within a Christian framework. As such, a fundamental research assumption in the current study is that interdisciplinarity is shaped and sharpened by Christian thought and practice.

Table 4 below demonstrates the solidarity of the Oxford IDR model as compared with other common non-sectarian approaches to IDR. Repko (2008) utilizes a 10 step model for interdisciplinary research; Szostak (2002) and Newell (2001) prefers a 5 step approach to IDR. The Oxford IDR model is clearly validated as a reasonable model for interdisciplinary research specifically designed for Christian scholar-practitioners doing faith-based research in religion and society.

37 The Association for Interdisciplinary Studies, a professional organization founded to promote interdisciplinary interchange among scholars and practitioners, reported the emerging consensus around the purpose and logic of interdisciplinary research advanced by Repko, Szostak, and Newell (Pluzhenskaya 2012:1).
Table 4: Comparison of Interdisciplinary Research Models

<table>
<thead>
<tr>
<th>Repko 10 Step Model of IDR</th>
<th>Szostak and Newell 5 Step Model of IDR</th>
<th>Oxford 7 Step Model of IDR</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. State the problem or focus</td>
<td>1. Identifying an interdisciplinary research question</td>
<td>1. Need for inquiry on a social problem</td>
</tr>
<tr>
<td>2. Justify using an interdisciplinary approach</td>
<td>2. Identify relevant phenomena, theories, methods, and disciplines</td>
<td>2. Hermeneutics and literature review</td>
</tr>
<tr>
<td>4. Conduct the literature review</td>
<td>4. Find common ground across disciplinary insights</td>
<td></td>
</tr>
<tr>
<td>5. Develop adequacy in each relevant discipline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Analyze the problem and evaluate each insight into it</td>
<td>5. Reflection, testing, and communication of results</td>
<td>4. Christian IDR</td>
</tr>
<tr>
<td>7. Identify conflicts between insights and their sources</td>
<td></td>
<td>5. Critical Contextualization</td>
</tr>
<tr>
<td>8. Create or discover common ground</td>
<td></td>
<td>6. Ethical/Social Orthopraxis</td>
</tr>
<tr>
<td>10. Produce an interdisciplinary understanding and test it</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

There are several obvious commonalities between the Repko, Szostak and Newell model and the Oxford model, such as the identification of a research problem, the interpretation of literature within two or more disciplinary domains, the evaluation and integration of insights, and the practice and evaluation of the informed interdisciplinary understanding toward the research inquiry. At the same time, what is not as explicit is that each model assumes that the IDR process is both *iterative* and *reflexive*.

The *iterative* process of IDR recognizes that the nature of research is often procedurally repetitive, involving “repetition of a sequence of operations yielding results successively closer to the desired outcome” (Repko 2008:139). The *iterative* nature of IDR objects to linear and apodictic conclusions. Instead, researchers are encouraged to “revisit earlier steps as they perform later steps, alter the question as new information is uncovered, embrace additional theories and methods as the limits of the first ones chosen become apparent” (Repko, Newell, and Szostak 2012:9). What should be clear is that insights drawn from one discipline do not take precedence over the insights drawn from another discipline. Instead, disciplinary domains inform each other.
Chapter 1: Problem Identification

IDR also assumes a reflexive process, as researchers are self-conscious of disciplinary or personal bias that may influence the decisions about which insights to accept and which ones to discard (Repko 2008:139). To be sure, generally accepted interdisciplinary research makes note of the proclivity for researchers to introduce personal bias and presuppositions into the research, and therefore seeks to be conscious of how this proclivity may threaten research validity.

The Oxford IDR model stands in solidarity with the generalized assumptions regarding the iterative and reflexive nature of IDR. As such, the Oxford IDR model carries these assumptions forward to faith-learning integration as well. To produce a cognitive development from a Christian-formed interdisciplinary perspective (i.e. advance an understanding, explain a phenomenon, solve a problem, create a product, or raise a new question), the researcher is aware of the sociology of knowledge as it pertains not only to the secular or non-religious based disciplinary domains of knowledge pertinent to the research, but also to the specific faith-tradition utilized in the research (Berger and Luckman 1966). Browning contends that “even our religious practices have theories behind and within them” (1996:6). Given the iterative and reflexive processes of interdisciplinary research, the researcher acknowledges that faith-informed knowledge may affirm, supplement, and challenge disciplinary knowledge (Harris 2004:236-241; Harris 2014). At the same time, disciplinary knowledge may affirm, supplement, and challenge faith-informed knowledge. Christian IDR includes a spectrum of integrative outcomes, with both faith-informed Christian knowledge (i.e. a faith perspective) and disciplinary knowledge shaping one another (see Figure 7 below).

<table>
<thead>
<tr>
<th>Faith-Informed Christian Knowledge</th>
<th>Disciplinary Knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affirms</td>
<td>Supplements</td>
</tr>
<tr>
<td>Challenges</td>
<td></td>
</tr>
<tr>
<td>Disciplinary Knowledge</td>
<td>Faith-Informed Christian Knowledge</td>
</tr>
</tbody>
</table>

Figure 7: The Spectrum of Integrative Outcomes for Christian IDR

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38 The sociology of knowledge was a significant sociological concept for interdisciplinary studies because it sought to explain the influence of culture and group traditions upon knowledge. The sociology of knowledge examined the role of historically and culturally conditioned epistemologies underlying what was assumed to be authoritative knowledge or truth claims.
By recognizing the spectrum of possible integrative outcomes, the epistemology of Christian IDR is not rooted in overly rationalistic or foundationalist tendencies, nor does Christian IDR capitulate to non-foundational tendencies of an “anything goes” hermeneutic either (Westphal 2009).\(^{39}\) Instead, Christian IDR is best situated in post-foundational critical realism that is open to the iterative and reflexive nature of general IDR (Grenz and Franke 2001; Macallan 2014). Van Huyssteen, one of the pioneers of Christian interdisciplinarity, and an advocate of what Root described as ministerial transversal rationality (2014:282), suggests that postfoundationalism is a rationality where “a fusion of epistemological and hermeneutical concerns will enable a focused (though fallibilist) quest for intelligibility through the epistemic skills of responsible, critical judgment and discernment” (1999:33). Shults (1999:18) explains the post-foundational presupposition of Christian IDR:

\[
\text{To engage in interdisciplinary dialogue within our postmodern culture while both maintaining a commitment to intersubjective, transcommunal theological argumentation for the truth of Christian faith, and recognizing the provisionality of our historically embedded understandings and culturally conditioned explanations of the Christian tradition and religious experience. The post-foundationalist goal is to find a “middle way” between the dogmatism of foundationalism and the relativism of many forms of nonfoundationalism.}
\]

### 1.6 Objective of the Research

Having explained the general research assumptions, including the interconnectedness of ministry, the theoretical foundation of interdisciplinarity, and the conceptualization of Christian interdisciplinary research, the specific objective of the current research is further clarified. In specific terms, the objective of the research is the development of a practical theology of compassionate caregiving for the bereaved with deference to the impact of deritualization on traditional forms of burials and

\(^{39}\) Christian IDR rejected the false choice between the Enlightenment’s basic assumption of epistemological certitude as the absolute foundations for knowledge or postmodernism’s capitulation to the relative nature of all truth, where every community had its own form of rationality (Shults 1999:25).
processes of grief and mourning. In this regard, the research is designed to elucidate a deeper understanding of the complexities of grief and loss in order to improve pastoral caregiving of the bereaved. As such, the research is not aimed at positivistic answers, but rather at developing a thick description of effective bereavement care given the problematic effects of deritualization of death on the living (Geertz 1973; Enns 2016). The research into the cultural behaviors toward deritualization is not an attempt to assign causality, but rather an important recognition that a context, through careful research, could be intelligibly described (Merriam 2009:28).

To achieve the stated objective of the research, emphasis in the study is given toward two (2) domains of inquiry: disciplinary perspectives and educational dynamics of bereavement caregiving. Figure 8 below provides a helpful schematic that illustrates how the current study problematizes the topic of the research.

![Figure 8: Overview of the Problematic Field of Inquiry](https://scholar.sun.ac.za)
First, the research questions will guide the study in triangulating three disciplinary domains (i.e. funeral service, bereavement psychology, and practical theology) through interdisciplinary research with the hope that a better grasp of the problem of deritualization will lead to practical wisdom in how a community may create and sustain suitable adjustments in bereavement care, including new forms of ritualization, where needed. Second, the research questions will also focus on the predominant practitioners who have ample influence in addressing the problem of deritualization of death in bereavement care – funeral directors and vocational pastors. Therefore, the research examines the scope of the formal training and education for funeral directors and pastors (i.e. mortuary college and Christian university) with deference to grief and the use of ritual. The assumption is that if funeral directors and pastors better understand grief and ritual, these positions of ministry leadership can contribute to the well-being of their respective communities and combat the problem of deritualization of death, particularly as it pertains to the adaptation of loss. Through a critical discussion of the research questions, the study considers if an interdisciplinary understanding of bereavement caregiving and a description of the dynamics of bereavement caregiving education will assist funeral directors and vocational pastors to reflect anew on the theological implications of human loss and the quest for spiritual wholeness when facing the inevitable fact of death, dying, and the eventual process of mourning. As a direct result of the research, bereavement caregivers may gain an improved theological paradigm for compassionate bereavement caregiving.

1.7 Methodology

Given the research questions of the study, as well as the assumptions and stated objective above, the researcher suggests that improving bereavement care within the current context of deritualizing death is best attended through descriptive qualitative research including the use of a hermeneutical approach (Berg 2004). Qualitative research is a valuable research method for providing initial explorations and rich

40 Though the literature is inconclusive on a definitive list of qualitative methods, the study chose to include the method of hermeneutics as within the spectrum of current available qualitative methodologies (McCaffrey, Raffin-Bouchal, Moules 2012; Kafle 2011; McLeod 2011; Merriam 2009).
descriptions of complex phenomena in a rigorous and systematic manner (Sofaer 1999:1101). Qualitative inquiry can include several common methods of research, including narrative research, phenomenology, hermeneutics, grounded theory, ethnography, and case study, though there is not a consensus on a definitive list of how to classify all forms of qualitative inquiry (Merriam 2009:21).

By focusing on human society and culture with respect to grief adaptation, the current study is designed for applied research for funeral directors and pastors using two primary qualitative research methods – hermeneutics and ethnography. To be clear, the research initially utilizes an inductive approach to the research problem – building disciplinary understanding through one part at a time; however, it should also be noted that deductive reasoning also plays an important role in the critical assessment and logic of the entire interdisciplinary process from a Christian perspective. Admittedly, a Christian faith-based worldview has a deductive character due to its confessional structure. At the same time, the overall qualitative design of the current study does not begin with deductive hypothesis testing, as would a quantitative research design. Instead, the study aims toward interpretation and discovery, as the research moves toward a feasible, albeit untested, practical plan to address bereavement caregiving amid the problem of deritualizing death. The method for the critical assessment of all data will occur through literature research and logical reasoning.

In deference to the methodology of hermeneutics chosen for the current study, there is value in the deep questioning of the disciplinary fields of bereavement psychology, funeral service, and practical theology as each relates to the problem of deritualization and the pastoral care of the bereaved. Hermeneutics as a research method is recognized as “a major source of ideas for qualitative inquiry” (Kinsella 2006:1). The basic philosophical underpinnings of hermeneutics involve reappraisal and reinterpretation in relation to historical and cultural contexts (McCaffrey, Raffin-Bouchal, Moules 2012:214). In broad terms, hermeneutics seeks to interpret and understand the meaning of a specific text, discipline, or culture (Butler 1998). In short, hermeneutics is the theory of the interpretation of meaning (Bleicher 1980). To fully develop a thick description and understanding of the context of deritualization and
pastoral care, the study will circle through understandings of each of the three fields of inquiry through an integrated literature review to provide a consistent interpretation that coherently fits the context of the study, specifically disciplinary perspectives of bereavement caregiving (see Chapter 2: Literature Review of Disciplinary Perspectives).

To maintain the integrity of Christian interdisciplinary research, the study connects the method of hermeneutics to practical theology. In general hermeneutical theory, the aim is the understanding of meaning within specific contexts. In the current study however, emphasis is given to *phronesis* – or an embodied practical knowledge or wisdom that will make a bold difference to practitioners of pastoral care to the bereaved (Browning 1996). The choice of hermeneutics as a research methodology is connected to the practical aim of not simply developing a better understanding of the world of grief and bereavement, but to change and improve the lives of practitioners, namely funeral directors and vocational pastors (Swinton and Mowat 2011:27). This practical aim is often explained by what is called a hermeneutics of suspicion and recovery (Scott-Baumann 2012). Knowledge that is attained from disciplinary analysis is dealt with critically in order for practical theology to not be subverted. Swinton and Mowat explain:

> The fact that a source of knowledge may be complex and potentially dangerous does not make it unusable. It does, however, mean that we need to approach it with a degree of suspicion and be prepared to take the time and offer the theological and intellectual energy that will enable it to be drawn into the process of theological enquiry in a way that is faithful and illuminating (2011:vii).

Hermeneutics is therefore important to develop a logical argumentation and validate the research findings in terms of a practical theology of pastoral care to the bereaved. Hermeneutics is an essential research method for the current study in order to assess critically the meaning of concepts derived through the exploration of the disciplines (in this case, bereavement psychology and funeral service) in the literature review,
specifically the link of deritualization to its impact on theological reflection in bereavement caregiving.

In addition to the method of hermeneutics, the study also leans heavily on an empirical component in order to examine the educational programs designed to equip two significant caregivers in the team approach to bereavement care – namely funeral directors and vocational pastors (see Chapters 3 and 4). The researcher chose to thereby utilize ethnography to organize the research design around the two primary educational contexts for training funeral directors and vocational pastors – in short, current educational models being offered by a mortuary college (Gibson 2005; Altieri 2015) and a Christian university (Joeckel and Chesnes 2012). As such, the study utilizes the research methodology of ethnography to guide the learning and address the research inquiry into the dynamics of bereavement caregiving education.

Ethnography is born out of the field of anthropology, but has become a major approach to qualitative research. As an operational definition, ethnography is defined as:

\[
\text{A process of attentive study of, and learning from, people – their words, practices, traditions, experiences, memories, insights – in particular times and places in order to understand how they make meaning (cultural, religious, ethical) and what they can teach us about reality, truth, beauty, moral responsibility, relationships and the divine (Scharen and Vigen 2011:16).}
\]

The research will be supported by a process of qualitative data collection within a conceptual framework common in practical theology (Auerbach 2003).

**Data Collection and Research Tools**

Data for the study is needed to assess the preparedness of pastors and funeral directors in training. In specific terms, reputable institutions of higher learning will be considered to provide rich contexts indigenous to the fields of pastoral care and funeral service. In terms of research tools, the researcher will engage in live face-to-face semi-structured interviews (See Appendix B) with both college presidents and senior faculty members to assess the extent of grief and bereavement training, and to
learn how particular programs of study are responding to the problem of deritualizing death.

To identify schools of higher learning that are designed to train professional bereavement caregivers (i.e. pastors and funeral directors), the study utilizes a single-case design for each discipline, specifically one Christian university and one mortuary college as key contexts applicable to the research (Murale and Preetha 2014; Yin 2012; Nock, Michel, Photos 2008). Single-case designs are noted for utilizing flexible and efficient approaches to qualitative research that are useful for making key advances in understanding complex phenomenon as well as augmenting existing bodies of knowledge. With regards to the training of pastors, only a school approved by nationally and regionally accredited associations recognized by the Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) will be chosen. With regards to funeral service, only a school approved by the American Board of Funeral Service Education (ABFSE) will be chosen. The study is designed to gather data from schools of higher learning that represent prestigious and reputable academic training programs recognized by the USDE, CHEA, and ABFSE. The accreditation of the training programs at both the regional and national levels further solidifies the ability to utilize a single-case design for the study. Further clarification for the legitimization of single case designs will be given in Chapter 3: Research Design and Methodology.

A Conceptual Framework for Practical Theology

Having outlined the research methodology, data collection process, and research tools, the study is designed to lean heavily upon the Loyola Institute of Ministries (LIM) model of Practical Theology (Cowan 2000) to advance a conceptual understanding for the sequencing needed in the research process. The LIM model, developed by the Institute for Ministry at Loyola University, is recognized as the “simplest and most user-friendly model” appropriate for studies in practical theology (Smith 2008: 210).

The logic of LIM model is explained in four sequential steps. First, the researcher identifies a real-life problem. Second, the researcher provides an interpretation of the world as it is. Third, the researcher suggests an interpretation of the world as it should
Chapter 1: Problem Identification

be. Fourth, the researcher provides a feasible action plan or a doable remedy to the research problem from a Christian perspective (Smith 2008:207). The LIM model relies heavily upon a methodology of hermeneutics.

The broad interdisciplinary conceptual framework provided by the Oxford IDR model is also compatible with the LIM model of practical theology. Being anchored solidly to the normative logic of interdisciplinary research, the Oxford IDR model is also anchored solidly to the normative logic of practical theology. In addition, the conceptual framework of the study recognizes the compatibility of both generalized IDR models and the LIM model as both aim toward action plans that may contribute to the resolution of real world social problems (see Figure 9 below).

Figure 9: Foundations for a Conceptual Framework

In specific terms, the LIM model is helpful to develop the sequencing of a practical theology appropriate for the current study. For example, after the researcher identified a real-life problem, in this case the problem of deritualization of death, the researcher

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41 The LIM model assumes a gap between step two, what the world is, and step three, what the world should be. This research gap is necessary to surface the final step in the model – devising a feasible plan of action to address the research problem from a practical theological perspective.

42 The LIM model is rooted in Ignatian and Jesuit spirituality that focuses upon practical education and ministry for lay people, commensurate with the vocational theology of the 2005 U.S. Catholic Bishop’s statement, Co-Worker’s in the vineyard of the Lord: A resource for guiding the development of lay ecclesial ministry.
will develop an interpretation of the world as it exists within the context of deritualization – namely the context of death of a loved one. This step necessitates a comprehensive literature review of the funeral service industry and the psychology of grief and bereavement with deference to the problem of deritualization (see Chapter 2: Literature Review of Disciplinary Perspectives).

After the current world of death care and bereavement psychology is described, the researcher will offer a historically and critically informed perspective from the academic discipline of practical theology to suggest how the world should be (Smith 2008:208). In theory, the gap that surfaces in the review of literature between how the world is in terms of the emergence of deritualization, and how the world should be according to a faith-informed perspective of deritualization, will help formulate a practical theological understanding appropriate for the research. Of course, the LIM model does not imply a simplistic theory-to-practice dualism. In fact, the LIM model allows for what Browning refers to as a practice-theory-practice model of knowledge that “gives the entire theological enterprise a thoroughly practical cast” (1996:39). In short, the LIM suggests that “theology can be practical if we bring practical concerns to it from the beginning” (1996:5). Again, the practical aim is not, per say, to acquire more knowledge, but to effect change among practitioners who provide pastoral care to the bereaved. In this way, the study follows Browning’s view of transformation, which he describes as a dialogical process in a “practice-theory-practice rhythm” (1996:279).

Moreover, the sequencing of the LIM model does not preclude the interdisciplinary logic and iterative nature of the research. That is, practical theology is informed by the disciplinary insights from the funeral service industry as well as grief and bereavement psychology. The conflict that may arise between the disciplines is not seen as “an abstract game in hermeneutics or interpretation theory, but with regard to what these different interpretive perspectives have to contribute to the clarification of practical action” (Browning 1996:16). As such, an interdisciplinary understanding will also be followed by practical suggestions for conducting action planning to address the research problem of deritualization of death.
Chapter 1: Problem Identification

1.8 Outcome of Research and Research Findings

The current study is ultimately designed to gain Christian based wisdom to better support bereaved families within communities, including those affected by the deritualization of death. By approaching the research from a Christian interdisciplinary perspective, research findings may make a significant contribution to the fields of funeral service, the psychology of grief and bereavement, and practical theology. In terms of funeral service, the research is designed to provide guidance for the funeral industry that will address the paucity of best practices that move beyond mere materialistic perspectives to an improved bereavement caregiving that recognizes the spiritual dimension of meaning and the role of compassion for families facing the realities of death. Mortuary colleges may also benefit from the research by understanding how best practices may be updated and incorporated into the formal programs of study. The research may also contribute to the field of grief and bereavement psychology by providing grief and bereavement professionals with a thicker description of families who, after being affected by deritualization, need professional assistance to process the losses absent of normative transitional rituals. The field of practical theology may also benefit from the research as it attempts to offer a cultural portrait of an emerging context in need of the practical wisdom provided by pastoral care. As the church is continually faced with ministering to a host of old and new needs of both their own members, as well as those outside of their local fellowships, Christian leaders are implored to face their respective ministries with an intelligent and empowering praxis (Anderson 2001). The research into the problem of the deritualization of death proposes a trajectory for effective praxis within the church as practitioners of pastoral care can become better prepared to aid in the support and compassionate care of the bereaved – a practical theology of caregiving for the bereaved.

1.9 Summary

The current research focuses on the problematic field of bereavement caregiving amid a context of significant cultural shifts now affecting how bereaved human beings affirm life in the adaptation of loss. The study utilizes a Christian faith-based approach to
enhance the caregiving skills of two (2) primary professions associated within the problematic field of bereavement care: funeral directors and vocational pastors. The study argues that the deritualization of death in contemporary funeral service is a significant interdisciplinary social problem warranting research for those engaged in bereavement care (Babbie 2001). The research is aimed at providing caregivers an improved theological paradigm for compassionate bereavement caregiving in the contexts of the twenty-first century. Three fields of disciplinary knowledge are proposed for further study in order to surface insights adequate for addressing the problem: funeral service as an applied discipline, the psychology of grief and bereavement as a social/behavioral science, and practical theology, as a theological discipline. In addition, the study focuses on the dynamics of current bereavement caregiving education in order to improve the praxis of bereavement practitioners. To provide a useful conceptual framework for the research, the study utilizes the Oxford Christian Interdisciplinary Research (IDR) model. The Oxford IDR model demonstrates the sound logic of both normative interdisciplinary studies as well as practical theology, being specifically compatible with the Loyola Institute of Ministry (LIM) model. Research methodology appropriate for the inquiry into the deritualization of death is framed in terms of a descriptive qualitative research design utilizing standard tools of hermeneutics and ethnography, including live face-to-face semi-structured interviews. Data will be collected from the closest disciplines affected by deritualization: pastoral care and funeral service. As such, an accredited Christian university and mortuary college are proposed as the population parameters for the empirical component of the research design. The significance of the research is directed toward the contributions that an improved theological paradigm for compassionate bereavement caregiving can make to the fields of funeral service, grief and bereavement psychology, and practical theology. The researcher contends that the study will be advanced by turning now to a comprehensive review of disciplinary literature in the following chapter.
Chapter 2

Literature Review of Disciplinary Perspectives

2.1 Introduction to Related Literature

The conceptual framework of the study described in Chapter 1 provided the organizing schema for the current inquiry into the development of a practical theology of caregiving for the bereaved to explore contemporary perspectives of bereavement care. The conceptual framework provided both the useful logic and sequencing necessary to support the research endeavor. The study utilized the LIM model for organizing and sequencing of the overall research in terms of practical theology and the Oxford IDR model to shape the logic of the research, as specified by the developmental nature of the dissertation chapters (see Table 5).

Table 5: Organizing Schema of the Study

<table>
<thead>
<tr>
<th>Chapter Title</th>
<th>Oxford IDR Model (Logic)</th>
<th>LIM Model (Sequencing)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter 1: Problem Identification</td>
<td>Step 1 Need for Inquiry: Locate a real world problem that warrants research</td>
<td>How The World Is</td>
</tr>
<tr>
<td>Chapter 2: Literature Review of Disciplinary Perspectives</td>
<td>Step 2 Hermeneutics and Literature Review: interpret knowledge in selected disciplinary fields and critically prioritize to support problem inquiry</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Step 3: Faith/Learning Integration: unite biblical/theological insights with disciplinary insights to develop a Christian worldview understanding of a given subject/discipline</td>
<td>How The World Should Be</td>
</tr>
<tr>
<td>Chapter 3: Research Design and Methodology for Educational Perspectives</td>
<td>Step 4 Christian IDR: synthesize integrated insights to create a Christian perspective relevant for research methodology</td>
<td>How The World Is</td>
</tr>
</tbody>
</table>

Table Continues
For the purpose of this chapter, the objective was first to identify relevant disciplines to the research inquiry and conduct a review of seminal and current literature. The chapter focused upon a hermeneutical task in that each disciplinary field was critically evaluated from the existing epistemologies to produce key disciplinary insights relevant for the study. Second, the chapter also integrated disciplinary insights from a faith-based perspective in order to develop a Christian worldview understanding of the research problem. The literature review provided necessary direction to design the parameters of an appropriate empirical component of the study that addressed the research inquiry regarding bereavement caregiving (to be developed in detail in Chapter 3: Research Design and Methodology for Educational Perspectives).

The review of related literature in the domains of the applied professions, social sciences, and religious/theological studies provided an opportunity to triangulate an interdisciplinary perspective that would elucidate a deeper understanding of the research problem not possible through the lens of one discipline alone. In specific terms, the literature review focused upon knowledge in the three disciplinary domains relevant to the following research questions that examine the “what” of pastoral bereavement care.

**Perspectives of Bereavement Caregiving**

1. What do the multiple disciplinary fields of funeral service, bereavement psychology, and practical theology add to a conceptualization of bereavement caregiving, given the current cultural shift toward deritualization?
Chapter 2: Review of Related Literature

2: What insights emerge from integrating current developments in funeral service, bereavement psychology, and practical theology, that shape an interdisciplinary conceptualization of bereavement caregiving?

To provide a comprehensive, though not exhaustive, review of related literature, both seminal and current sources were explored through the specific disciplines of funeral service, bereavement psychology, and practical theology. Literature relevant to the problem of deritualization and bereavement care was selected through the use of seminal texts, peer-reviewed research journals, dissertations, popular texts, and current periodicals. The review included the use of on-line search engines, such as Pro-Quest, Questia, PubMed, the Theological Journal Library, and Stellenbosch University. Proquest provided access to over 9,000 titles spanning over 500 years and 125 billion digital pages of scholarship from dissertations and master’s theses. Questia provided search access to over 75,000 full-text on-line books and 9 million articles from 1,700 reputable publications. PubMed, the premier repository for peer-reviewed primary research in the life sciences, offered more than 22 million citations from journals and online books. The Theological Journal Library, a product of Galaxie Software, provided resources from 250 years of academic research from 33 evangelical journals of religion. The theological seminary at Stellenbosch University provided a specialized library of texts, journals, theses, and dissertations directly applicable to practical theology and pastoral care.

Consistent with the parameters of practical theology and the LIM model, the literature review was developed in two main parts: Part I - How the world is (i.e. a descriptive overview of current bereavement caregiving); and Part 2 - How the world should be (i.e. a prescriptive approach to the research problem). The first main part of the literature review (Part I) was subsequently subdivided into three sections (A, B, C). First, in Part IA, literature was reviewed from the discipline of funeral service, representing an applied profession (see section 2.2 below). Second, in Part IB, literature was reviewed from the discipline of psychology, specifically that of grief and bereavement, representing a specific social science (see section 2.3 below). Third, in Part IC, disciplinary insights were integrated and summarized to provide an accurate
picture of current thought from the disciplines of funeral service and grief and bereavement psychology (see section 2.4 below).

The second main part of the literature review (Part II) explored the field of practical theology as an appropriate academic discipline in the domain of religious studies in the humanities (see section 2.5 below). The objective of Part II of the review was to propose how the world should be according to an emerging perspective of practical theology. Part II of the literature review engaged in faith-learning integration, a necessary step for Christian interdisciplinary research. The current research was not designed from a paradigm of generic interdisciplinary studies, but a faith-informed paradigm of interdisciplinary studies (i.e. Christian interdisciplinarity). As such, faith-learning integration assumed that a knowable transcendent perspective provided an eschatological reference point to anchor the study. Finally, insights from all three disciplines, namely that of funeral service, psychology, and practical theology, were organized and summarized to produce a faith-informed interdisciplinary perspective helpful to provide pastoral care to the bereaved with respect to the growing problem of deritualization (see section 2.6 below). What was crucial was that the literature review provided an informed understanding of the problem to facilitate a specific design and methodology for further research (as developed subsequently in Chapter 3: Research Methodology).

2.2 Part IA: How the World Is According to Funeral Service

The first research question the literature review sought to answer was:

**Perspectives of Bereavement Caregiving**

1: What do the multiple disciplinary fields of funeral service, bereavement psychology, and practical theology add to a conceptualization of bereavement caregiving, given the current cultural shift toward deritualization?

43 In terms of teleology (the goal or purpose), the study embraced a critical realist approach to eschatology, and therefore did not intend to claim a perfect or error-free faith-based perspective was possible or even necessary for an informed Christian interdisciplinary perspective.
Funeral service, as an applied business profession, was a logical starting point for the literature review, representing one of the central contexts for pastoral care to the bereaved. The Centers for Disease Control and Prevention reported that there were 2,596,993 deaths that occurred in one year in the United States (2013). Most of these deaths involved bereaved families calling upon funeral homes for necessary assistance. As such, the review of related literature was organized around three (3) developmental subjects in the field of funeral service applicable to the research question regarding the implications of deritualization on the interplay of bereavement care and the internalization of loss: (1) a brief history of funeral service, (2) an exploration of narrative perspectives of funeral service from popular culture, including books and films, and (3) an evaluation of current industry issues relative to the problem of deritualization. The review of literature surfaced key inflection points in each subject area that later informed the overall study.

A Brief History of Funeral Service
To contextualize the problem of deritualization as it pertains to perspectives of bereavement caregiving, a review of relevant literature in the applied business discipline of funeral service was needed. Though the modern professional funeral director was born in the mid to late 1800s, it was helpful for the current study first to locate the origins of funeral ritual itself in order to demonstrate a monolithic and ubiquitous practice indigenous to all human beings. The point was not to provide an exhaustive history of funeral ritualization from the past to the present, but instead to suggest that modern funeral service today was connected to ancient human practices of ritualization. Therefore, the first key inflection point of funeral service was the pre-historic origins of funeral ritual itself.

PRE-HISTORIC ORIGINS OF FUNERAL RITUAL
The origins of funeral service and ritual practices of death were shaped throughout antiquity by humankind’s intrinsic correlation between movement and human dignity (Metcalf and Huntington 1991; Peart 2002). From the beginning of humankind to the present day, societies felt compelled to take specific actions to dispose of their dead – to move a deceased loved one from point A to point B, wherever point A or B would
be located. Humans apparently preferred not to simply leave their dead at the location of where they died (i.e. at Point A); instead, humans throughout history preferred to move their dead somewhere else (Point B). This intrinsic pre-historic proclivity of movement as a response to death has been well-documented (Long and Lynch 2013:171). Thomas Long, Bandy Professor of Preaching at Candler School of Theology, Emory University explained it well:

*The first great necessity of death, as we have said, is to move the body of the deceased from here to there, that is, from the place of death to the place of final disposition. In most places around the world, and throughout human history, carrying the body of the deceased to the grave or the fire or the mountain, weeping and signing, mourning and praying along the way, is not done before the funeral or after the funeral – it is the funeral. We know that the body must be moved; there is no choice about that* (Long and Lynch 2013:203-204).

That point must not be missed despite the multifarious forms of particular rituals themselves. That is, there appeared to be a pastoral component indigenous with human beings in the care of the dead, as well as the care of the living most closely affected by loss. Throughout history, and in many forms and practices, human beings utilized ritual to cope with their existential experience of loss and grief. The literature provided a strong ubiquitous case that the deceased human body matters.

*It matters in disparate religious and ideological circumstances; it matters even in the absence of any particular belief about a soul or about how long it might linger around its former body or about what might become of it after death; it matters across all sorts of beliefs about an afterlife or a God. It matters in the absence of such beliefs. It matters because the dead make social worlds. It matters because we cannot bear to live at the borders of our mortality* (Laqueur 2015:1).

As noted in Chapter 1, the Old Stone Age, which dated back as far as 500,000 years (BP), provided evidence of the earliest funeral practices. Anthropologists suggested
that death response rituals were present with the first hominids (possibly the extinct pre-human bi-pedal primates: *Homo erectus* and *Homo neanderthalensis*). Early funeral ritual in this period included funeral caching – the intentionality given to the structured disposition of a corpse – a deliberate burial. For reasons unknown, at least some pre-human beings moved their dead from wherever they died (Point A) to intentional cave dwellings (Point B).

The distinct human species, *Homo sapiens* (Latin for “person wise”), was dated to about 150,000 years (BP). This period provided evidence for the emergence of inhumation. Inhumation was the process of creating an artificial location for containing a corpse (e.g. the practice of digging a grave with tools and marking the place of burial with a stone). The literature suggested that inhumation was the earliest and clearest evidence for ritualistic burial of human beings. By the Upper Paleolithic period, around 30,000 (BP), some burials of *Homo sapiens* included burial clothing, including ornaments worn by the deceased while they were alive.

A survey of related literature of ancient human history suggested that people need ritual and funerary practices to cope with their bereavement. As such, the beginning point for assessing the rise of normative funerary behavior existed in the earliest human history available. In short, funeral rituals to cope with death of a significant other were as old as people themselves. What was significant for the research regarding contemporary deritualization trends was to recognize that the very origins of humanity coincide with monolithic practices of funeral ritual.

Moreover, the earliest reports of evidence regarding funeral ritual practices seemed to say something not only about what human beings did with their dead, but why they may have felt compelled to do something. Ancient discoveries of rituals surrounding death conveyed some essential truths about human life, particularly why people in particular may have responded to death with ritual. In specific terms, funeral ritual since antiquity appeared to have met perceived needs of human beings including sacred, secular, spiritual, emotional, social, and practical duties of families (Lynch
Chapter 2: Review of Related Literature

2004:11-14). Thomas Lynch, self-described undertaker and renowned poet, elegantly wrote at length:

*I am always trying to imagine the particulars - that first Neanderthal widow I reckon, waking to the dead lump of her man, somewhere in the Urals or the Apennines, one gray morning forty or fifty thousand years ago. His body has about it a stillness she has not seen in him before. He is dumbstruck, unresponsive in ways that worry her. Changed utterly. Did she wait until he began to smell? Hours in warm weather, maybe days in winter. Or did she know a dead thing when she saw it - seeing in him what she'd seen before in other formerly living, breathing things. Either way, sooner or later she knew something would have to be done. She could leave the cave to him, his tomb. Or she could dig a hole or build a fire or shove him over the hill or into a ditch or swamp or the sea. But there would have to be an effort made to budge or bury or burn him up, something involving the larger muscles; and looking up or down or out or into whatever void she would consign him to, she would ask herself some sensible questions. Why is he cold? Is that all there is? Can it happen to me? And it was ever thus - all down the history of the species, death was first and foremost an existential experience, the trigger for the overwhelming questions. What's next? she must have wondered; and the life of faith and doubt was kindled in humankind...In the blank face of mortality we always ask what's next (2004:11-12)?*

What was compelling was that this early pattern of the living caring for their dead in order to cope with loss extended throughout the ages of human history. In terms of American history, to which the literature review examined next, the earliest forms of death rituals confirmed this basic continuity in ritualized death care.

**EARLY TO MID NINETEENTH CENTURY AMERICAN FUNERAL SERVICE**

For the purpose of the current study, a review of literature on the history of American funerary care was helpful in understanding the context for pastoral care today. The attitudes of many today toward the disposition of their loved ones without any
formalized death ritual did not appear out of nowhere, but was connected to the changing attitudes toward death that emerged out of the nineteenth and twentieth centuries (Laderman 1996). To develop a clear understanding of the times, it was necessary to begin at the formation of American society in its infancy.

European colonization of America began in the 16^{th} century and expanded its horizons westward over many decades in the United States’ infancy through the mid-19^{th} century. Through this time period, the same indigenous practices of coping with human loss through death rituals that were documented in early human civilizations of antiquity were apparently either copied and passed down, or remained simply an intrinsically human activity necessitated by a response to death and the need to care for the bereaved. The American doctrine of Manifest Destiny emphasized the idea that settlers were destined, perhaps even by the providence God, to expand their reach across the entire continent. Unfortunately, this process of expansion also displaced Native American tribal customs and uprooted their way of life (Denson 2007).

Interestingly, the sad displacement of people and their customs did not forgo common human proclivity to memorialize the dead as a means to adapt to human loss. Admittedly, it was difficult to know with any degree of certainty why human beings sought rituals to cope with their loss without speculating that there was a ubiquitous or transcendent spirituality that drove human resolve toward funerary care.

Evidence for the continuity of ancient funeral ritual that gave rise to the modern funeral profession was found on American soil in the early 19^{th} century. Forensic anthropologist Bill Bass (Bass and Jefferson 2004), internationally known for his Body Farm at the University of Tennessee, pioneered research in this area. Beginning his professional career with the Smithsonian Institution (Washington, D.C.), Bass engaged in a long process of cataloging the bones of the Arikara Native Americans in South Dakota (1956-1959). Like most of the Paleo-Indian people who migrated to

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45 Dr. Bass’s research on death practices provided the inspiration for the popular level best-selling books by Patricia Cornwell about Chief Medical Examiner, Dr. Kay Scarpetta.
North America thousands of years ago, the Arikara were alive and well-established when Lewis and Clark traveled up the Missouri River in 1804.\footnote{The Corps of Discovery Expedition was commissioned by President Thomas Jefferson after the large-scale Louisiana Purchase in 1803. The expedition was designed to explore the newly acquired territory and to establish trade routes that would eventually lead to the Pacific coast.} What was notable was that Bass discovered that the Arikara also practiced inhumation by dressing their dead and then burying them in a sitting posture or sometimes on their side in a circular grave. Moreover, Bass suggested that his findings demonstrate how these ancient death practices facilitated an essential process where survivors would mourn over the course of one full year. What was evident was that these ancient funeral practices included a response to death that was assumed to bring about healing for the mourners.

Eventually, normative death practices in the United States led to the need for early professionalization. Funeral directing in the modern sense as a specific occupation was born in America during the nineteenth century (Habenstein and Lamers 1955:225). What became apparent was a growing basic need for a specific tradesmen who would specialize in caregiving services to meet the death and bereavement needs for families living within a given community. In fact, the literature indicated that earliest signs of funeral professionalization began with the tertiary work of cabinet-makers in the mid-19th century to build a box to transport the dead. Though funeral rituals were still handled mainly by friends or family members from their homes, American culture sought a suitable practitioner of funeral services that took root in the national conscience of death caretaking. In specific terms, cabinetmakers were called upon more regularly to measure the deceased and to build an appropriately sized wooden coffin.

Reynolds (2011:1385) provided the example of John Martin Foll. Foll was born in 1834 in Menslinger Germany before moving to the United States to practice his trade. Foll was listed in a city directory in Albany, New York as both an undertaker and retail furniture dealer. Apparently, his business was well-known for his expertise in both trades (see Figure 10 below). The Encyclopedia of Cleveland History reported that the
1857 *Cleveland City Directory* included a list of 16 cabinetmakers, “10 of whom were also listed as undertakers” (Beal 2015).

![Example of Early Undertaker Advertisement](https://scholar.sun.ac.za)

*Figure 10: Example of Early Undertaker Advertisement*

In contrast to twenty-first century funeral practices, what was clear in the research was that in the early centuries of American history, death was a normative and integrated part of life. Laderman explained: “the dead and the realities of death were constant and inescapable facts of consciousness for most community members in the antebellum North” (Laderman 1996:25). Death was both a personal concern as well as a community or civic function, as family, neighbors, friends, and community members were called upon to care for the living while taking care of the dead.

To provide some measure of pastoral care for the bereaved, a four-part process was developed and then solidified as a regular part of funerary care. First, the deceased
body had to be prepared for burial. Referred to as “laying out the body,” this included washing, shaving, and dressing the corpse in a burial shroud and then placing the body in a plain and simple coffin typically made of pine wood by the local cabinetmaker or furniture tradesman. In addition to family members assisting one another with this somber but necessary task, midwives and nurses often mediated this process. Laderman reported that in a “Philadelphia city directory for 1810 a section labeled ‘Layers Out of the Dead’ contains the names of fourteen individuals – nine of these are definitely women, while the rest have only their last name or first initial and last name listed” (1996:30). Deceased bodies were commonly “layed out” in a front room of the house near the entrance, called the parlor.

Second, the bereaved family participated in an important ritual called a “wake” which lasted for one to three days, and served pastoral, pragmatic, and social functions. From a pastoral perspective, the wake period normally lasted long enough to allow adequate time for family and close friends to pay respect to the deceased and to say a final farewell. The wake also served another pragmatic function. A vigil period attended to by family members or close friends kept watch to see if the deceased would show signs of life and wake up from slumber. In what was called “sitting up with the corpse,” the deceased was under constant surveillance by family or close friends, even at night. Another pragmatic aspect of the wake was to attempt to preserve the body. Families often applied a cloth soaked in vinegar to the deceased’s face to delay composition. Also, ice was often used in a large tub beneath the bottom of the coffin. From a social perspective, the wake period provided an important function within the

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47 Many people during this period simply died at home among family members and close friends, rather than at an institution or hospital, which was yet to become a key part of American culture.

48 There was evidence that some individuals conducted advanced planning during this period, often having their coffins and shrouds made even before death occurred. This short-term practice may be an early predictor for the popularity of preplanned funerals that would emerge strongly in the 1980’s under the push from insurance companies and funeral home establishments as a means to garner more market share and ensure future business.

49 The fact that there was evidence of women assisting with the care of the dead in early American history was an important fact of consideration. Modern funeral service would become dominated by male practitioners until the late twentieth century when women eventually represented over half of the student body demographics in mortuary colleges (Goldenhar, Gershon, Mueller, and Karkasian 2001; Mardall 2015).
community. Visitors to the wake often engaged in varied activities such as sharing food and drink, including alcoholic beverages, reading scripture and praying, and somber reflection. These social activities certainly acted together to foster strong communal bonds. Laderman explained: “this bond and sense of togetherness helped to counteract the fissure created by the death of a community member” (1996:31).

Third, following the preparation of the deceased body and the wake period, the next normative ritual that occurred in early American history was the procession to the grave. In the early 1800’s, it was common for the dead to be buried on a local farm. In time however, local church yards or cemeteries became the preferred choice. The mourners would all gather at the house of the deceased to process together to the grave space. Often times, the family would use eight individuals to carry the casket to the location. Eventually, towns would purchase a hearse or funeral coach to transport the coffin to the grave as a means to make the process easier on the mourners. Local church bells tolled to indicate the sacredness of the event and the family accompanied their dead through the whole process.

Fourth, the last act of normative death rituals in early American history was the burial of the dead. The literature indicated that besides scripture reading, prayers, and final thoughts being shared, family and community members frequently threw straw or dirt from the earth into the graves to recognize the finality of the long journey together (Laderman 1996:37). In contrast to twenty-first century practices where the mourners leave the cemetery upon the final prayer or benediction, families in early America stayed to watch the grave filled in by hand, either doing this process themselves, or to watch others in the community do it for them. In reflecting upon the whole four-step process of early funeral ritualization, Laderman concluded: “it is evident that when the dead were in the land of the living an attempt was made to preserve their integrity, to treat them according to inherited conceptions of dignity, and to manage their remains in a manner that ensured familial or communal continuity” (1996:37).

MID TO LATE NINETEENTH CENTURY AMERICAN FUNERAL SERVICE
By the mid to late 1800s, the modern professional American funeral director as a ritual specialist who cared for the living and the dead was born. The specialization arose
Chapter 2: Review of Related Literature

out of an amalgam of services that various parties in the community were providing for bereaved families (Paludan 1998). Two accoutrements arose earlier in the century, the need for a cabinetmaker to fashion a suitable box for the deceased, and transportation services in the form a horse-drawn hearse to move the deceased to the graveyard. These two death care services, became viable business ventures by the middle of the 18th century. In concert with the need for coffin makers and hearse transportation, came a much different specialization based upon the need for embalming a deceased body as an attempt to preserve its appearance prior to burial. Prior to this time, embalming was not considered a normative practice. In fact, embalming was more closely associated with Ancient Egyptians, who were credited as the earliest embalmers in human history. In a seminal text by Habenstein and Lamers, Egyptian embalmers were described as belonging “to the priestly class, and that embalming was a religious ritual as well as a physical operation” (1955:26).

The key event that catapulted the practice of American embalming into becoming the central task associated with the professionalization of funeral service was the American Civil War (1861-1865). During the war, provisions needed to be made to return the deceased soldiers home to their families. The specific nature of the problem was that many northern soldiers died and were having to be buried on southern soil. Though the dead soldiers were rarely abandoned, northern families could not simply bear the burden of not seeing their fallen loved one again.

Apparently funeral ritual, which had become so entrenched into everyday life, was severely interrupted because of the war. Specifically, northern families lamented the fact that their deceased soldiers were not transported home for a proper burial. Laderman explained: “This fate added to the anguish and grief of the soldier’s family and was highly disruptive to the normal patterns of thought and behavior established in northern Protestant communities for the disposal of the dead” (1996:109). As such,

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50 Embalming did not originate during the Civil War period, but was developed out of the existing science at the time (see French chemist, J.N. Gannal’s History of Embalming: And of preparations in anatomy, pathology, and natural history including an account of a new process for embalming, 1838). Gannal’s book was translated into English in 1840 and became the first book dedicated to embalming in the United States.
the Civil War created a societal need to care for the dead in such a way as to allow them to be returned home where funeral ritual could be carried out by the bereaved family and loved ones.

It was during this period that Dr. Thomas H. Holmes, now referred to as the father of modern embalming, experimented with various kinds of fluids to preserve dead human bodies. As a coroner’s physician, Dr. Holmes built upon prior embalming theory and developed his own embalming methods and techniques in New York City during the 1840s and 1850s. Laderman explained Holmes’ new method:

*Instead of using the dangerous preservatives that were then often injected into the body, including arsenic, zinc, and mercury, Holmes tried a variety of alternative substances and avoided any cavity work that required the removal of internal organs. He is also considered one of the earliest merchandisers of embalming chemicals and the inventor of an injection pump for the arterial method of embalming* (2003:14).

Perhaps the earliest most prominent embalming case that thrust the practice of embalming into the public consciousness at the time was young Colonel Elmer Ellsworth. Despite being killed by a shotgun blast to his chest, Dr. Holmes apparently was able to restore the soldier’s body to a viewable appearance, and was able to be seen by many in various cities. This heroic act was widely documented favorably by the press (Laderman 1996:116). Dr. Holmes would later claim to embalm the bodies of more than four thousand fallen Civil War soldiers, including eight generals (Mayer 2006: 477).

It was difficult to overestimate the pastoral comfort that embalming brought to a specific context of American history (McGlashan 2006; Canine 2010). If viewing Colonel Ellsworth’s deceased body awakened American perceptions about the usefulness of embalming, the chief defining moment that solidified favorable public perception came following the assassination of President Abraham Lincoln (Laderman
As the sixteenth president of the United States, Abraham Lincoln was credited among many accomplishments for leading the United States through the Civil War and abolishing slavery. Yet, in 1865, Lincoln was assassinated by John Wilkes Booth, a Confederate spy from Maryland. Lincoln was shot in the head at point-blank range while sitting in the balcony at the Ford’s Theatre in Washington, D.C. After his body was embalmed, it was taken from Washington, D. C. on a 180 city and seven states tour to Springfield, Illinois where he was buried. Garces-Foley explained that the “embalming of President Lincoln and the public procession of his body across the country added greatly to the esteem of embalming” (2010:10). In fact, the story of the national funeral procession across 1,600 miles was well documented (Reed 2014; Trostel 2002). What was important for the research was the fact that Lincoln’s embalming gave thousands of American people an opportunity to memorialize this great loss by viewing him one last time. Following the long funeral train of Lincoln, Laderman concluded (1996:154):

The public image of death had been recast. The desire to preserve bodies so that they could be moved from foreign territory to the comfort of home and the watchful eyes of close family and friends signaled an endorsement of the process of embalming and contributed to its future success as a basic feature in the burial of the dead.

Soon, the practice of embalming, which had previously been reserved exclusively for the medical professionals on research cadavers, became of great interest to enterprising undertakers. It was not long before advertisements began to emerge to tout the latest service added to the undertakers’ growing list of specialties. In one example (Brown 2013), a city directory from 1890-1893 depicted the local undertaker not only as a coffin maker or hearse operator, but now included a specialization in embalming techniques as well (see Figure 11 below).

\footnote{51 The embalming of President Lincoln was a great public attempt at pastoral care to a nation who lost one of its foundational and most influential heroes.}
By the late 19th century, American culture had developed a need for trained ritual specialists who were skilled in the arts and sciences of embalming. This need for trained practitioners of death led to the commodification of death. Not surprisingly, professional societies arose for the first time in response to public needs. For example, in 1882, the first meeting of the National Funeral Directors Association met in Rochester, New York. Laderman reported: “significantly, the question of an appropriate professional title – undertaker or funeral director – became a hotly debated topic at the organization’s first national meeting” (1996:168). That same year, the first professional school of embalming was established – the Clarke School of Embalming, named after Joseph H. Clarke, a traveling casket salesman in Indiana. Other notable figures that advanced the professionalization of funeral service included Hudson Samson, the first funeral director to incorporate embalming into his offering of ritual services and Dr. Auguste Renouard (1878), an early pioneer who wrote the first embalming textbook in the United States (Laderman 2003:15). By 1890, it was

52 The Clarke School of Embalming was later renamed the Cincinnati School of Embalming, the academic institution for one of the interviews used in the current study.

53 Today there are approximately 19,000 funeral homes, and over 25,000 practicing funeral directors. The funeral industry itself is said to produce over $20 billion in annual sales; however, profit margins are decreasing as families continue to economize on funeral costs (National Funeral Directors Association 2014; The US Funeral Industry 2014; United States Bureau of Labor 2014).
reported that there were nearly 10,000 practicing funeral directors in America (Laderman 2003:19).

**EARLY TWENTIETH CENTURY FUNERAL SERVICE**
The funeral industry, as a fully legitimized business enterprise, emerged gradually by the beginning of the twentieth century based upon a popular desire for Americans to seek special assistance with their dead (Laderman 1996:174). In combination with the work of the clergy, funeral service provided an important measure of practical and necessary pastoral care to the bereaved (Irion 1954; Irion 1966). In the early twentieth century, American life was going through a slow, but major social transition regarding the care and treatment of the dead. While the prior centuries of ritual behavior embraced death as a normal and integrated part of everyday life, twentieth century American society moved from this natural intimacy with the dead to an estrangement from the dead by the century's end (Laderman 2003:1). The movement was gradual, but eventually set in place the precursors to today's problem of deritualization.

Two significant factors brought about the rise of the modern day professional funeral home as an establishment that provides care to both the living and the dead. First, there was significant changes in demographics during the twentieth century. Breakthroughs in both medical science and technology led to increased life expectancy across the United States and subsequently a decrease in mortality rates. For example, mortality rates in 1900 were at 17.2 per 1,000, in contrast to a record low of 7.3 per 1,000 in 2012 (Kochanek, Murphy, Xu, and Arias 2014). Moreover, life expectancy changed from about 49 years in 1900 to 79 years by 2010 (National Vital Statistics Reports 2014). In early 1900, as many as 30% of all infants died before their first birthday; today, infant mortality has declined over 90% and maternal mortality declined almost 99% (Center for Disease Control 1999). Lower mortality rates and increased life expectancy created a mortality revolution that marked the beginning of the gradual disappearance of the dead from American life.

Second, another significant factor impacting twentieth century patterns of funeral perceptions was the change in primary care. As mortality rates dropped, death was no longer largely a home matter. In prior centuries, death was a private experience
families typically encountered at home. In the new century, death occurred less frequently in the home and more frequently in local hospitals. As a result, funeral directors, a preferred term to the previous century’s term “undertakers,” offered the use of their own funeral parlors instead of using the home parlor of the deceased for ceremonies. Laderman concluded:

*Decreasing mortality trends, increasing longevity, and the rise of the hospital system are a few of the crucial early twentieth-century social developments that allowed the funeral industry to take root, and flourish, in American society. The success of the funeral industry was a product of the radically changing conditions of modern life, and modern dying, in this historical period. The number of funeral homes around the country grew rapidly in the wake of these significant social developments and fundamentally altered the relations between the living and the dead* (2003:4).

**MID TO LATE TWENTIETH CENTURY FUNERAL SERVICE**

By the middle of the twentieth century, American funeral service was a fully developed and functional industry. Each state had created specific licensing structures and educational requirements. For some states, this included dual licensing requirements – one license for funeral directing and a separate license for embalming. Professionalization also included education standards at nationally accredited mortuary colleges, as well as apprenticeship requirements prior to licensing. In addition, each state had developed their own professional association to assist member firms with their work, including keeping firms updated on changing mortuary laws and offering continuing education to meet state requirements.

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Despite the growing body of knowledge needed for professional funeral service practitioners, this period of time was highly characterized by the commoditization of death (Roberts 1997). The funeral service industry became so much more than mere undertaking, where in a century prior families needed just a little assistance with a simple wooden box to transport their dead. Now, a fully sophisticated American industry had emerged out of responding to changing social values (Harrington 2007). America turned to funeral service professionals more than ever before. By 1960’s, Laderman reported that “the funeral industry was generating billions of dollars for funeral directors, casket and vault manufacturers, cemetery owners, florists, embalming-chemical companies, and other burial-related businesses” (2003:45).

Not surprisingly, by midcentury, the commoditization of funeral service ushered in sharp criticism. For example, in 1970, the Federal Trade Commission launched a full scale investigation into the industry that eventually led to the Funeral Trade Rule of 1984. This rule, which was still enforced today with a few minor revisions made in 1994, regulated the use of General Price Lists (GPLs) and Statements for Goods and Services in funeral homes across America. These laws, among others, guide every facet of funeral service, such as what can be said and not said over the telephone, how funeral directors initiate conversations about funeral costs, and what disclosures must be presented to families at appropriate times. Funeral homes were mandated to comply with all of these federal requirements as well as a host of other applicable federal and state laws that govern the practice of funeral directing as a regulated industry of trade.

Further commoditization was evident with the rise of large publically traded funeral home conglomerates like Service Corporation International (SCI), who purchased numerous independently owned funeral homes for large sums of money. Conglomerates often kept the original family name associated with their acquisitions to keep a community-based feel, while actually managing their firms from distant large

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55 In some areas during the decades of the 1940s-1960s, funeral homes also offered emergency ambulance services for the community. The practical rationale for these ancillary services was that funeral homes owned vehicles that were large enough to accommodate people in stretchers and transport quickly to local area hospitals.
city buildings, often in another state. Though these enormous companies managed and operated highly successful firms all across America, local managers and regional directors were faced with the daunting responsibilities of not only the concerns and satisfaction of client-families, but now to higher level executives and the satisfaction of company shareholders. The NFDA reported that approximate 14% of all funeral homes in the United States were publically owned, contrasted to 86% that were privately owned by families or closely held organizations.

Other significant cultural trends emerged in the 1980’s - 1990’s that shaped the contours of funeral service. For example, in addition to large casket and grave vault manufacturing and distribution companies, the insurance industry made strong ties with the funeral profession in the latter decades of the twentieth century. As a result, many firms incorporated aggressive sales tactics to grow market share and increase profitability through contractual arrangements for advance funeral planning with client-families. Other major factors that shaped funeral service care toward the end of the twentieth century were the rising popularity in cremation practices as a preference for final disposition (Gehrke 2015), the growing geographic distances between family members, and the shifting religious preferences among United States citizens (Pew Research Center 2012). Each of these issues, cremation, geography, and religion were considered more fully later in the research to assess the possible influences on deritualization trends. Laderman explained: “increasing social mobility, fragmenting

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56 Of notable contrast to the large SCI conglomerate approach is consolidator Carriage Services. Carriage combined a unique mix of decentralized management with the power of national support services to highly selected acquisitions. The result for many Carriage partnering firms were reported as extremely positive (Cumby 2015).

57 The common rationale used by funeral homes to offer pre-paid insurance plans funded through insurance policies for future services was that funeral insurance was something that everyone will eventually need; other types of insurance, such as automobile, home-owners, rental, disability, etc., provided protection only for possible scenarios, not eventual ones.

58 The Pew Forum on Religion & Public Life preferred to use the term “religiously-unaffiliated” to the more colloquial term “nones” to indicate those individuals who categorize themselves as atheists, agnostics, or those not affiliated with a particular religion. It should be noted that the “religiously-unaffiliated” does not indicate total absence of religious belief. In fact, the Pew Forum suggested that most of the “nones” profess a belief in God and claim that they are religious, spiritual, or both (Pew Research Center 2012:7).
families, declining religious attendance – these social forces can have a damaging impact of the number of funerals with a body present” (2003:209).

**Narrative Perspectives of Funeral Service from Popular Culture**

Having presented a brief history of funeral service, the next topic considered in the literature review was the perspectives of the funeral profession as understood by popular culture at large. The goal was not to report on every cultural mention of funeral directing and practice, but to achieve a broad survey of narrative perspectives within the prior two centuries of the professional funeral trade. The review surveyed both popular literature and film narratives that have shaped public sentiment about the American funeral service profession.

America’s death care ritual specialists, referred to in popular culture as “undertakers,” “morticians,” and most recently as “funeral directors,” have garnered a variety of strong public opinions following the professionalization of the trade in the aftermath of the Civil War. In reviewing popular American culture since the late-nineteenth century, three (3) common narratives were explored: (1) funeral directors as greedy and insensitive buffoons, (2) funeral directors as necessary (and often peculiar) social functionaries, and (3) funeral directors as committed vocational caregivers.

**FUNERAL DIRECTORS AS GREEDY AND INSENSITIVE BUFFOONS**

In the review of early literature and film, the first image of a professional funeral tradesmen to emerge in the cultural imagination of America was a stereotypical greedy and insensitive buffoon – even “merchants of a rather grubby order” (Mitford 2000:3). As the funeral industry began to take shape, early public sentiments regarding the dismal trade focused upon more humorous outtakes and satire of funeral service (Puckle 1926). Several influential examples emerged in the literature (Bowman 1959; Harmer 1962).

With remarkable wit and humor, Mark Twain’s *Life on the Mississippi* (1883) carried forward some of the earliest sentiments of the American death care professionals that would emerge by the twentieth century. The braggadocio undertaker in the narrative described his lucrative trade as such: “I’ve worked up a business here that would
satisfy any man, don’t care who he is” (1883:197). The undertaker explained further: “And there’s one thing in this world which you don’t have to worry around after a person to get him to pay for. And that’s a coffin. Undertaking?--why it’s the dead-surest business in Christendom, and the nobbiest” (1883:197).

In Mark Twain’s classic Adventures of Huckleberry Finn (1885), an undertaker was described in the context of his occupational role as working with a family in their home parlor toward the end of the nineteenth century.

When the place was packed full the undertaker he slid around in his black gloves with his softy soothering ways, putting on the last touches, and getting people and things all ship-shape and comfortable, and making no more sound than a cat. He never spoke; he moved people around, he squeezed in late ones, he opened up passageways, and done it with nods, and signs with his hands. Then he took his place over against the wall. He was the softest, glidingest, stealthiest man I ever see; and there warn’t no more smile to him than there is to a ham (1885:136).

In Look Homeward, Angel (1929), Thomas Wolfe connected humor with funeral service professionals by naming his fictional undertaker, Horse Hines. Horse Hines was described as “not a thin man, the effect of a skeleton clad in a black frock coat. His long lantern mouth split horsily in a professional smile displaying big horse teeth in his white heavily starched face” (Wolfe 1929:140). Hines was depicted as one who both sincerely cares for the dead as he is moved to tears over a deceased old lady, and one who jokingly conflates his professional practice with daily activities, such as when he refers to a cup of coffee as “a mug of that embalming fluid” (Wolfe 1929:140-141). Yet, Wolfe depicted Hines not merely in a joking manner. Having his feelings hurt in a conversation with a physician, Hines stated: “We are both members of honorable professions: in the hour of death when the storm-tossed ship puts into its haven of rest, we are the trustees of the Almighty” (1929:143). Hines attempted to wax further to no avail:
The sacred rites of closing the eyes, of composing limbs, and of preparing for burial the lifeless repository of the departed soul is our holy mission; it is for us, the living, to pour balm upon the broken heart of Grief, to soothe the widow’s ache, to brush away the orphan’s tears; it is for us, the living, to highly resolve—Yet, the physician, Dr. McGuire jokingly quipped back, “what about embalming the broken heart of Grief?” (1929:144).

The lighthearted stereotype narrative continued in popular culture with the radio and television program entitled *The Life of Reilly* (1940s-1950s) with the friendly undertaker Digger O’Dell. Perhaps one of Digger O’Dell’s most memorable lines that shaped not only his character but also public sentiment was: “I best be shoveling along.” Figure 12 below graphically depicted what many may have had in mind when thinking about a friendly undertaker (Jimbos 2011). For example, in one scene in this conversation, the main character Reilly said that he got himself in deep trouble by waking up the whole neighborhood when he rang a bell late at night in an attempt to scare off the juveniles which had become a real community problem. Perfectly on queue, Digger quickly responded, “that’s not true – no one stirred down at my place.” In the same conversation, Digger later explained that he too tried to clean up the neighborhood once when he ran for county mayor. The “friendly undertaker” said that his campaign slogan was: “Elect Digger O’Dell – he’ll put the lid on.”

![Figure 12: The Friendly Undertaker Narrative](image-url)
Eventually however, the one-dimensional jovial stereotype by which early American culture made sense of the deathcare profession, added another layer – one that both reinforced the buffoonish nature of funeral directing in American consciousness, but also became more critical of the business of undertaking. The connection of greed and deathcare was seen for example, in J.D. Salinger’s *The Catcher in the Rye* (1951), where the main character, Holden Caulfield, explored the theme of the phoniness of adult life, and mentions a wealthy undertaker named Ossenburger.

Richly developed satire emerged in the film *The Loved One* (1965), adapted from a book by Evelyn Waugh (1948). The motion picture was considered an irreverent dark comedy. The film depicted the Reverend Harry Glenworthy as an entrepreneur and owner of an elaborate cemetery called Whispering Glades – a parody on the name of Forest Lawn Memorial Park in Glendale, California. Deciding that he could make more money in senior citizen’s condominiums than in the funeral business, the Reverend decided to convert his cemetery to real estate. The chief problem was that the property contained many buried corpses. In the film, the Reverend, who was played by famed comedian Jonathan Winters, deliberated that “there’s got to be a way to get those stiff off my property!” The comedic response was to rocket the corpses into orbit (McCaffrey 1983).

Out of all the reviewed literature, there was no single resource as compelling and as damaging to the funeral industry’s image than Jessica Mitford’s *The American Way of Death* (1963). Far removed from the humored undertakers of old, like Digger O’Dell, Mitford’s vitriolic rebuke of the funeral industry exposed a cultural perception of greed and insensitivity. The American way of life, perpetually hooked on sensationalism (Grabe, Zhou, Barnett 2001; Whitt 2014), resonated with the argument of Mitford’s text. In short, Mitford wrote a muckraking expose about her view of funeral directors being unscrupulous death merchants who prey upon the bereaved just to make a profit.59 Mitford’s sharp criticism was made popular in part for her wit and style of

59 Other consumer advocates critical of the funeral service industry included Lisa Carlson’s *Caring for the dead: Your final act of love* (1998) and *Final rights: Reclaiming the American way of death* (Carlson and Slocum 2011). Carlson created the nonprofit Funeral and Memorial Societies Association. See also Chiappelli and Chiappelli *Drinking grandma: The problem of embalming* (2008).
writing. To be sure, Mitford's criticism was not just targeted toward a few greedy merchants of death, but the entire funeral industry. She questioned all of the common death practices of the day, including useless embalming, costly caskets, needless cemetery practices, unethical profitability, and nosy clergy. According to Mitford, it was both laughable and tragic that funeral directors would consider themselves grief counselors (Mitford 1963:178-179). In Mitford's narrative, the entire rhetoric of the funeral profession was suspicious. Mitford poignantly framed her critique with a question: "Merchants of a rather grubby order, preying on the grief, remorse, and guilt of survivors, or trained professional men with high standards of ethical conduct" (Mitford 1963:155)? Volumes of her bestselling text continued surfacing in the decades that followed – even some posthumously (see Figure 13 below).60

![Figure 13: The Ongoing Mitford Narrative on the American Way of Death](https://scholar.sun.ac.za)

**FUNERAL DIRECTORS AS NECESSARY SOCIAL FUNCTIONARIES**

The review noted that despite Mitford's widespread influence on American perceptions of the funeral profession, including decades-long legislation efforts that govern the profession even today, not all narratives agreed that the funeral profession was best limited to a buffoonish and/or money-hungry caricature. Popular narratives arose particularly in the late twentieth century to reinforce the idea that while it may be an odd profession for many to consider, professional funeral service was a necessary part of the modern world. In fact, another narrative found in popular American culture

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60 The Federal Trade Commission's Funeral Trade Rule, created in 1984 and revised in 1994, certainly was developed in part to the overwhelming response to Mitford's critique of the funeral profession. Funeral service was now guided by federal law that mandated full disclosure of prices and services to every family served.
regarding the funeral profession was that of a necessary, albeit peculiar, social functionary.¹⁶¹

American preoccupation with death and dying and the subsequent interplay between the emotions of grief and mourning have been well documented, and continue to be a normative and consistent part of American consciousness (Hughes 2013). One powerful example of a narrative that depicted funeral directors as professionals who perform necessary social functions was identified in the HBO’s widely acclaimed series *Six Feet Under*. The show was chosen as a significant cultural narrative for review because of the wide acclaim for its writing and acting.⁶² The TV series ran for five years (2001-2005) and was considered by many as one of the best shows in television history.

Depicting the life of the lovable yet dysfunctional Fischer family who owns and operates a family funeral home after the death of their father, the funeral directors in the series are not depicted in typical fashion, but as real people, with real problems, but who work to serve a public need. In fact, each episode of the series began with a scene where a death occurred within the neighboring community of the Fischer Funeral Home and which would precipitate a call in need of professional funeral services. Public interest in this adult-themed series may have in part been connected

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¹⁶¹ Long (1999:496-509) rightly noted that Mitford employed two methodologies in her scathing critique: (1) that of a consumer advocate and (2) that of a secular rationalist and anti-ritualist. As Mitford advanced her argument that funerals are just plain silly and sentimental, she did not recognize (or at least she did not explain in her text) that both methodologies often colluded together in her critique. For example, when Mitford concluded that funerals are based upon greedy morticians, she relied upon her perspective as a consumer advocate. When Mitford suggested that funerals are based on gullible people and religious myths, she switched her perspective to a secular rationalist view. In short, as a secular rationalist who already presupposed that rituals were mere empty sentimentality, it was already a foregone conclusion that her assessment of the funeral industry, and those that support the value of rituals therein, would be rejected. Mitford’s argument ultimately fails in one regard as she demonstrated a coinherence of two epistemologies without recognizing a distinction between the two. In short, Mitford unwittingly utilized a non sequitur argument – the condemnation of all rituals and ritual specialists does not necessarily follow from simply being a consumer advocate, but it does follow necessarily so from a rationalistic mindset that denies meaning and significance beyond the material world.

⁶² Six Feet Under (2001-2005) won awards for both popularity and excellence including nine Emmy Awards, three Screen Actor Guild Awards, three Golden Globe Awards, and a Peabody Award.
to the recurrent themes of how life and death and family drama were all explored. In *Six Feet Under*, the narrative of the funeral profession was deeply humanized.63 Despite some of the earlier public portrayals of funeral directors as greedy, buffoonish, and unscrupulous businessmen, the second narrative that emerged in public consciousness was that funeral practitioners perform necessary functions that serve a public good.64 Contrary to Mitford’s wishful thinking for the irrelevancy and demise of the funeral industry, popular American culture seemed willing to recognize that funerals and funeral service professionals were a regular part of daily life.

The review provided a further tentative conclusion about the ethos of popular culture. That is, comedy and funeral service seemed often interconnected. At one end of the spectrum, popular culture consistently portrayed funeral professionals themselves in a comedic way – whether they were fashioned in an appealing or relatable standpoint (e.g. the film *Bernie* and the television series *Six Feet Under*) or in a less appealing standpoint (e.g. the film *Get Low*). Yet, even at the other end of the spectrum of serious cultural critique, vitriol was expressed often in a comedic fashion as well (e.g. Jessica Mitford). One preliminary assessment of the apparent common connection between

63 This humanizing principle in popular culture was also evident in the film *My Girl* (1991). In this touching coming-of-age film, an eleven-year-old girl was grieving the loss of her mother. Interestingly, her awkward but loving father, played by comedian Dan Aykroyd, was a funeral director by trade. The movie’s directors chose not to depict Aykroyd strictly from the older narrative of a stereotypical money-hungry buffoon, but humanized him in the context of a father trying to raise his daughter without the assistance of her mother. This same pattern of complementing humor with humanizing and relatable elements was depicted in the film *Get Low* (2009), where Felix Bush, played by Robert Duvall, plans his own funeral with the local funeral director Frank Quinn, played by comedian Bill Murray. The funeral director, though driven by greed reminiscent of earlier popular appraisals of funeral directors, nonetheless recognizes that he serves a useful public function. Further, the film *Bernie* (2011), was a comedy and loosely-based actual story about an affable mortician in Texas, played by comedian Jack Black, who befriends a mean-spirited widow and eventually murders her. Despite the murder, the town recognized Bernie as a loved and important member of the community.

64 A recent example was found in the Academy Award winning Walt Disney film *Big Hero 6* (2014), depicting a 14-year old boy named Hiro who loses his older brother and inherits a robot name Baymax. This children’s animated movie demonstrated that funeral ritual was a natural part of life. What was significant for the review was that the role of funerals was an unquestioned and normative public good – simply part of what people do when faced with a significant loss.
comedy and death, or even more specifically, comedy and death care, was that throughout American history cultural attempts were consistently made to reduce the inevitable pain that the mysteries of death and dying often bring and the regular existential angst that accompanies the adaptation to loss. In short, comedic responses from popular culture at large may have indicated an entrenched human proclivity to avoid, hide, or ignore the realities of death.

**FUNERAL DIRECTORS AS COMMITTED VOCATIONAL CAREGIVERS**

Funeral service did not maintain one single cultural narrative in American society, but developed several different ideas that held common across American culture. The final narrative that was explored in the review was the cultural perception that funeral directors were also committed vocational caregivers with a strong sense of being called to a sacred work. Not surprisingly, this cultural narrative derived mainly from insider perspectives by funeral practitioners themselves who shared their personal view of the funeral profession as a vocation imbued with great significance and meaning.

Perhaps the most favorable narrative of the funeral profession was that funeral directors truly serve a high calling as committed vocational caregivers. This particular narrative made an important distinction between funeral service as an industry and funeral service as a professional calling. As a self-described poet-undertaker, funeral director Thomas Lynch best represented this vocational narrative. Lynch’s poetic prose in *The Undertaking: Life studies from the dismal trade* (1997), an American Book Award Winner and Finalist for the National Book Award, was beautifully plainspoken and insightful about what it means to care for the living while taking care of the dead. Lynch wrote: “Sometimes I stand among the stones and wonder.

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65 Lynch criticized Mitford’s negative point of view about those committed to the funeral profession while also being critical of much of what had become of the basic caregiving trade of undertakers, including the funeral industry’s push to secure future business through prepaid funeral contracts, the industry’s obsession with embalming and caskets, and corporate consolidators like Service Corp International, the Loewen Group, and Carriage Services (Lynch 2004; Long and Lynch 2013).
Chapter 2: Review of Related Literature


Based upon a review of Lynch’s books and popular-level articles, it was clear to see that his broad-based appeal across culture was not only because of his honed craft in turning a literary phrase, nor because of his willingness to be fully transparent about what he referred to as “the dismal trade.” Lynch’s philosophical candor made a lasting impression in American culture at least in part for his depth and breadth of thought that seemed to connect with the deeper consciousness of people and everyday life. Lynch pondered:

And as I watch my generation labor to give their teenagers and young adults some “family values” between courses of pizzas and Big Macs, I think Gladstone had it right. I think my father did. They understood that the meaning of life is connected, inextricably, to the meaning of death; that mourning is a romance in reverse, and if you love, you grieve and there are no exceptions – only those who do it well and those who don’t. And if death is regarded as an embarrassment or an inconvenience, if the dead are regarded as a nuisance from whom we seek a hurried riddance, then life and the living are in for like treatment. McFunerals, McFamilies, McMarriage, McValues (1997:25).

Another compelling example of the narrative that depicted funeral directors as vocational caregivers was found in the Public Broadcasting Station’s (PBS) Point of View Documentary entitled Homegoings. The subject of this film was funeral director Isaiah Owens and his funeral home in New York City’s historic Harlem neighborhood. Homegoings provided a moving portrait of a man who felt called since an early age to

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66 A documentary was eventually developed about Lynch’s important book that received an Emmy Award.

67 Victorian British Prime Minister, William E. Gladstone (1809-1898) allegedly said: “Show me the manner in which a nation cares for its dead and I will measure with mathematical exactness the tender mercies of its people, their respect for the laws of the land and their loyalty to high ideals.”
minister to his African-American community by caring for the dead and ministering to the living through affirmations of faith in African-American funeral customs. Owens’ explains: “There were always people like me. They might of not had a name, but they just kind of took care of the dead.”

From exemplars like Thomas Lynch and Isaiah Owens, an important cultural view of the funeral profession emerged. Perhaps devoid of the stereotypical greedy buffoonery of early American culture, and even the more simplistic view of funeral directors as necessary functionaries, the review noted that many men and women who committed their lives to the pastoral care of the bereaved and their dead demonstrated a different narrative – a narrative deeply rooted in a sense of calling to a specialized form of pastoral caregiving. Through rhyme and verse, the simple poem by Lori Papa captured the sentiment of how funeral directors were thought of by some as essential vocational caregivers – in this case told by a “mortician’s” wife (Papa 2014).  

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The Mortician

What does one look like?
Some stories portray
A revived, aged cadaver
in morning suit grey.

A scrooge-like old man
Whom leaves one feeling dread,
For his business is busying himself with the dead.

These stories all told,
Tales of creepiest creeps,
Speak of “diggers” who robbed those that now “rest in peace”.

Is it folklore and fear that breed stories and myth?
Should these be stacked away with Tales of the Crypt?

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68 Lori Papa’s husband, Paul Papa, was a director and co-owner at Brueggeman Funeral Home in East Northport, New York (www.Brueggemannfh.com).
Chapter 2: Review of Related Literature

I believe they have value
On All Hallows Eve
Or at campfire outings
or for scaring some plebes.

Other than that
They should "rest in peace"
We should Bury our Fears
As we have our deceased.

So, What does one look like?
I'll try to explain
With all fears aside,
There's some insight to gain.

For I know a Mortician
He's lived by my side.
My wonderful husband
with whom I abide.

A compassionate man,
Who knows of forgiving.
For his business is busying
himself with the Living.

His smile will calm you
and you'll rest assured
that he will support you
as you must endure.

He wears strength on his shoulders,
Respect on his arms
As he is your escort
Through some of Grief's harm

Current Industry Issues

Having provided both a brevity of funeral service history as well as cultural narratives of the deathcare trade, the literature review was further developed by an overview of what issues currently shaped the funeral service industry from an insider’s perspective with deference to the problem of deritualization. As a well-established industry of trade in the early twenty-first century, fortunately there was not a paucity of information available to better understand the dynamics of contemporary funeral service. The real challenge was to select the literature that was most applicable to the current research problem. Of particular consideration was current funeral service discussions and
debate related to the research question regarding bereavement and pastoral care (Capps 1983). To this end, the review explored the emerging conceptualization of the funeral industry extant by the start of the twenty-first century. Further, the review examined how one exemplary study contextualized re-ritualization and provided a measure of guidance for future practitioners.

AN EMERGING CONCEPTUALIZATION OF FUNERAL SERVICE

The literature review organized an array of topics reported significant by industry experts in three common areas of services: At-Need Services, Pre-Need Services, and After-Care Services (see Figure 14 below). At-Need Services was a term used by industry insiders to delimit the scope of funeral practitioners’ work with families who had recently experienced a death of a loved one. Pre-Need Services was a term used by industry insiders to delimit the scope of funeral practitioners’ work with families who were engaged in advanced funeral planning. After-Care Services was a term used by industry insiders to delimit the scope of funeral practitioners’ work with bereaved families days and months following funeral ceremonies. These three (3) key organizing topics suggested a macro-level view of the scope of contemporary professional funeral services available in the twenty-first century that were all designed to assist families before, during, and after a loss of a significant other. Further, these core services were helpful to understand the full integrated web of related industry issues, including the search for an evolving identity.

![Figure 14: Scope of Twenty-First Century Professional Funeral Services](https://scholar.sun.ac.za)

The literature reviewed made clear that each individual family funeral home or corporate consolidator chose the degree of emphasis to put toward pre-need, at-need,
and after-care in their own business plan. To be sure, prior to the 1980’s, the professional face of funeral homes majored primarily upon perfecting at-need ritual services of old – removing the dead from the place of death, preparing the deceased body for viewing, choosing the preferred merchandise such as casket and vault, providing visiting hours and a funeral ceremony for the family and community, and processing to the cemetery for final disposition (Burton 2014). By the 1980’s however, the funeral industry demanded more sophisticated business models. Local firms within a community became business competitors vying for the same death-care market. Funeral firms sought avenues to distinguish themselves and secure greater market share.\(^{69}\) Business profitability was perhaps at an all-time high, but the market for death was always fixed at local death rates. Providing different kinds of services became essential for the survival of many businesses. In exploring additional death-related services to meet public interest, the funeral industry fuelled the development of both pre-need sales and after-care services. In short, pre-need and after-care services not only protected market share, these ancillary services served to develop more market share in a highly competitive business environment.

Figure 15 below depicted one conceptualization for how funeral home business models utilized pre-need and after-care services for the purpose of improving at-need market share. What must not be missed here was that as a new century emerged, the funeral industry eventually developed a common business strategy in response to changing market conditions in order to do whatever was needed to survive and thrive among fierce competition.\(^{70}\) Ancillary services that met with public interest, such as pre-need and after-care, were a means to an end – potential higher profitability and greater percentages of the market share stemming from predictable deaths. The rationale was that for a funeral home to establish sustainable growth, and

\(^{69}\) Long and Lynch attributed an erosion of public trust toward funeral directors to what they referred to as the four P’s: Protection provided by caskets, Preneed planning, Personalization, and Pet care (2013:145).

\(^{70}\) Figure 14 was not intended to imply that funeral homes gave equal attention to pre-need and after-care services. In fact, pre-need sales, explained further in the review, was given much more consideration across the industry as a more effective means to secure market growth (Nikola 2014).
subsequently combat competitor funeral homes in the same area, pre-need and at-need services were needed.

![Figure 15: Strategy to Increase At-Need Market Share](image)

Thomas Lynch wrote honestly and candidly about the metrics of funeral service market share and the relative importance of the crude death rate to the funeral profession (1997:3-4).

*Every year I bury a couple hundred of my townspeople. Another two or three dozen I take to the crematory to be burned. I sell caskets, burial vaults, and urns for the ashes. I have a sideline in headstones and monuments. I do flowers on commission. Apart from the tangibles, I sell the use of my building: eleven thousand square feet, furnished and fixtured with an abundance of pastel and chair rail and crown moldings...In a good year the gross is close to a million, five percent of which we hope to call profit. I am the only undertaker in this town. I have a corner on the market. The market, such as it is, is figured on what is called the crude death rate – the number of deaths every year out of every thousand persons.*

*Pre-Need Sales*

With respect to preneed services in particular, the review noted that funeral homes across the nation began utilizing aggressive sales programs in the 1980s in an effort to sustain and grow market share. In fact, Howard Raether, the former NFDA Executive Director from 1948-1983 and considered by some as the father of modern funeral service (Woo 1999), suggested that “the history of funeral service will probably
define preneed as the phenomenon of the 1980’s" (Laderman 2003:183). Of course, preplanning was not a new service per say, as people throughout history had planned certain aspects of their funeral in advance. For example, a family who expected a loved one to die soon may have hired someone to make a coffin in advance of the death. Yet, by the 1980s, the funeral service industry reworked old ideas of advanced funeral planning.

The key to the new pre-need programs was not only to choose one’s casket or what type of service would be requested in advance, but to pay for the merchandise and services in advance as well. Prepaid funeral monies were kept in either insurance funded policies, backed by the financial strength and reputation of national insurance companies, or to a lesser degree, simple trust-funded accounts kept in local or national banks. To be clear, prepaid funeral contracts were designed to defer future revenue until the death occurred. Many funeral firms chose insurance-funded contracts because insurance agencies paid funeral homes a commission for each dollar sold. In this way, funeral homes had a built-in mechanism to hire and pay a sales counsellor and the firm itself, without touching the actual future revenue. To be clear however, state laws differed as to how consumer interests were protected with regard to pre-need laws, revocation fees, and excessive withdrawals of pre-need funds (Gilligan 2014).

Prepaid preneed arrangements, while being a service that many consumers wanted, were initially propagated best from large corporately-owned and publically traded funeral home conglomerates. Laderman (2003:184) explained: “with the rise of the corporate mortuary mentality came more aggressive selling tactics in the area of preneed sales, primarily because this serviced to the customer promised to bring a windfall of immediate revenues to stockholders, company leaders, and employees managing funeral houses.” As large funeral home conglomerates emerged and bought out local independently-owned and operated family firms, these consolidators often employed aggressive pre-need sales strategies to secure new family business away from other existing funeral homes. In fact, by 1997, it was reported that Service Corporation International had “presold over three billion dollars worth of funerals,
adding substantial capital without having touched a single corpse” (Laderman 2003:184). As a result, as locally-owned funeral homes recognized that their client-families were now going to a corporately-owned funeral homes in times of need, the locally-owned firms often responded with aggressive pre-need sales programs of their own (Lemasters 2014).

The new specialization of funeral homes in the 1980s became that of pre-need sales counselors and funeral insurance agents, often referred to simply as family-service counselors. Pre-need sales counselors were typically commissioned employees trained in key sales techniques, utilizing telephone calls, door-to-door sales, and bulk mail to generate pre-need leads. Even in recent trade journals, pre-need sales was still a strong component of professional funeral service (Bartsche 2014a; Bartsche 2014b; Bartsche 2014c; Shipper and O’Sullivan 2014; Filhaber 2015; Holland 2015).

In addition to aiding funeral homes in securing and growing market share, the review of literature made clear that pre-need also served a legitimate purpose for consumers as well. Many individuals who preplanned a funeral gained an invaluable sense of peace of mind by explicitly making their final wishes known in writing so that their family would not have to guess what their loved one would have wanted in terms of a funeral and final disposition. Further, individuals who preplanned may have indicated further “peace of mind” in knowing that they have created an event that will provide much support and comfort to their family and friends as they mourn their loss. As such, preplanning became a legitimate means to connect “peace of mind” business marketing with authentic care-giving that upheld the value of funeral events.

Pre-need programs were not however without problems. For example, many funeral homes who employed pre-need programs to gain future business, recognized that many pre-need contracts did not grow fast enough to keep pace with current cost of living. Since the 1980s, most funeral homes who prudently utilized insurance-funded or trust-funded mechanisms, were able to access the future funds as needed, and

71 Some states eventually developed Consumer Protection Laws that prohibited telephone sales marketers from calling anyone listed on a Do-Not-Call state registry.
Chapter 2: Review of Related Literature

even provided many families a refund to reflect how the pre-need policy produced an overage after all final expenses were paid. Nevertheless, after a United States economic collapse in 2008, many funeral homes no longer experienced overages with pre-arranged funeral policies. As such, funeral homes often realized short-falls in profits, as they were forced to honor price guarantee pre-need contracts at the time of need. To that end, current trade discussions focused on options for selling pre-need plans to client-families without price guarantees (Isard 2014). The literature was unclear as to if a majority of funeral homes would change their policies of offering price guarantees to families. Moreover, without a price guarantee, it was unknown if families would still be as likely to plan and pay in advance. Nevertheless, for important reasons such as a perceived “peace of mind” as well as being able to shelter assets for Medicaid eligibility for the elderly, pre-need sales continued to be a significant ancillary service domain for the funeral industry.

After-Care Services

With respect to after-care services, or services following the disposition of a loved one, the review of literature was not as substantial. To be sure, after-care was not perceived nearly as important of an ancillary service offering for the funeral industry as pre-need sales. In fact, though discussions regarding grief and after-care first appeared in the trade journals in the 1960s (Lamers 1962; Shoor 1962; Oman 1968), it was not formalized until 1981 by the National Funeral Directors Association (NFDA). The NFDA created a Pursuit of Excellence (POE) program for member firms that encouraged funeral homes to include after-care services as an essential component for client-families. The POE program became the premiere recognition award for funeral homes across the United States, setting the standards for professional excellence in the field of funeral service. Currently, the 2015 POE application process, which marked the thirty-fifth year of the national program, included after-care as one of the six key areas of proficiencies funeral homes have to demonstrate to be considered for the award (National Funeral Directors Association 2015:8). In Category 3 of the application, the NFDA maintained that funeral home distinction must include
excellence in service to the bereaved through a combination of at least four different types of after-care-related services, including some of the following:

- Provide after-care/grief support services for adults;
- Provide after-care/grief support services for children and/or teenagers;
- Hold a memorial service on a major holiday;
- Support or participate in programming with a local hospice or palliative care organization;
- Establish or maintain grief and bereavement resources in the funeral home or on the funeral home’s website.

Though the NFDA discussed ministering to the bereaved as early as the late 1960’s (Ministering to the Bereaved 1967), the single seminal book on after-care emerged in 2001 and was entitled *When all the friends have gone: A guide for aftercare providers* (Weeks and Johnson 2001). The text argued that after-care services were a natural extension of professional funeral service. More than a decade later, one of the authors of the original text, wrote a follow up article (Weeks 2012). This article questioned if after-care would save the funeral service profession, given current problems such as increased cremation rates that fostered declining profits, increasing requests for fewer or no services by client-families (i.e. deritualization), a proliferation of low-cost direct disposers, and negative perceptions of cremation by many funeral professionals (Weeks 2012:68-69). Weeks concluded:

*No, aftercare alone won’t save funeral service. If we continue our same traditional, profit-oriented, unbending, “not in my funeral home” ways, funeral service is doomed. But if we are willing to accept and embrace change – change in our clients, change in our service, change in our merchandise and change in ourselves – then aftercare, in our changed environments, can help save funeral service* (Weeks 2012:72).
Chapter 2: Review of Related Literature

What Weeks and others made clear was that after-care services were not accepted as broadly throughout the industry as pre-need sales services. Interestingly, many major studies of funeral service made no mention of after-care as legitimate part of professional funeral service. Moreover, even well-received critical studies of the funeral industry, such as Gary Laderman’s *Rest in Peace: a cultural history of death and the funeral home in twentieth-century America*, virtually ignored after-care as a significant development in the history of professional funeral service.

Part of the varying degrees of importance members of the industry gave to after-care services may be attributed to a lack of understanding of the purpose of after-care services for bereaved client-families as well as debatable views about what after-care actually accomplishes in a funeral home business model. With regard to the benefit of after-care for client-families, the funeral industry was somewhat unclear. The exact nature and extent of after-care services differed greatly. Early after-care programs were mostly directed toward widows and widowers with an educational focus (Weeks and Johnson 2001). For example, after-care programs were relegated to meetings that addressed important topics such as “how to change oil in a car” and “how to cook a meal.” Later after-care programs became more targeted at pastoral care for bereaved families. Some ideas advocated in the literature included the use of sympathy cards, grief support groups, lecture events to the community, social-support groups, men’s groups and hospitality tourism, including simple day trips or monthly outings (Mastrogianis and Lumley 2002; Weil 2013). Some funeral professionals even advocated for the use of technology, such as on-line website memorials, daily supportive emails, and digitized cemetery visits, as means to connect grieving families with opportunities to support a grief recovery process (Spore 2014; Stacey 2014).

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72 Examples of major studies ignoring for whatever reason the role after-care services played in the funeral industry included a study conducted by Northwestern University (Marks and Calder 1982) as well as a Funeral and Memorialization Information Council study, entitled “Study of American Attitudes Toward Ritualization and Memorialization,” often referred to in the literature as simply “the Wirthlin Report” (2005).

73 One study reported that funeral professionals should develop after-care programs that are tailored to men’s preferred style of coping (Mastrogianis and Lumley 2002:167-185). A discussion of coping styles was developed further in the literature review of grief and bereavement psychology.

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Yet, with regard to the question of the relative value after-care services actually bring to funeral homes, the industry appeared divided. For example, Table 6 below summarized many of the common explanations given by industry leaders as to the business purpose of employing an after-care program. Opinions ranged widely from after-care being a valued-added service to generate pre-need leads, to after-care being purposed to increase market share through building stronger relationships with families (Moore 2014), to after-care being an effective public relations program (Experts Deliver A Crash Course 2015). These common rationales legitimized after-care in terms of an inward-focused epistemology geared toward business profitability and sustainability (Pierce 2014). In short, after-care was thought of by many industry insiders as a good business practice. Interestingly, Weeks (2012:72) presented another option, that was atypical of business and profit-minded epistemology – after-care “is just better support for our families…the essence of what we do.” In this minority view, after-care was legitimized by an outward-focused epistemology geared toward pastoral care and support, not at all subsumed by a measurable profitability.

Table 6: A Spectrum of After-Care Legitimatization & Epistemology

<table>
<thead>
<tr>
<th>Pre-Need Leads</th>
<th>Market Share</th>
<th>Public Relations</th>
<th>Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>The value of after-care is to create pre-need leads through reconnecting with client-families</td>
<td>The value of after-care is to increase market share through building stronger relationships with client-families</td>
<td>The value of after-care is to foster more community recognition through effective public relations</td>
<td>The value of after-care is to offer better support to client-families through extended care</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Inward Epistemology of Profitability &amp; Business Sustainability</td>
<td>Outward Epistemology of Pastoral Care</td>
</tr>
</tbody>
</table>

Contrary to outsider allegations that funeral directors were merely driven by profit alone, the industry has always maintained a connection to the sacredness of the undertaking and perhaps a symbiotic relationship to the essential pastoral work of clergy (Jackson 1963; Jackson 1966; Bailey 1976; Wolfelt 1988). For example, as far back as the 1950s and 1960s and in the wake of Mitford’s scathing criticism of the practices of funeral directors, the industry quite naturally turned to religious authorities.
for support (Laderman 2003:113). In a historic move to mitigate against Mitford’s attacks, the NFDA purchased and disseminated 100,000 advance copies of Jackson’s *For the Living* (1963) to clergy all across America, further evidencing a connection between funeral service and pastoral care (see Figure 16).

![National Funeral Directors Association](image)

Figure 16: 1963 NFDA Letter to Clergy

74 Robert Fulton’s 1965 study suggested insights into the sacred and secular connection. Fulton found contradictory attitudes about American death practices and the funeral industry. Apparently, a majority of the 10,000 respondents thought that funeral directors may exploit a family’s grief, though they had no personal knowledge of actual incidents. The review was unclear if the discrepancy between negative attitudes and positive experiences was attributed to families actually receiving adequate pastoral care when faced with death (Fulton 1965). See also Hayslip, Ragow-O’Brien, and Guarnaccia, *The relationship of cause of death to attitudes toward funerals & bereavement adjustment* (1999).
Chapter 2: Review of Related Literature

Key figures such as Methodist minister Edgar N. Jackson and Lutheran minister Paul E. Irion defended the integration of pastoral care and the funeral industry. Moreover, Gamino, Easterling, Stirman, and Sewell (2000:79) concluded: “centuries of conventional wisdom suggest that bereaved individuals benefit from attending funeral services or similar rites of passage when a loved one dies.” The funeral industry was birthed out of this conventional wisdom that focused on family needs and pastoral care at the time of death (i.e. at-need), but has continued to develop and respond to the needs and desires of families over time (Howarth 1996; Cahill 1995; Cahill 1997; Cahill 1999). Two important ancillary services that emerged in the last twenty-five years of the twentieth century were pre-need and after-care services. As such, a conceptualization of the current scope of the funeral industry today included comprehensive services aimed at caring for families, before (i.e. pre-need), during (i.e. at-need), and after the death of a loved one (i.e. after-care).

Pre-need was much more embraced as a normative beneficial practice than after-care by industry practitioners. The review however noted the relative significance of both pre-need and after-care services to the funeral industry and their client-families. At the same time, several broad questions remained unanswered about the on-going development of after-care programming in the funeral industry. For example, it was unclear if the industry would fully embrace after-care as an essential function of professional funeral service, like that of pre-need sales, despite being touted by industry leaders for decades. Also, it was unknown how the industry would further validate their roles as after-care specialists, including the development of both educational and national standards. Moreover, it was uncertain what new skills and knowledge would need to be developed among existing funeral practitioners to offer better and more effective after-care services as a regular and normative part of professional funeral service. In terms of the current study, it was noted that after-care could provide a possible avenue to address the problems that the deritualization of death may bring about, including the relationship between grief and bereavement and

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75 Even funeral industry critiques, such as Joshua Slocum and Lisa Carlson’s 2011 Final rights: Reclaiming the American way of death, limit the criticism of the industry to at-need and pre-need related services.
lack of adequate pastoral care. As such, to further develop an understanding of the context of the research problem of deritualization and the funeral industry, a final study was reviewed.

AN EXEMPLARY CONTEXTUALIZATION OF RE-RITUALIZATION IN CONTEMPORARY FUNERAL SERVICE

The Funeral Service Foundation (FSF) developed an important and exemplary study that was relevant for the current research problem regarding the deritualization of death (Funeral Service Foundation 2013). Though the funeral industry supplied several important studies over the past fifty (50) years, the findings of the FSF study in particular were significant to develop a thicker understanding of the research problem in deference to meaningful re-ritualization in funeral service. Re-ritualization was operationalized for the study as an important term to describe an intentional act of restoring and reengaging in creative and meaningful ritual forms that give symbolic expression to significant thoughts and feelings of the bereaved within a social ethos that is no longer committed (nor obligated) to a conventional or fixed paradigm.

The intent of the FSF study was to address what industry insiders considered a major problem for the profession – namely the rising U.S. cremation rate. As was reported earlier, cremation rates in the United States had risen from 3% in 1960 to over 40% (CANA 2011). Why was cremation considered such an important problem for funeral professionals? The funeral service industry considered cremation a significant challenge because of the association with less revenue generated from both the lack of services rendered and the lack of merchandise sold in many cremation cases. For example, families who chose cremation often did not select traditional services such as embalming, viewing the deceased, or funeral ceremonies, nor did cremation families select typical merchandise such as costly caskets and vaults. As the funeral service industry identified falling profit margins, due in great part to the rise in

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76 Other significant studies were identified relative to the funeral service industry, including “Attitudes toward Death and Funerals,” conducted by Northwestern University, and “Project Understanding,” conducted by Notre Dame University, and “Studies of American Attitudes Toward Ritualization and Memorialization,” conducted by the Funeral and Memorialization Information Council (FAMIC) and Wirthlin Worldwide. Though valuable information was reported from these studies, the current research focused primarily on the findings of the FSF study.
cremation preferences, a plethora of concerns emerged. Strictly from a business perspective, the FSF had a vested interest in looking into what the funeral service industry could do to possibly reverse the deritualizing trends that created short-falls in business income.

The background of the FSF, as well as the findings from their recent study, was provided in order to relate to the current research inquiry. The FSF, a research, education, and philanthropic arm of the National Funeral Directors Association (NFDA), was officially recognized as a non-profit 501(c)(3) organization in 2002. Membership in the FSF represented a variety of funeral service entities, including funeral directors, casket manufacturers, and funeral supply manufacturers. Alan Creedy, a top advisor for the funeral industry, working in conjunction with the FSF, contacted Olson Zaltman Associates in 2009 to conduct a study for the funeral service industry. After completion of the FSF study, the findings were renamed “Breaking the Consumer Code.” Background into the Zaltman study was important to establish the validity and appropriateness for the current research.

Olson Zaltman Associates was a highly reputable research-based marketing and consulting firm that developed the patented Zaltman Metaphor Elicitation Technique (ZMET) used by many successful and diverse industries, including consumer goods (e.g. the Coca-Cola Company), technology (e.g. IBM), finance (e.g. Bank of America), entertainment and sports (e.g. Major League Baseball), automotive (e.g. Mercedes-Benz), and pharmaceuticals (e.g. Johnson & Johnson). The founders of Olson Zalman Associates, Jerry Olson, Professor Emeritus at Penn State’s Smeal College of Business, and Gerald Zaltman, Professor Emeritus at Harvard Business School, were noted pioneers in the field of marketing research. The ZMET process that the founders designed was aimed at digging deep into the minds of people primarily using qualitative interviewing and metaphors to probe deeply into unconscious emotions and

77 The FSF was originally formed in 1932 as the National Foundation of Funeral Service (NFFS), an educational trust for the funeral industry. In 1997, the NFFS changed to the Funeral Service Foundation (FSF) and merged operations with the NFDA. By 2014, the Hand-in-Hand Endowment had grown to over $6 million dollars.
uncover relevant feelings. The Olson Zalman group had conducted 500 studies in over 30 countries.

The final FSF study was developed by Olson Zalman in two (2) parts. Part one was a ZMET qualitative process and part two was a follow-up quantitative analysis. Upon approval of an FSF grant, the original qualitative part of the research was conducted in June 2012. Though Alan Creedy served as the project supervisor and chief research promoter supported by the FSF, the director of the actual research was James Forr of Olson Zaltman Associates. The initial question of the FSF ZMET study was concerned with examining the needs of the bereaved not being met by traditional funeral services. Table 7 below provided a helpful summary for how the FSF operationally defined traditional and non-traditional funeral services in the study.

Table 7: Traditional vs. Non-Traditional Funerals

<table>
<thead>
<tr>
<th>Traditional Funeral Service</th>
<th>Non-Traditional Funeral Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>The deceased body is present</td>
<td>The deceased body is not present</td>
</tr>
<tr>
<td>The funeral is led by clergy/religious leaders</td>
<td>The funeral is not led by clergy/religious leaders</td>
</tr>
<tr>
<td>The funeral service has a religious component</td>
<td>The funeral service does not contain a religious component</td>
</tr>
<tr>
<td>The service occurs shortly after death</td>
<td>The service is held significantly after death occurs</td>
</tr>
<tr>
<td>The funeral service is held in a funeral home or place of worship</td>
<td>The funeral service is not held a place of worship or funeral home</td>
</tr>
</tbody>
</table>

Respondents who were qualified as traditional, based upon the criteria above, did not qualify for the first part of the FSF ZMET study. Only respondents who were open to non-traditional re-ritualized options were initially utilized.

The first part of the study utilized a screener to select sixteen (16) participants. Eight (8) respondents were from Overland Park, Kansas and eight (8) were from Atlanta, Georgia. This homogeneous group was defined in terms of two additional criteria: “not

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78 The three psychological principles behind the ZMET process included: (1) Humans think in sensory images, not words, (2) emotion is critical to how we think, behave, and interpret our world, and (3) most thought, learning, and emotion occurs unconsciously and without awareness.

79 The researcher for the current study, C. Lynn Gibson, had in-depth telephone conversations and email exchanges on June 28-30, 2014 with James Forr to inquire about the specifics of the Olson Zaltmann research.
wanting a traditional service” and “generally interested in preplanning” a funeral. The study was evenly split between eight (8) men and eight (8) women. The targeted age group was Baby-Boomers (ages 50-70). There was a mix of ethnicity (Caucasian, African American, Hispanic, Bi-racial) and religious affiliation (Agnostic, Non-denominational, Protestant, Catholic, Mormon, Jewish). It was further noted that participants of the FSF study were paid $150 for completing the interview. Sixteen 90-minute qualitative interviews using ZMET research method were conducted. The study transcribed each interview into 18-20 pages of single space text (more than 300 pages in transcribed interviews overall).

The findings of the first part of the FSF ZMET study surfaced significant attributes characteristic of people who did not want a traditional funeral. In short, the respondents to the study suggested that if there was going to be a funeral event for themselves, the re-ritualized event would be characterized broadly by the following six (6) attributes.

- Personalized: custom, unique, original, mine
- Celebration: inspiring, uplifting, engaging, laughter
- Sharing: talking, stories, memories, exchange
- Togetherness: connection, intimate, comfort, warmth
- I Mattered: legacy, honored, valued, important
- Lives On: life, continue, remembered, alive

To be clear, the study suggested that an association existed between the broad attributes and what the respondents say they wanted in a re-ritualized (i.e. non-traditional) funeral event for themselves. As such, each of these six (6) characteristics were noted as possible insights into the problem of deritualization (Funeral Service Foundation 2013). The study was unclear however if the absence of these attributes, or some combination thereof, were a predictor of, or correlated with, families choosing not to have any service or ritual event at all.

In the second part of the study, follow-up quantitative research was conducted in January 2013 to test the validity of the qualitative ZMET findings. The research utilized
a version of Harvard’s Implicit Association Test (IAT) – a standard used in research for the past 20 years. The modified Olson Zaltman version was called the Implicit Association Evaluator (IAE). A sample was taken from 300 respondents nationwide. This study focused on the same age group (Baby Boomers ages 50-70). However, a significant methodology decision was made to further corroborate the initial FSF ZMET findings – this second quantitative part of the study included people who liked or affirmed a preference for “traditional” funeral services.

Quantitative data for the two groups, those who want a non-traditional funeral and those who want a traditional funeral, were reported statistically significant and consistent with the initial qualitative findings in the ZMET study (see Figure 17 below).

**The desired emotional experience is similar regardless of the preferred style of service (traditional or nontraditional)**

![Figure 17: Desired Emotional Responses](https://scholar.sun.ac.za)

Upon a first examination, the findings raised a question regarding the reported effect sizes of the study. In general terms, effect sizes were an important concept for research analysis in order to quantify differences between two groups. In the FSF ZMET study, the groups were those who wanted non-traditional funerals and those
who wanted traditional funerals. Forr reported that while a theoretical scale for effect sizes typically runs from -2 to +2, historical norms for studies using the ZMET marketing tool reported effect sizes between .09 and .12 as average. As such, though the effect sizes of the study indicated that the strength of association were relatively small regarding respondent preferences for celebratory funerals and funerals that promote a continuation of life, the fact that these two attributes exist at a 95% confidence level suggested that the association was still real and meaningful. The small effect sizes supported findings that the desired emotional experience was similar regardless of the preferred style of funeral. That is, a serendipitous finding of the FSF ZMET study was that traditional respondents to the IAE were similar to non-traditional respondents. In short, the desired emotional outcomes for a funeral among traditional and non-traditional respondents were basically the same. Both groups of respondents wanted a funeral service event characterized by several common drivers, including funerals that were personalized and original, celebratory and engaging, involved sharing of stories and memories, were intimate and warm, honored one’s life, and was about being remembered and living on.

Important implications of the FSF ZMET study included messaging to consumers, creating non-traditional options, and funeral home design. Regarding the messaging to consumers, the study suggested that funeral service providers should focus on deep commonalities among grieving people, such as a desire to share knowledge so that mourners can learn more about why the deceased mattered, as well as opportunities for mourners to connect to each other and to the deceased. In addition, funeral providers should think about brand messaging, appealing to the needs, values, and ideals that most people share. In terms of rebranding the image of a funeral director, the study emphasized the need to conceptualize funeral service professionals as imaginative creators that can devise creative services and ceremonies. Regarding the creation of non-traditional service options, funeral directors were suggested to recreate themselves in the metaphorical role of researcher, seeking first to understand how consumer’s feel about funerals, then digging deeper in an effort to understand the story of the consumer’s life – why did
this person’s life indeed matter? Regarding funeral home design, the study suggested the creation of space in the funeral home to encourage interaction, such as living-room floor plans and outdoor mourning spaces. Moreover, the incorporation of outdoor areas like healing gardens could prove to be helpful in emphasizing the transformative nature of funeral services.

The FSF ZMET study certainly provided a wealth of information to process as industry insiders sought answers to the trending patterns of cremation and an accompanying deritualization pattern. What appeared evident in the FSF ZMET study was that deritualization trends truly opened the door for re-ritualization in terms of meaningful and personalized funerary care (Christensen 2013; Ramshaw 2010). At the same time, the research was not without its shortcomings. The two most obvious gaps in the FSF ZMET study were the definition of terms and the perspective of inquiry. For example, the study sought clear definition of terms with the use of traditional and non-traditional respondents. Yet, the study may have overstated the case with deference to cremation trends. That the cremation rate was denoted at 40% was significant; however, that still leaves about 60% of attending families who are choosing burial in the more traditional manner. Also, assuming that if a cremation family was a predictor of non-traditional services, may not always be the case. In fact, some families chose cremation and a religious service, with a deceased body present, and inside a funeral home establishment. What was most problematic for the current research inquiry was the perspective of the respondents. The study focused exclusively on the perspective of one planning one’s own funeral, not what one’s family would choose or would need in terms of pastoral care. The FSF ZMET study provided helpful insights into what respondents wanted in terms of ritualization, but neglected what a family may need to

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80 Other implications for funeral directors included performing duties like a muse, giving consumers ideas and inspiring creative thinking. Customizing funerals in this way involved, but was not limited to, aspects of mood, setting, soundtrack, props, and costumes. Further, funeral directors were encouraged to adopt the role of a stage manager, who ensures that all funeral plans are carried out smoothly and according to the family’s satisfaction.

81 Other architectural cues included reducing psychological and physical confinement through comfortable furnishings and high ceilings to provide a sense of openness and stimulate creative thinking.
heal and adjust to loss. In practice, funeral rituals were actually planned by grieving family members, not the deceased. Ritualization was therefore the product of what the bereaved requested for comforting care, whether in traditional or non-tradition forms.

Having completed a comprehensive review on how the world is according to the funeral service profession, the review focused on the second disciplinary perspective essential to the research – the field of bereavement psychology.

2.3 Part IB: How the World Is According to Psychology

Before providing another significant perspective of bereavement caregiving, the first research question explored in the literature review was restated:

1: What do the multiple disciplinary fields of funeral service, bereavement psychology, and practical theology add to a conceptualization of bereavement caregiving, given the current cultural shift toward deritualization?

To better understand the problem of deritualization, the social science discipline of psychology was chosen as an essential field of knowledge needed to understand human existential experiences of loss, grief, and bereavement. Psychology was defined generally as “the scientific study of behavior, thought, and experience” (Krause and Corts 2012:3). Though the field of psychology emerged out of the explosion of knowledge in the nineteenth century, the etymology of the term suggested a much earlier origin. With derivations of the term arriving out of ancient philosophy, the word psychology comes from the Greek root word ἰχνή, (transliterated psyche) meaning the breath of life or more simply, the soul. More fully, psychology was considered literally the scientific study of the soul. As such, the unique contribution of psychology to the world of knowledge was the analytical and scientific study of both the mind and behavior.

From a broad macro perspective, the field of psychology provided a powerful epistemology for the current research that gave great insight into understanding the dynamics of how the problem of deritualization was processed by the human mind and behavior. Psychology, as a social scientific endeavor, was typically delineated by
four major goals: to describe, explain, predict, and change human behavior. As a social science, psychology was built upon a particular philosophy of knowledge predicated upon two fundamental beliefs: empiricism and determinism (Krause and Corts 2012:14). Empiricism, as a tenet of knowledge, derived understanding of the world from sense experiences. Knowledge about human behavior was suggested to come from careful scientific observation. Determinism, as a tenet of knowledge, derived understanding from lawful cause-and-effect relationships. In determinism, everything that happens occurs because conditions necessitate a certain outcome.82 These two fundamental tenets, empiricism and determinism, provided the framework for the social science of psychology. In short, “our understanding of behavior comes from observing what we can see and measure, and behavior is caused by a multitude of factors” (Krause and Corts 2012:14).

As a specialized branch of disciplinary knowledge, psychology received a relatively late start when compared to some of the other disciplines. Scientific inquiries into areas such as astronomy, biology, chemistry, and physics, for example, created an unprecedented explosion of knowledge by the seventeenth century. The origins for psychology were traced much later to Wilhelm Wundt (1832-1920), who was credited for the first laboratory and first journal of psychology. Though a full explanation for the slow development of the discipline of psychology was beyond the scope of the current research, the late development of the discipline was attributed in part to zeitgeist – a German term that refers to a general spirit of an age or set of beliefs during a given period of time (Krause and Corts 2012:14).83 In short, the unique creativity and contribution of a discipline like psychology was often contextually determined (Simonton 2004:14; Furumoto 1989; Simonton 1976a; Simonton 1976b).

Within the broad disciplinary scope of psychology, the current study isolated the literature review to trace the development of knowledge on one key core concept that

82 Philosophical determinism contrasted to human free-will was an age-old debate (Vihvelin 2013; Cohen 1919).

83 Simonton (2004:4) argued that there are four perspectives that explain the unique origins of scientific creativity: logic, genius, chance, and zeitgeist.
would aid in interdisciplinary understanding of the research topic: the psychology of death and bereavement (Kastenbaum and Aisenberg 1972; Canine 1996; Klicker 2007). In addition, as a means to delimit the related literature, the review considered the history and development of bereavement from primarily a Western Judeo-Christian perspective to the modernist framework in the twentieth century. Further, contemporary issues of grief and bereavement research were considered as well to elucidate an emerging post-modernist framework guiding researchers and clinicians in the twenty-first century.

**Grief History and Development**

The chief concern of the review of related literature in the field of psychology was to discern how a contemporary understanding of grief as a psychological construct emerged among competing theories (Parkes, Laungani, Young 1997). Grief, as a ubiquitous human response to loss, was identified as a cross-cultural and cross-historical source of significant curiosity and interest (Gilbert 2002; Klicker 2007; Parks 2001). Much like ritualization, which was described in some detail in the current study as the normative human behavioral response to death that has occurred since the origins of the human species, grief was defined as the ubiquitous human “experience of one who has lost a loved one to death” (Troyer 2014:40). To better understand the development of knowledge about the human experience of grief, it was helpful to organize the literature loosely into five main periods: (1) the Ancient Period (antiquity to 600AD), (2) the Medieval Period (600-1500 AD), (3) the Early Modern Period (1500-1750 AD), (4) the Late Modern Period (1750-1970 AD), and finally (5) the Postmodern Period (1970-Present). Despite the universality of human grief, what was clear in the literature was that grief as a full psychological construct worthy of scientific investigation and research did not surface until the Modern Period (Granek 2010; Feifel 1959). A survey of the historical periods was examined to elucidate how contemporary post-modern conceptions of grief were born.

The significance of the organization of these periods was not to exhaustively explore all cultural responses to grief or even to describe rigid or formalized systems of thought throughout history. A meta-analysis of responses to death is beyond the scope of the
current study. Instead, the review offered a helpful organizing schema to trace the
development of thought forms among competing theorists and clinical lore throughout
history for the purpose of achieving a comprehensive overview of grief (Capretto
2015). The focus of the review was to ascertain the main contributors to a
psychological construct of grief. What was evident was that the contemporary
conceptualization of grief emerged out of a long history of humanity attempting to
understand and respond to the common phenomenon of experiencing deep sorrow or
distress as a regular part of life.

THE ANCIENT PERIOD (ANTIQUITY – 600 AD)
The earliest descriptions of grief in the literature were predicated upon basic human
psychological responses to loss. The literature of the Ancient Period, dating from
antiquity through approximately 600 AD, described the experience of grief in common
human terms, rather than proffering a strict prescriptive or systematized taxonomy
of the concept. This normative view of grief was demonstrated by the writings of some
of the great philosophers and poets of the Ancient Period, such as Sophocles (c. 496-
406 B.C.E.), Euripides (c. 484-406 B.C.E.), Ovid (43 B.C.E.-17 C.E.), and Cicero (106-
43 B.C.E.) of antiquity (Kelley 2010:32). Sophocles, for example, described the grief
of human anguish as such: “Grief teaches the steadiest minds to waver” (Blondell
1998). Moreover, Marcus Tullius Cicero’s famous ancient quote on grief stated:
“Friendship improves happiness and abates misery, by the doubling of our joy and the
dividing of our grief” (Cicero 2015).

Likewise, the ancient Scriptures expressed many of the same timeless reflections
about the universal human response of grief to loss (Bailey 1979; Rutherford and Barr
1990). For example, the prophet Isaiah described the great compassion of the
messianic suffering servant: “Surely our griefs, He Himself bore, and our sorrows He
carried” (Isaiah 53:4 NASB). The prophet Jeremiah described the elemental pain of
grief this way: “My joy is gone; grief is upon me; my heart is sick within me” (Jeremiah
8:18 ESV). Similarly, Jesus poignantly described how he felt as he considered the
suffering he would endure: “My soul is deeply grieved to the point of death” (Mark
14:34 NASB). What must not be missed in the literature of the Ancient Period was the
lack of need to systematize a formal construct of grief and bereavement. The ubiquitous responses to loss were primarily lived as shared experiences of deep sorrow rather than formally studied and codified.

An important development in the Ancient Period that would provide a foundation for changing perceptions of the finality of death was noted. Towards the end of the Ancient Period, a powerful religious ideology emerged that would have great effects in the perceptions of death in the Medieval Period. In specific terms, the way many people responded to death would change as a result of a growing Christian view of hope in the physical resurrection of the dead. The emerging Christian perspective of death in the Ancient Period did not remove from social consciousness the normative expression of grief as a shared experience to a loss of life, but rather added a newer dimension of hope for future existence. In examining Christian epitaphs of the first six centuries, the Reverand John McCaul (1869:xii) noted:

In the Christian epitaphs we find no fretful impatience under visitation, or angry questioning of the propriety of the bereavement, but, on the contrary, submission and resignation – no giving way to despair, but the calmness of hope – no uncertain speculations or dim anticipations of future existence, but a confident belief in the resurrection of the dead and the life of the world to come.

Anglican Bishop NT Wright confirmed that from the time of Christ “until at least the late eighteenth century, many tombstones and memorials were inscribed with the Latin word resurgam, which means ‘I shall rise,’ indicating that the now-dead person believed in an intermediate sleep to be followed by a new bodily life at some future point” (Wright 2008:16). While the Ancient Period saw a rise in a significant new theology of death that would eventually have a great effect on the response to grief for many people, such as the belief of a physically resurrected body for a person of faith in Christ, generally the whole period itself was best characterized by understanding grief as the normative shared response to human sorrow.
THE MEDIEVAL PERIOD (600-1500 AD)
The Medieval Period (600-1500 AD) was often referred to as the Middle Ages or even the Dark Ages. Commonly characterized as a period of intellectual darkness following the decline of the Roman Empire, the medieval responses to death witnessed the stunning effects of the ideology of Christianity that was sweeping across the known world. Once the Christian faith became inextricably tied to the social and political structures of the medieval world, a revolutionary perspective of death and grief emerged. Historian Philippe Aries (1974:69) remarked: “there was a great chasm between the attitudes of Antiquity concerning the dead and those of the Middle Ages.”

Apparently, the Christian religious ideology birthed toward the end of the Ancient Period, that embraced optimism in the physical resurrection of dead bodies in the future, also shaped the way people cared for the dead human bodies in the present. A significant characteristic of the Medieval Period was how the bereaved intimately mourned the loss of loved ones and entrusted the care of their dead to the church. To be sure, “Christianity acted slowly, in effect, to demarginalize the dead” (Binski 1996:10). In fact, it became common to associate cemeteries and churches together. For example, “in a charter of 870, Louis the German recalls that his parents had a church built ‘in order to have a cemetery for the dead in that place’” (Aries 1981:51).

Grief responses to loss in the early medieval world carried forward both an attitude and a practice of death. In describing a common mentality about death, Aries noted that there was “the persistence of an attitude toward death that remained almost unchanged for thousands of years, an attitude that expressed a naïve and spontaneous acceptance of destiny and nature” (1981:29). In describing the ancient attitude of death as “the tame death,” Aries explained: “the tame death is the oldest death there is” (1981:28).

At the same time, while general attitudes of death remained fairly constant among the bereaved, ideological seeds planted in the Ancient Period would give rise in the Medieval world to a radical change in practices affecting the psychology of grief – namely death became close and familiar and less marginalized as a forbidden or unclean taboo. For example, a precursor to the demarginalization of death was
identified in the story of the resurrection of Lazarus of Bethany. In John 11:1-45, Jesus demonstrated an inverted approach to the dead that would eventually shape the entire medieval perspective of death. In this passage of the Bible, when Jesus asked for the gravestone of Lazarus' tomb to be rolled away, he radically demonstrated a break in established societal barriers and ancient taboos about the living among the dead. The willing and intentional closeness of Jesus to the sick and the dead was recognized as a sharp contrast to ancient Judaism that relegated a dead human corpse as a source of great impurity.

_The one who touches the corpse of any person shall be unclean for seven days. That one shall purify himself from uncleanness with the water on the third day and on the seventh day, and then he shall be clean; but if he does not purify himself on the third day and on the seventh day, he shall not be clean. Anyone who touches a corpse, the body of a man who has died, and does not purify himself, defiles the tabernacle of the Lord; and that person shall be cut off from Israel. Because the water for impurity was not sprinkled on him, he shall be unclean; his uncleannness is still on him_ (Numbers 19:11-13 NASB).

Similarly, in the pagan Roman world, the physical dead body was abhorred by the gods, to which appeasement would be required. Those dealing with grief from the loss of a loved one to death must distance themselves from their dead _extra muros_ or outside of the city walls. Aries explained: “the cemeteries of antiquity were always outside the towns, along the roads like Appian Way in Rome” (1981:30). Roman imperial law eventually prohibited the bereaved to bury their dead in the city, unless their dead were held in high special esteem, or _triumphales_, like the body of an Emperor (Binski 1996).

The distancing from the dead as observed in the Roman world was consistent with many early civilizations in the conviction that burial grounds were necessary to separate the living from the dead. Greene reported, “the ancient Egyptians build a necropolis, a city of the dead, outside their cities” (2008:7). Moreover, in ancient
Chapter 2: Review of Related Literature

Greece, people built cemeteries on small islands surrounded by water. It was believed that spirits of the dead, sometimes referred to as “shades,” could not cross water to the land of the living (Greene 2008:7). Aries explained, “whether they were buried or cremated, the dead were impure; if they were too near, there was danger of their contaminating the living (1981: 29).

By the start of the Middle Ages, however, the psychology of grief was impacted by the changing practice regarding the proximity of the dead. Instead of embracing the common aversion to the dead, a common funerary practice of the Christian bereaved, first in Africa and then later in Rome, was the urbanizing of their dead. This demarginalization was depicted by the construction of basilican churches inside the city walls where the dead were buried (Olyan 2004). During this period, the ways the bereaved responded to their loss was profoundly different than in the Ancient Period. According to historian Philippe Aries, this newer manifestation of intimacy with the dead was marked by a newfound ritualization of excessive and intimate mourning (1974:66). Aries concluded (1981:30):

>The change is remarkable, for it reflects a profound difference between the old pagan attitude and the new Christian attitude toward the dead, a difference that existed in spite of their mutual acceptance of the tame death. Henceforth and for a long time to come – until the eighteenth century – the dead ceased to frighten the living, and the two groups coexisted in the same places and behind the same walls.

In the Medieval Period, grief as a systematic concept, received sparse attention. Nevertheless, the literature suggested that grief as a shared response to a loss in death was characterized no longer as simply an expression of normal sorrow, described in the Ancient Period as the tame death, but was more nuanced to include grief as intimate mourning.

THE EARLY MODERN PERIOD (1500-1750 AD)
In the Early Modern Period (1500-1750 AD), a development in understanding of the psychology of grief was advanced. Though most scholars begin their history of grief
with Sigmund Freud in the Late Modern Period (Bonanno 2009:14; Stroebe, Hansson, Schut, Stroebe 2008:45, Klicker 2007:22 Spiegel 1977:29), the review of literature surfaced a much earlier turning point in the development of grief as a psychological concept. While the pioneering work of Freud was described in fuller detail below, a closer look at a seminal text written in the Early Modern Period was warranted. Specifically, the massive text by Robert Burton, entitled *The Anatomy of Melancholy*, was examined for its profound contributions to opening up the discussions about contemporary grief theory in the Early Modern Period.

Before Burton’s landmark text was reviewed however, it was important to note the continuity of the prior historical periods and the solidarity of social consciousness. This social understanding of grief, as described in the literature, was predicated upon the understanding of grief as normal sorrow (as discussed in the literature from the Ancient Period) and grief as intimate mourning (as discussed in the literature from the Medieval Period). Within these two contexts of grief, normal sorrow and intimate mourning, the Early Modern Period would construct a further nuance that advanced human knowledge of grief. At the same time, cultural conditions continued to describe the elemental dynamics of grief. For example, one cannot ignore the profundity of grief as expressed by literary masters such as Shakespeare (1564-1616), when he wrote in his Sonnets: “But day doth daily draw my sorrows longer / And night doth nightly make grief’s strength / seem stronger” (Shakespeare Sonnet XXVIII). In addition, Shakespeare’s King Richard II spoke: “The shadow of my sorrow! Ha! Let’s see: / ‘Tis very true, my grief lies all within; / And these external manners of laments / Are merely shadows to the unseen grief / That swells with silence in the tortured soul” (Shakespeare King Richard II). To describe the immense power of grief and its effect on a tortured soul, Shakespeare stood in solidarity within the social understanding of a normative human response to loss. In short, grief was received as a painful response to loss.

Within the solidarity and uniformity of the experience of grief, the Early Modern Period made a significant advancement in how grief would be conceived for centuries ahead. The advancement in the knowledge of grief in the Early Modern Period was born out
of a very rich period in the history of ideas. Power during this time began shifting from Popes to Princes and from the universal church to secular states (Burton 2001). The world as a whole became much wider and much deeper as ships sailed around the entire world and as people began looking beyond holy canonical books for truth and wisdom.

The Early Modern Period was characterized as the Age of Reason and a period of human enlightenment. With a new boldness and confidence, the Enlightenment marked a significant cultural movement that was rooted in a new value system in human reason, rather than traditional systems of shared religious beliefs. The Early Modern Period gave us many notable scholars. For example, in the area of philosophy, the world was changed by men such as Rene Descartes (1596-1650), who proffered the Cartesian dictum “I think, therefore I am.” Examples of other philosophers include Baruch Spinoza (1632-1677) and John Locke (1632-1704). In science, men such as Copernicus (1473-1543), Galileo (1564-1642) and Isaac Newton (1643-1727) forever changed the way people understood the physical world. Moreover, in religion, such notable figures as Martin Luther (1483-1546), Philipp Melanchthon (1497-1560), and John Calvin (1509-1564) generated great reform movements of the Christian faith.

Indeed, while there were great shifts occurring throughout the world in the Early Modern Period, including innumerable examples of cultural depictions of the universal human response to loss, Robert Burton’s seminal text emerged. His comprehensive study on melancholy was the first prescriptive and systematic treatment that documented the process of grieving. In fact, some psychologists contended that Burton was the first real theorist to define the concept of grief from a psychological perspective (Archer 1999).

Robert Burton (1577-1640) held a lifetime appointment as the librarian of Christ’s Church College at the University of Oxford. Being a very religious clergyman, he was also the vicar of St. Thomas, Oxford and the rector of Seabrave, Leicestershire. As an exemplar of the cultural shifts occurring in the Age of Reason, Burton wrote *The
Anatomy of Melancholy in 1621, and continued to revise this massive text of greater than a thousand pages through five editions until his death.

Burton wrote his text under the pseudonym of Democritus Junior. What was impressive in the review was Burton’s dissected analytical layout of his subject matter, where he marshaled learning from numerous scholars that were his contemporary as well as those of antiquity. His text, though conceivably described as messy in modern terms for its meandering lack of closure and sophistication of the subject matter, was nonetheless carefully organized into three main sections: (1) causes and symptoms of melancholy, (2) cures of melancholy and (3) love and religious melancholy. Though Burton’s primary topic was that of melancholy, or what would be referred to today as depression (Archer 1999:12), he opened the door in a significant way to how grief would be understood.

Burton had a veracious appetite for books and learning, and described himself as a scholar penned up in his studies (Burton 2001:17). Burton’s unique style was indicative of early enlightenment thought:

What the present reader may find strange is Burton’s eager allowance of hearsay and observation, myth and science, superstition and common sense, to help him in his hunt for causes, and provide more than cosmetic in the makeup of his explanations: not merely citing heredity, disease, dotage, and personal loss as sources of melancholy, while displaying a skepticism as ardent as his faith; but blaming God, evil angels as well as devils, a bad balance among the four humors, the discoveries of chiromancy and physiognomy, indurate dishes and sharp sauces, unsuitable parents, odors of the earth, even the stars themselves (Burton 2001:x).

Burton’s contribution to the history of grief as a concept was chiefly tied to his passion to relieve himself of melancholy – a sense of anguish and torment affecting the body, mind, and soul. In his extensive prefatory notes to the reader of his text, Burton described the process of his research:
Chapter 2: Review of Related Literature

About him lay the carcasses of many several beasts, newly by him cut up and anatomized; not that he did contemn God’s creatures, as he told Hippocrates, but to find out the seat of this atra bilis, or melancholy, whence it proceeds, and how it was engendered in men’s bodies, to the intent he might better cure it in himself, and by his writings and observations teach others how to prevent and avoid it (Burton, 20).

For Burton, the manifestations of melancholy could be traced to a medical model of explanation. Building upon an antiquated belief in the human body’s humoral system, many medical practitioners in the Early Modern Period maintained that the body had four types of liquids necessary for proper functioning, including blood, phlegm, yellow bile, and black bile. Burton’s text attempted to locate the madness of melancholy in the black bile of the physical body. Burton’s remedy suggested that keeping these humors in balance was the key to mental well-being and functioning in life.

Burton set forth his clear thesis about melancholy as such: “melancholy, the subject of our present discourse, is either in disposition or habit” (Burton 2001:143). Burton suggested that the first type of melancholy is manifested as a transitory disposition that affects all people. He wrote: “from these melancholy dispositions, no man living is free, no Stoic, none so wise, none so happy, none so patient, so generous, so godly, so divine, that can vindicate himself; so well composed, but more or less, some time or other, he feels the smart of it” (Burton 2001:144). Of this first type of dispositional or transitory melancholy, Burton argued there was no cure.

Burton suggested that the second type of melancholy, the melancholy of habit – was more insidious. According to Burton, some people could not help but turn normal dispositions of melancholy, of which grief would be included, into long-standing habits. For some, dispositional melancholy became habitual melancholy. Burton explained:

Upon every small occasion of misconceived abuse, injury, grief, disgrace, loss, cross, rumour, etc. (if solitary of idle), yields so far to passion, that his complexion is altered, his digestion hindered, his sleep gone, his spirits obscured, and his heart heavy, his hypochondries
misaffected; wind, crudity on a sudden overtake him, and he himself overcome with melancholy (Burton 2001:145).

Burton’s description prescribed physical consequences that arose from melancholy attached to human behavior. The habitual form of melancholy must be treated because it was determined to be a chronic and continual disease (Burton 2001:146). For Burton, melancholy as a disease, was contrary to how a good and benevolent God created His human subjects to be. Though Burton believed in the excellency of humanity, he also believed that these most noble of all creatures had now turned from a state of blessedness and happiness to lives that were both miserable and accursed. He must eat his meat in sorrow, subject to death and all manner of infirmities, all kind of calamities. Great travail is created for all men, and an heavy yoke on the sons of Adam, from the day that they go out of their mother’s womb, unto that day they return to the mother of all things. Namely, their thoughts and fear of their hearts, and their imagination of things wait for, and the day of death (Burton 2001:131).

What may be most significant of the Early Modern Period regarding the historical contribution to an understanding of grief was Burton’s work in acknowledging that grief was a transitory expression of a specific type of melancholia. Granek (2010:49-50) noted: “While Burton (1651) did contribute to the foundation on which grief as a psychological kind developed, in the sense that he included it as part of the domain of medicine, he did not define it in the same way it is conceptualized today.” Nevertheless, the Early Modern Period advanced human knowledge concerning the psychology of grief. Despite Burton’s belief that some habitual manifestations of grief was a sign of a physical disease by which treatment was needed, the Early Modern Period best characterized normal grief for most people as transitory melancholy.

THE LATE MODERN PERIOD (1750-1970)
In the late modern period (1750-1970), grief as a full psychological concept worthy of scientific observation surfaced. Several significant competing theories emerged in this period. Before Freud’s seminal Mourning and Melancholia (1917) was examined, the
review noted the significant contributions of Benjamin Rush (1745-1813) and A.F. Shand (1858-1936). In addition, the seminal thinking of post-Freud contributors were also briefly reviewed, including Karl Abraham (1877-1925), Helene Deutsch (1884-1982), Erich Lindemann (1900-1974), John Bowlby (1907-1990), and Elizabeth Kübler-Ross (1926-2004). In total, these eight (8) contributors represented most of the key thinkers of the Late Modern Period that shaped what came to be known as the standard model of mourning (Hagman 1995).

**Benjamin Rush**

Benjamin Rush (1745-1813), an American physician, writer of the first American textbook on chemistry, and one of the signatories of the American Declaration of Independence, wrote specifically about the topic of grief in his seminal text *Diseases of the Mind* (1812). Closely related to Burton’s proclivity of examining grief as a manifestation of a physical malady, Rush “too saw grief as a potential cause of death” (Parkes 2001:26). Also, by building upon the prior period’s general conceptualization of grief as transitory melancholy, Rush isolated the topic of grief in a historic way. Rush’s chief contribution was that he offered both a thick description of grief as well as needed remedies. For Rush, physicians must be acquainted with the symptoms and cures for grief because, as a normal practice, physicians will be faced with obligations to witness grief as a result of being unsuccessful to heal and save life (Rush 1812:318).

Rush advanced psychological understandings of the key symptoms of grief. His taxonomy of acute grief symptoms included insensibility, syncope (i.e. fainting), asphyxia (i.e. labored breathing), and apoplexy (i.e. stroke). Chronic grief symptoms included fever, wakefulness, sighing (with or without tears), dyspepsia (i.e. indigestion), hypochondria, loss of memory, gray hairs, marks of premature old age in the countenance, catalepsy (i.e. suspended posture), profound sleep, and madness (Rush 1812:318). Interestingly, Rush also contended that there were instances where someone would literally die of a broken heart:
(Grief) sometimes brings on sudden death, without any signs of previous
disease, either acute or chronic. Dissections of persons who have died
of grief show congestion in, and inflammation of, the heart, with a rupture
of its auricles and ventricles (1812:318).

Regarding cures for grief, Rush believed that there were both physical and moral
remedies. Being a physician however, he did not prescribe moral remedies,
suggesting that these remedies belong to another profession. Concerning physical
cures for grief, Rush described six possible remedies. Rush suggested that the first
remedy to be given in liberal doses was opium - “in order to obviate wakefulness”
(Rush 1812:320). Though he recognized that sorrows generally differ in their degrees
(Rush 1812:320), a second remedy for grief was the discharge of tears. Grief, it was
assumed, was often aided by simple crying. Third, some grief reactions may be
remedied by bleeding and purges.

Rush’s fourth remedy for grief went against recent tradition and the longstanding ethos
that encouraged a greater intimacy with the dead. Rush argued that the person
afflicted with grief should not see the deceased body of their loved one again. Instead,
the deceased body should be interred quickly and as far as possible from the living.
Rush explained: “graveyards in a city, and in places of public resort, are very improper,
inasmuch as they either renew, and perpetuate grief, or create insensibility to death,
and a criminal indifference to human dust” (1812:321). To justify this change in
funerary customs, Rush pointed back to the practices of the biblical patriarchs, like
Abraham, as exemplars of rational judgment when facing grief.

The fifth remedy Rush mentioned came after all ceremonies have concluded. The
person afflicted with grief should be advised to receive visits from friends. Yet, what
was important was that friends were to imitate the wisdom that was demonstrated by
Job’s friends, who “sat down on the ground with him for seven days and seven nights
with no one speaking a word to him, for they saw that his pain was very great” (Job
2:13 NASB). Rush explained the remedy: “There is science, as well as sympathy in
this silence, for in this way, grief most rapidly passes from the bosom of the sufferer
into that of his friend” (1812:323). It is only after a considerable period of silence that a friend should offer consolations, and only then should consolations be offered by “reason and religion” (1812:323).

Rush’s sixth and final remedy was applicable after weeks of mourning had occurred. Rush suggested that great care should be taken “never to mention the names of the deceased persons to any of their friends, nor to allude to any thing that by means of association can revive their memories” (1812:324). Apparently, Rush believed that even after weeks of mourning, people can be susceptible to returning to a state of severe grief. As such, all cheerfulness should be avoided for a considerable period of time.

**Alexander Faulkner Shand**

Following Rush, British psychologist Alexander Faulkner Shand (1858-1936) was another pioneer in the psychological conceptualization of grief. He was also one of the founding members of the British Psychological Society. In his seminal text, *Foundations of Character* (1923), Shand described the laws of sorrow and the types of grief reactions to loss. Shand’s pioneering effort in psychology was his argument that a complete science of the mind was impossible without including a science of character (1923:1). As such, Shand’s contribution to the Late Modern Period was perhaps one of the first thorough studies of the psychology of grief (Granek 2010:50).

Shand’s work has been lauded by some as clearly ahead of his time. In fact, his seminal text was remarkable because “he described many of the features of grief that are now familiar from modern research” (Archer 1999:14). In addition, he also predated other theoretical developments in psychology, such as the link between frustration and aggression, a hierarchical organization of behavior and human attachment, and the importance of negative feedback – all of which would become important contributions to psychology in later decades (Archer 1999:14). At the same time, what was evident in Shand’s impressive and descriptive work was the absence of empirical research. Instead, Shand utilized the work of the great dramatic poets of history. For Shand, the knowledge of human character was greatly unsystematic and
too difficult to control. Instead, Shand pointed to different sources of authority to garner wisdom. Shand remarked: “a noteworthy part of the old and traditional knowledge of character is stored in fables, proverbs, and maxims of mankind” (1923:6-7). Shand’s logic was that the provisional laws of nature, of which grief and sorrow were a part, was found in the ancient knowledge “which has been tested afresh by one age after another, and has survived for our use” (1923:7).

Shand’s *Foundations of Character* was organized into three main sections: Book I: the Conception of Character, Book II: the Tendencies of the Primary Emotions, and Book III: the System of Desire. In the second book, Shand explored the primary emotion of sorrow. Of all the primary emotions known in modern psychology, Shand believed that sorrow was the most difficult to interpret (Shand 1923:301). In his constructions of human sorrow, Shand described four primary grief reactions: “one active and directed aggressively to the outside world, another depressive and lacking energy, a third suppressed through self-control, and a fourth involving frenzied activity (Archer 1999:14).

In addition to the four primary grief reactions mentioned above, Shand also enumerated several insightful secondary tendencies of sorrow. A brief description of Shand’s twenty-three (23) laws of sorrow was provided below in order to garner a shape for how he developed with great significance his psychology of grief.

**Laws of Attraction and Restoration**

- **Law 59:** The sorrow of love is ever attracted to the beloved object, and, in diverse ways, strives to maintain all that remains of the former union (Shand 1923:323).
- **Law 60:** The sorrow of love tends to restore that state of the beloved object, or that relation to it, the loss or destruction of which is the cause of sorrow (Shand 1923:326).

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84 Shand’s list of primary emotions included fear, anger, joy, sorrow, disgust, repugnance, surprise, and curiosity.
Law 61: Whenever the impulse of joy which maintains the state on which it is dependent is interrupted, so that the joy also is at an end, it tends to elicit an impulse to restore that state (Shand 1923:329).

Law 62: The absence, injury, or destruction of an object of joy tends to arouse a type of sorrow which is distinguished by its impulse of restoration, and derives from the preceding joy an impulse of attraction to its object (Shand 1923:332).

Law 63: According as these impulses of attraction and restoration of sorrow are furthered, impeded, or frustrated, the emotion is itself diminished, increased, or reaches its maximum (Shand 1923:332).

Laws of Increase and Diminution of Sorrow

Law 64: The intensity of emotions as proportioned, other things equal, to the degree in which they contrast with preceding or accompanying states (Shand 1923:334).

Law 65: Sorrow tends to be increased by the close precedence of joy, and in proportion to the clearness of our remembrance of it in our experience; and, again, by perceiving the signs of joy around us, and in a less degree by the thought that, while we sorrow, others rejoice (Shand 1923:334).

Law 66: Sorrow tends to be diminished by the close precedency and by the remembrance of other sorrow in our experience, and again by the perception of the signs of sorrow around us, and in some, though in a less degree, by the knowledge of such suffering (Shand 1923:326).

Law 67: In proportion as the event which causes sorrow is both sudden and unexpected, it tends also to arouse surprise, and therefore to increase the intensity or strength of the sorrow (Shand 1923:339).

Law 68: In proportion as the event which causes sorrow either occurs gradually or is foreseen, the sorrow on that account tends to be felt with less intensity or strength (Shand 1923:339).

Law 69: Sorrow tends to be diminished by the knowledge that another sorrows with us (Shand 1923:341).
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- Law 70: Sorrow tends to be increased by the knowledge that another rejoices at our suffering (Shand 1923:341).
- Law 71: Sorrow tends to become more painful through being kept secret (Shand 1923:342).
- Law 72: Sorrow tends to become less painful through being disclosed (Shand 1923:342).
- Law 73: Sorrow, like other painful states, become less painful and less intense when its emotion is controlled, and more intense and painful when uncontrolled (Shand 1923:343).
- Law 74: When either we cause injury to ourselves, or something that was once part of us, or anything we have loved, does this the sorrow that we feel tends to be greater on that account (Shand 1923:344-345).

Non-Conative Tendencies of Sorrow

- Law 75: Sorrow tends to arouse anger under opposition to its impulse, when the opposing force is not too strong and there is sufficient available energy to resist it (Shand 1923:349).
- Law 76: In proportion to the degree and frequency with which the impulse of sorrow has been crushed or suffered frustration are energy, self-control and courage destroyed, as well as the susceptibility to all stimulating emotions, as anger, hope, and confidence (Shand 1923:351).
- Law 77: Sorrow, whether caused by loss or destruction of an object of love, or by separation from it, or merely by the mood or tempter, tends to destroy the belief in the intrinsic value of all other things previously valued (Shand 1923:354).
- Law 78: Extreme sorrow, when it arises in one sentiment, tends to destroy the capacity for joy inherent in other sentiments (Shand 1923:355).
- Law 79: Joy tends to form judgments which attribute intrinsic value to its object, when the intelligence is capable of forming them (Shand 1923:357).
- Law 80: So far as the sorrow of love diminishes the value of all objects previously valued, and prevents one attaching a value for oneself to new
objects, it tends to increase the value already placed on its own object (Shand 1923:360).

- Law 81: The sorrow of love tends to arouse repugnancy, or disgust, or contempt for all objects that distract it from its own object, and thereby strengthens itself (Shand 1923:360).

Shand’s fascinating description of the laws of sorrow provided a valuable broad statement about grief. In addition, he recognized almost intuitively an important distinction. Shand understood of course that there were benefits from expressing feelings to others. At the same time, he believed that expressing negative emotions may be connected to more intense grief. No extant writings about grief expressed such a distinction before. In fact, “recent empirical studies (Bonanno & Keltner 1997) have indeed shown that the expression of negative emotions earlier in the grief process is associated with a poorer later outcome” (Stroebe, Hansson, Schut, and Stroebe 2008:46). Unfortunately, the paucity of literature indicated that much of Shand’s ingenious insights were lost to subsequent researchers and practitioners in favor of the watershed ideas of Sigmund Freud.

**Sigmund Freud**

The review of the historical accounts about the theoretical and psychological construction of grief pointed most notably in the literature to Sigmund Freud (1856-1939) and his description of decathexis (Kelley 2010:34). As such, Freud was credited with providing the foundation for the standard psychoanalytic model of mourning (Hagman 2001:13). Freud, popularly known as the founding father of psychoanalysis, wrote his influential essay entitled *Mourning & Melancholia* in 1917, although his core ideas were first introduced in his seminal *Totem and Taboo* in 1912. Freud was credited as the first to introduce a formalized concept of grief into the professional psychological lexicon. Obviously, as the current literature review has demonstrated, there were researchers before Freud who studied the phenomenon of grief and made various contributions within a broad social science paradigm (Granek 2010:49). Nevertheless, the review noted that Freud’s psychoanalytic theories “have had the
most impact on contemporary grief research within the discipline of psychology" (Granek 2010:50).

Decathexesis was an important concept to understand for the purpose of the current study. Drawing a correlation between mourning and melancholia, Freud explained that “mourning is commonly the reaction to the loss of a beloved person” (1917/2005:203). Freud’s concept of “grief work” and “the grief work hypothesis” was built upon this normative act of human mourning. The big idea of grief work was that a bereaved person must work through his/her loss in order to arrive at a healthy resolution (Troyer 2014:47). With obvious overtones of sexuality for which Freud became known, his perspective on the work of mourning was described as such: “the person in mourning must withdraw libido (energy) from the object that has been lost (i.e. decathexesis) in order to redirect it toward another, available object (Kelley 2013:34).

Freud explained the concept of decathexesis further: “So what is the work that mourning performs? I do not think I am stretching a point if I present it in following manner: reality-testing has revealed that the beloved object no longer exists, and demands that the libido as a whole sever its bonds with that object” (1917/2005:204). For Freud, the libido was the energy of an emotional attachment that needed to be withdrawn and redirected following a loss (Archer 2001:16). Thus, the standard psychoanalytic model of mourning was born out of an idea of grief work than included severing bonds. Of course, in the Late Modern Period, the standard model of grief was fine-tuned through the efforts of other significant thinkers of the period as well.

**Post-Freud Contributors**

Building upon Freud’s theoretical conceptualization, the modernization of a standard model of grief and mourning was also influenced by Karl Abraham (1877-1925). Abraham emphasized the role of identification with loss (Abraham 1927/1960). For Abraham, bereavement served the purpose to preserve a person’s relationship with the deceased (Hagman 2001:15). Despite the emphasis on continuity with the loss, the standard model of grief and mourning focused more on decathexesis or letting go and moving on.
Helene Deutsch (1884-1982), a colleague of Freud, further developed the standard model. Deutsch, a psychoanalyst who specialized in women’s research, argued that the absence of an expression of grief was a predictor of psychopathological mourning (Deutsch 1937; Hagman 2001:15). In her landmark article on the absence of grief, Deutsch explained her concern as follows: “The process of mourning, as a reaction to the real loss of a loved person must be carried out to completion” (Deutsch 1937:16). Apparently, if a bereaved person did not experience decathexis and the attachment was left unresolved, painful affects would continue to flourish. In the developing standard model of mourning, the expression of grief was essential. Hagman (2001:16) expounded: “the absence of grief expression in a bereaved person became for many the diagnostic hallmark of pathological mourning, and, to this day, in order to be considered normal from the point of view of mourning theory, bereaved people must endure the additional stress of having to express sadness.”

Further developments of the standard model were advanced by Erich Lindemann (1900-1974) and John Bowlby (1907-1990). Lindemann’s seminal study, entitled Symptomatology and Management of Acute Grief (1944), was credited for being the first well-known empirical study of grief. Lindemann’s study was based upon a devastating fire that killed 492 people in the Coconut Grove nightclub in Boston, Massachusetts. Lindemann worked with many survivors of the fire and their families. Building upon the earlier work of Freud and Deutsch, to name a few, Lindemann was concerned with the bereaved holding back from necessary grief work, described as “the mental struggle necessary to obtain release from attachment to the deceased” (Archer 2001:18). Though now seen as a poorly selected sample without statistical analysis, Lindemann’s interview of 101 survivors was held for many years as a pioneering investigation. Lindemann reported five total common features that marked grief: (1) somatic distress, (2) preoccupation with the image of the deceased, (3) guilt, (4) hostile reactions, and (5) loss of patterns of conduct (Lindemann 1944:142; Kelley 2010:45).

John Bowlby (1907-1990) and Elizabeth Kübler-Ross (1926-2004) developed one of the cornerstones of the standard model of grief – that mourning was a biological
process based upon specific identifiable stages (Bowlby 1961). Hagman (2001:16) explained: “for years the central concern of bereavement theorists became the identification of the nature and quantity of these stages.” Parkes critical analysis helped further nuance Bowlby’s original classification (1970:196-107). Bowlby’s initial three (3) stages of grief included (1) protest, (2) despair, and (3) and detachment, but later added a prior stage of numbness and disbelief (Bowlby and Parkes 1970; Bowlby 1980).

The most famous of the stage-based standard models of grief was developed by Elizabeth Kübler-Ross (1969). The stages of grief was originally developed from her interviews with terminally ill patients, but later became an entrenched belief in the standard model for the bereaved. Kübler-Ross’s five (5) stages were denial, anger, bargaining, depression, and acceptance. The terminally ill, who passed through all five stages, eventually became extended to the bereaved.

The widespread acceptance of Kübler-Ross was recognized throughout popular culture. Kelley (2010:46) suggested that “it is no exaggeration to say that Kübler-Ross’s stage paradigm of dying has taken on a life of its own and has become deeply embedded not only in the field of thanatology but in culture more broadly.”

Kübler-Ross’s stage theory was evident throughout episodes of popular television programming including sitcoms such as Frazier (1993-2004), Scrubs (2001-2010), 30 Rock (2006-2013); drama series such as Law & Order (1990-2010), House (2004-2012), Grey’s Anatomy (2005-present); cartoons such as The Simpsons (1989-present); and science fiction and fantasy such as Star Trek: Voyager (1995-2001), Supernatural (2005-present), and Doctor Who (2005-present).

What should not be missed in the review was that whether one subscribed to Bowlby’s model or a more popular version like Kübler-Ross’s model, the modern understanding of grief, rooted heavily in the rationalism of post-Enlightenment thought, was that grief

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85 Thanatology was broadly defined as the scientific study of death, dying, and bereavement (DeSpelder and Strickland 2011; Balk 2007). See also Death & dying, life and living (Corr, Nabe, and Corr 2009).

86 Kübler-Ross’s stage theory was evident throughout episodes of popular television programming including sitcoms such as Frazier (1993-2004), Scrubs (2001-2010), 30 Rock (2006-2013); drama series such as Law & Order (1990-2010), House (2004-2012), Grey’s Anatomy (2005-present); cartoons such as The Simpsons (1989-present); and science fiction and fantasy such as Star Trek: Voyager (1995-2001), Supernatural (2005-present), and Doctor Who (2005-present).
occurred through an orderly progression through distinct periods. Despite the long history of humanity wrestling with the concept of grief, the emergence of a standardized model of grief was a relatively recent invention, dating to the Late Modern Period (1750-1970). In summary, an analysis of the related literature in the Late Modern Period conceptualized grief as orderly and necessary work.

POSTMODERN PERIOD (1970-PRESENT)
The Postmodern Period (1970-present) offered important critiques and correctives to the Late Modern Period. What was helpful in the review was to first delineate the common components of grief theory that emerged out of the Late Modern Period before exploring the current critiques and developments in the field of grief psychology. To be sure, the twentieth century embraced such ideas that bereavement involved an orderly and necessary process of letting go, moving on, recovering from, and returning to normal after the experience of loss. Hageman (2001:17-19) described the key components of the standard model.

- There is an identifiable, normal psychological mourning process.
- The function of mourning is a conservative and restorative one rather than a transformative one.
- Mourning is a private, intra-psychic process rather than a social and relational one.
- The affect of grief arises spontaneously from within the individual, and denial or suppression of grief leads to pathological states.
- Mourning has normal, standardized characteristics, rather than being unique and personal.
- Mourning is painful and sad rather than involving a range of affects.
- The central task of mourning is detachment (decathexis) rather than continuity.
- The vicissitudes of psychic energy are the basis of the standard psychoanalytical model; the meanings associated with the loss are not emphasized.
- The normal mourning process leads to a point of full resolution rather than being open and evolving.
In the Postmodern Period, the standard model of mourning underwent significant revisions. Demonstrating a shift away from foundationalist epistemology, many long-held beliefs about the predictable outworking of grief work were reconsidered. Hagman suggested that “recently, in keeping with this ‘paradigm shift,’ a number of psychoanalytic writers have begun to question the standard model of mourning and some of its characteristics” (2001:20). For example, Wortman and Silver (1989) offered an insightful critical assessment of the modern period, suggesting that critical lore often fails to acknowledge the variability that often exists in coping with loss. Troyer (2014:48) proffered his summation of the criticism surrounding the standard model’s grief work hypothesis: “its biggest flaw is the lack of empirical support for bereaved persons benefitting from grief work.” Further, Troyer suggested that “working through grief is not the only way for everyone to cope or adapt to a loss” (2014:49). The crucial question was defining what kind of grief processing would be beneficial to a bereaved individual. Troyer concluded that “psychotherapists must remember that there is not one right way to grieve” (2014:49).

Complementing Troyer’s assessment, Melissa Kelley (2010) provided a helpful critique of eight (8) ways the new postmodern psychoanalytic model of mourning responded to the short-comings of the standard model. First, Kelley argued that in contrast to the standard model of mourning, researchers and clinicians today did not affirm that there was a specific normal way to mourn, but rather suggested that there were innumerable factors that shaped a response to loss (Klein 1940). Second, Kelley suggested that in contrast to the standard model, normal mourning was not limited by a given time frame, nor was grief aimed at a complete and definite resolution. In fact, Kelley contended that “grief becomes a new character in one’s life narrative” (2010:37), many never finding an end point to their grief, but nonetheless experiencing how the acute pain of grief subsides over time. Third, the emerging model rejected the idea that successful grief returned one back to no rmal. Instead, in grieving after a major loss, one was forever changed and a new “normal” emerged over time. Kelley

87 In this way, the emerging model rejected a belief that someone was “stuck” in his/her grief just because he/she talked about a deceased loved one ten or more years later.
explained that for some people: “the new normal is a grim, taxing reality, at least for a time” (2010:38). Fourth, instead of focusing primarily on decathexis and the withdrawal of emotional energy, the emerging model stressed the importance of continuing bonds (Klass, Silverman, Nickman 1996; Klugman 2006; Valentine 2008). Fifth, in contrast to the goal of letting go and moving on, the emerging model recognized that mourning was centrally a crisis of meaning (Neimeyer 2001). Sixth, the standard model ignored or denied social and relational features of grief; the emerging model embraced grief in terms of a more holistic intersubjective process (Hagman 2001:25). Seventh, the emerging model of mourning rejected the idea that grief must include emotional expression or risk pathology (Wortman and Silver 1989). Eighth, the emerging model rejected the idea that grief must be a painful experience, but embraced a range of emotions, including joy, pride, and relief as normative responses to loss.\footnote{88} Table 8 summarized the contrast between the standard model of the Late Modern Period and the emerging model of grief in the Postmodern Period.

\textit{Table 8: Contrasting the Standard Model and Emerging Model of Grief}

<table>
<thead>
<tr>
<th></th>
<th>The Modern Standard Model</th>
<th>The Postmodern Emerging Model</th>
</tr>
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<tbody>
<tr>
<td>Normative Grief</td>
<td>There is a standard normal way to mourn for everyone.</td>
<td>There are varied factors that shape one’s unique response to loss.</td>
</tr>
<tr>
<td>Time Frame</td>
<td>Normal mourning has a time limit and ends in complete resolution.</td>
<td>Mourning does not simply end, but may be experienced even years later.</td>
</tr>
<tr>
<td>Effect of Grief</td>
<td>If one grieves normally, he/she will return to normal.</td>
<td>In a significant loss, one’s life is forever changed.</td>
</tr>
<tr>
<td>Attachment</td>
<td>The purpose of mourning is to decathect and reinvest in new relationships.</td>
<td>Often times it is beneficial to continue the bonds with the deceased.</td>
</tr>
<tr>
<td>Focus</td>
<td>Mourning is primarily about necessary grief work.</td>
<td>Mourning is primarily a crisis of meaning.</td>
</tr>
<tr>
<td>Scope of Experience</td>
<td>Mourning is an intra-psychic experience.</td>
<td>Mourning is an intersubjective process.</td>
</tr>
<tr>
<td>Affective Dimension</td>
<td>Mourning must demonstrate emotional expression or risk pathology.</td>
<td>Mourning affect is complex and marked by particularity.</td>
</tr>
<tr>
<td>Response to Loss</td>
<td>Mourning must include pain in order to heal.</td>
<td>Mourning may include a range of emotions, even joy, pride, and relief.</td>
</tr>
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After surveying the developments in grief theory from 1970 through the present, including important critical analysis on the traditional or standard model of grief that...
emerged in the modern era, the current Postmodern period made significant movement away from the more narrow, fixed, and prescriptive stages of grief. Instead, current working theories that emerged by the end of the twentieth century recognized a more complex conceptualization of grief. For the purpose of the current study, the complexity of grief had significant implications for pastoral care that was explored in Part II of the review. Nevertheless, grief from the current understanding was perhaps best characterized as a complex and lasting mosaic – individually nuanced, intricate, and delicate. Kelley explained the profound dynamics of grief well (2010:49):

> While traditional grief theory can often seem to encourage “paint-by-number” results, the contemporary field allows us – invites us – to understand each person’s grief experience as a particular mosaic, fashioned out of innumerable and varied aspects of one’s life, such as one’s history of losses, one’s relationships, one’s way of making meaning, one’s experience of the Divine, one’s religious resources, one’s sense of community, one’s culture, and so on.

Before looking at more depth into a few contemporary topics of grief and bereavement, Table 9 below provided a useful summary of the entire development of thought in how grief was conceptualized throughout history – from antiquity through the present day.

**Table 9: Historical Summation of Grief Conceptualization**

<table>
<thead>
<tr>
<th>Period</th>
<th>Time Frame</th>
<th>Grief Conceptualization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ancient</td>
<td>Antiquity to 600AD</td>
<td>As Shared Normal Sorrow</td>
</tr>
<tr>
<td>Medieval</td>
<td>600-1500 AD</td>
<td>As Intimate Mourning</td>
</tr>
<tr>
<td>Early Modern</td>
<td>1500-1750</td>
<td>As Transitory Melancholy</td>
</tr>
<tr>
<td>Late Modern</td>
<td>1750-1970</td>
<td>As Orderly &amp; Necessary Work</td>
</tr>
<tr>
<td>Postmodern</td>
<td>1970-Present</td>
<td>As a Profound Mosaic</td>
</tr>
</tbody>
</table>

**Contemporary Topics of Grief and Bereavement**

Before looking at how developments in the fields of psychology and funeral service may be integrated, a secondary concern of the review of related literature in
psychology was noted. To develop a thicker understanding of grief, it was necessary to explore some of the contemporary topics of grief and bereavement research most relevant to the current study (Stroebe, Hansson, Stroebe, and Schut 2001). Within the scope of contemporary topics on bereavement, several significance developments occurred within a new paradigm of the emerging model worth mentioning (Russac, Steighner, Canto 2002). In specific terms, the review noted four (4) developments of particular significance relative to the research question: (1) tasks of mourning, (2) dual process, (3) disenfranchised grief, and (4) resilience theory.

In the one contemporary topic of the review, William Worden (1982/2009) provided a clear description of what he termed “the tasks of mourning.” Worden’s task-based model, in contrast to the standard model that falsely implied that mourners move passively through fixed stages of grief, focused on an active role for mourners. The value of Worden’s approach, in contrast to earlier linear models, was that active participation in one’s grief received empirical support (Lund, Caserta, and Dimond 1993; Dimond, Lund, Caserta 1987). According to the four tasks of mourning, bereavement requires mourners to: (1) accept the reality of the loss; (2) process the pain of grief, (3) adjust to a world without the deceased, and (4) find an enduring connection with the deceased in the midst of embarking on a new life (Worden 2009). Troyer explained: “to be clear, Worden’s tasks are not so prescriptive as to provide a detailed blueprint for grief resolution. But they do provide a starting point and allow the bereaved and therapists to tailor how the tasks are accomplished” (2014:58).

A second major development described in the contemporary world of grief psychology was the discussion of the Dual Process Model (DPM) of Coping with Bereavement.

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89 It was interesting to note the developmental nature of grief psychology. For example, Worden’s fourth task apparently evolved over four editions of his seminal book (Worden 2009). In the first version of Worden’s text, the fourth task was described as withdrawing emotional energy from the deceased and reinvesting it in another relationship – this is reminiscent of the standard model. The second and third editions of Worden’s text described the fourth task of mourning as emotionally relocating the deceased and moving on with life. Finally the fourth task became about finding an enduring connection with the deceased in the midst of embarking on a new life. Troyer commented that “this revision represents a clearer recognition of the potential benefits of continuing bonds with the deceased” (Troyer 2014:61).
Chapter 2: Review of Related Literature

(Stroebe and Schut 1999). The DPM was described in the literature as an integration of ideas rather than a totally new or novel concept (Servaty-Seib 2004:130). In fact, as early as 1991, there were significant insights emerging in the literature that challenged the long-standing belief in the necessity of “grief work” (Stroebe and Stroebe 1991). To this end, Stroebe and Schut classified two types of stressors – loss-oriented and restoration-oriented in terms of coping with bereavement. Loss-oriented stressors pertain to the specifics of the death-loss experience; restoration-oriented stressors focused on secondary stressors that must be dealt with for healthy coping to occur. Examples of loss-oriented coping included visiting the grave of the deceased and looking at photographs. Examples of restoration-oriented coping included selling one’s house and settling one’s estate. The point of the DPM was to describe grief as an alternating or oscillating process between the two types of coping. Troyer explained: “oscillation is a key aspect of the DPM. It refers to shifting back and forth between loss-oriented and restoration-oriented needs” (2014:62). In a recent report, Stroebe and Schut refined the DPM in terms of an integrative intra-interpersonal coping model, recognizing that people do not typically grieve in isolation, but with “family members who have likewise experienced the loss” (2015:873).

The review of grief and bereavement literature surfaced a possible compatibility between Worden’s four tasks of mourning and Stroebe and Schut’s Dual Process Model. Table 10 demonstrated how Worden’s first two tasks of mourning may relate to the loss-oriented processes of the DPM. Also, the last two tasks of mourning may also be related to the restoration-oriented processes of the DPM.

Table 10: Four Tasks of Mourning and the Dual Process of Coping

<table>
<thead>
<tr>
<th>Worden’s Four Tasks of Mourning</th>
<th>Stroebe and Schut’s Dual Process Model of Coping</th>
</tr>
</thead>
<tbody>
<tr>
<td>To accept the reality of loss</td>
<td>Loss-oriented processes</td>
</tr>
<tr>
<td>To process the pain of grief</td>
<td></td>
</tr>
<tr>
<td>To adjust to the world without the deceased</td>
<td>Restoration-oriented processes</td>
</tr>
<tr>
<td>To find an enduring connection with the deceased while embarking on a new life</td>
<td></td>
</tr>
</tbody>
</table>

90 Similar to turning the DPM on its side, Simon Rubin’s Two-Track Model of Bereavement conceptualized bereavement as occurring along two main multidimensional axes (Rubin, Malkinson, and Witztum 2012). Track I reflected how a loss affected one’s normal biopsychosocial functioning. Track II’s was concerned with how one maintains and changes his/her relationship to the deceased.
A third contemporary topic that was essential in the review of literature was the concept of disenfranchised grief. The key thinker identified in this area was Kenneth Doka (1989). Representing deeper understandings of grief theory, Doka argued that “the ‘grief’ of grieving rules frames not only feelings but also other domains of human experience such as behavior, cognition, and spirituality” (2002:1). Doka’s contribution was that he recognized that not all survivors of loss are accorded a right to grieve. Doka explained clearly that “although the person experiences grief, that grief is not openly acknowledged, socially validated, or publically observed” (2002:5). Disenfranchisement was a concept that developed out of a deeper understanding that grief integrates psychological, biological, and sociological perspectives (Doka 2002:5).

In specific terms, Troyer (2014) outlined several different ways grief was disenfranchised among the bereaved. Disenfranchisement occurred when a relationship was not recognized: examples included death of close family friend, partners from extramarital affairs, cohabitators, homosexual relationships, and engaged couples (Troyer 2014:66-67). Disenfranchisement occurred when a loss was not recognized: examples included prenatal and perinatal loss (i.e. miscarriages, stillbirths, and abortions), pet companion death, individuals who are in a coma, dementia, and other psychosocial deaths (Troyer 2014:67). Disenfranchisement occurred when the griever was not recognized: examples included the very old, young children, the cognitively or developmentally disabled (Troyer 2014:68). Disenfranchisement occurred by various circumstances: examples included losses that cause shame and widespread scrutiny (e.g. death as a result of suicide, homicide, AIDS-related death (HIV & AIDS), autoerotic asphyxiation) and losses that induce fears most people want to avoid (e.g. death of child or young person) (Troyer 2014:68). Disenfranchisement occurred by ways individuals grieve: examples included socially unacceptable forms of reactions to loss such as expressing too much emotion or not enough. Troyer (2014:68) explained: “individuals who express their grief in almost exclusively instrumental ways may show little to no affective expression of their grief,
despite painfully experiencing the loss cognitively, physically, and spiritually” (e.g. a widower who does not cry shortly following a loss of his wife).^91

Though disenfranchised grief provided a powerful concept to understand the dynamics of grief, it was unclear in the research if a connection existed between the problem of deritualization and disenfranchised grief. Disenfranchisement spoke to a survivor’s perception of not being accorded a right to grieve; deritualization, as the chief concern for the current study, spoke to the impulse of the survivors to dispose of their dead without ceremony. There was a paucity of research that related the two concepts. What was clear was that disenfranchised grief could appear with or without ritualization. For example, a young child or a divorced spouse, may experience disenfranchised grief despite the ritualization of death through funeral ceremony, especially in cases where the child or divorced spouse was not invited to attend. Yet, what about cases where some survivors of loss intentionally chose to deritualize their death experiences as a means to avoid the pain of loss? Have choices to deritualize death actually opened the door unwittingly to disenfranchised grief? Was an impulse to deritualize the death experience, for whatever reason, a contributor in some way to disenfranchisement? The connection between disenfranchised death and deritualization was still largely unknown.

A fourth contemporary topic in bereavement and grief research was described as resilience theory. In his landmark text, *The other side of sadness: What the new science of bereavement tells us about life after loss*, George A. Bonanno argued that most people are naturally resilient when it comes to loss and bereavement. In contrast to the lack of empirical support for the standard model of mourning (Stroebe and

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^91 Instrumental loss was distinguished from intuitive loss as different grieving styles (Doka and Martin 2010). This development in the knowledge of grief psychology recognized that how people grieve may be related to gender, but was not necessarily determined by it. In the continuum of grieving styles (Troyer 2014:96-99), instrumental loss was represented by a response to grief that was characterized by cognitive, physical, and behavior expressions rather than through affective means. At the other end of the continuum of grieving styles, intuitive loss was represented by responses to grief that were characterized by emotive or affective expressions, such as crying. Troyer explained that few grievers were purely instrumental or intuitive; in fact, some individuals displayed a relatively even mix, or blended style, of grieving (2014:98).
Stroebe 1991), including Kübler-Ross's stage theory, Bonanno explained that resilience was an empirical fact of current research (2009:24):

Most bereaved people get better on their own, without any kind of professional help. They may be deeply saddened, they may feel adrift for some time, but their life eventually finds it way again, often more easily than they thought possible. This is the nature of grief. This is human nature.

According to Bonanno’s empirical findings, only 10 to 15% of bereaved people were likely to struggle with prolonged grief (2009:96). This number, while surprising to some, was regularly regarded by other clinicians and counselors. For example, Alan D. Wolfelt, the Director of the Center for Loss and Life Transition, explained: “In my experience, a small percentage – fewer than ten percent – of grievers suffer from what I call ‘complicated mourning.’ Their grief journeys have been naturally complicated by multiple losses, disenfranchised grief, prior emotional struggles or other challenges” (Wolfelt 2006:24).\(^92\) According to one study, “doing well after a loss is not necessarily a cause for concern but rather a normal response” (Boemer, Wortman, and Bonanno 2005:72).\(^93\)

In Bonanno’s research, he argued that resilience was the norm, not the exception for bereaved individuals and families (2009:47). Bonanno suggested that adults and children alike were more durable than some clinicians gave them credit. In fact, resilience was not described as a particular style of normative grieving, but the way most people, with or without help, adapt to loss. For Bonanno, most people when faced with a significant loss of a loved one do whatever can be done to get by and adapt to the new context without the loved one. Bonanno called this “whatever it takes” approach “coping ugly” (2009:78-79). Coping ugly was a descriptive phrase others

\(^92\) Rando echoed this sentiment in the 1993 text *Treatment of complicated mourning.*

\(^93\) A recent study that looked at resiliency in older adults found that most elders who showed high distress initially, remained in this pattern even after four years (Boemer, Wortman, and Bonanno 2005).
may refer to as pragmatic coping – “when bad things happen, people often find the strength to do whatever is necessary to get back on track” (2009:79).

In sharp contrast to the standard model of mourning that argued for necessary stages for grief resolution with a looming threat of pathology if grief was not adequately worked through, the concept of resilience explained that although grief was not a one-dimensional or uniform experience, people were largely equipped to deal with their grief and adapt to their loss. Bonanno contended: “the good news is that for most of us, grief is not overwhelming or unending. As frightening as the pain of loss can be, most of us are resilient” (2009:7). In short, according to Bonanno’s empirical findings, grief was a basic human response to loss – “it is something we are wired for, and it is certainly not meant to overwhelm us” (2009:7). Bonanno’s fluid resilience theory, rooted in empirical research, obviously rejects the longstanding popularity and uncritical acceptance of Kübler-Ross’s linear stage theory, a hallmark of the standard model.

To be clear, resilience theory, as an advanced concept in contemporary bereavement psychology, was not diminishing or ignoring the real pain and suffering that the bereaved will experience following a significant loss. Instead, resilience theory provided a hopeful message for many bereaved people, recognizing that 85-90% of all people are able to adapt to loss without lingering problems. Bonanno explained that despite the early theories of bereavement that emphasized a series of predictable and necessary stages, in truth, we actually “cope well with loss because we are equipped – wired, if you will – with a set of in-born psychological processes that help us do the job…our experience of the emotion comes and goes. It oscillates. Over time the cycle widens, and gradually we return to a state of equilibrium” (Bonanno 2009:198).

Moreover, most resilience advocates were not suggesting that funeral and death rituals had no value for the bereaved. In fact, Bonanno admitted that there was still
much to learn about the interplay between culture and bereavement. Indeed, resilience allowed space for the on-going transformative power of rituals to change people (Bonanno 2009:191-192, 202). This was evident in Bonanno’s personal use and exploration in the value of Chinese bereavement rituals that were used to honor his father’s life (Bonanno 2009:169-193).

Further, the concept of resilience did not advocate a simplistic notion of closure. Bonanno reported that even in the longest bereavement study available that spanned thirty-five years (Carnelley et al. 2006), bereavement fades gradually over time. Most bereaved people frequently reminisce about their deceased loved one weekly, monthly, even some fifteen years later (Bonanno 2009:203). What was apparent with resilient theory, was that however the bereaved adapted to their loss, there was often in many cases great value in maintaining an enduring bond of remembrance of the deceased.

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94 Journalist Ruth Davis Konigsberg was an exception. In her popular-level book, *The truth about grief: The myth of its five stages and the new science of loss*, Konigsberg took particular aim at the funeral industry and grief and bereavement counseling – what she deemed *the American way of grief* (2011). In her puzzling and misleading analysis, Konigsberg made great efforts to discredit stage-based grief (like Kübler-Ross), apparently unaware that stage-based models had long since been discredited (Hoy 2011). In one review of her text, Wolfelt argued that Konigsberg was merely resurfacing an age-old debate between the art of caring for people in grief and the science of bereavement. Wolfelt's compelling model of companioning the bereaved provided a soul-based approach to caregiving, suggesting that grief was an irreducible mystery that cannot be totally understood by the rational thought of “the new science” alone (Wolfelt 2011a).

95 The concept of closure was a complex subject in the literature. Though more commonly associated with the standard model of mourning where the bereaved were assumed to return to normal after a period of time, closure as a term did not seem well-received and promoted by contemporary theorists (see also Nancy Berns, *Closure: The rush to end grief and what it costs us*, 2011). At the same time, apparently many funeral homes, operating fully within an epistemology of profit and sustainability, promised closure to client-families with the purchase of funeral products and services.

96 One significant finding in the review that seemed to contradict contemporary acceptance of resilience theory was the recent publication of the Diagnostic Statistical Manual of Mental Disorders (DSM), the essential guide for diagnosis and treatment of mental illnesses. The current DSM5 (2013) reversed a decision made in prior versions and thereby removed the bereavement exclusion from both depression and adjustment disorders. Doka (2013) explained: “what this means in simplest terms is that a person who is grieving a loss potentially may be diagnosed with depression or an adjustment disorder.” A very practical concern was that bereaved individuals may have a greater likelihood of being prescribed antidepressants to resolve grief. This medicalization or pathologizing of grief seemed irreconcilable with current resilient theory that advances normal grief processing over the course of six months to a year.
Having surveyed the fields of funeral service, as an applied discipline, and psychology, as a social science, the review examined how key inflection points related to the research question were integrated.97

2.4 Part IC: Summary of Integrated Insights from Funeral Service and Psychology

Based on the parameters set forth in the Oxford Christian Interdisciplinary Research model and the Loyola Institute of Ministries model of Practical Theology, the literature review of disciplinary perspectives was developed in two main parts. The purpose of Part I of the review was to describe the world according to the disciplines of funeral service and grief psychology. The first main part of the literature review (Part I) was subdivided into three sections (A, B, C). First, in Part IA, literature was reviewed from the discipline of funeral service, representing an applied profession. Second, in Part IB, literature was reviewed from the discipline of psychology, specifically that of grief and bereavement, representing a specific social science. Part IA and Part IB each contributed to the first research question of the study regarding perspectives of bereavement caregiving.

In this third section, Part IC, the adaptive challenges of an evolving professional identity was examined with specific regard to funeral service. Also, the phenomenology of grief and the development of narrative approaches to caregiving was examined with specific regard to psychology (Neimeyer 2012, Gottschall 2013).98 Finally, disciplinary insights were integrated and summarized to provide an accurate picture of current thought from the disciplines of funeral service and bereavement psychology. These additional disciplinary insights were also helpful in addressing the first research question of the study.

97 Though beyond the scope of the current research, the study noted that further consideration should be given toward how culture and contextuality shape patterns of grief and mourning. Grief and bereavement were noted as ubiquitous human responses to loss; however, it is unknown how culture and contextuality influence human grief adaptation.

98 Gottschall noted the universal grammar of narrative: “we are, as a species, addicted to story. Even when the body goes to sleep, the mind stays up all night, telling itself stories” (2013:xiv, 55).
Chapter 2: Review of Related Literature

The Adaptive Challenges of an Evolving Professional Identity

The review of related literature in the applied discipline of funeral service led to an observation that professional funeral directors by the early twenty-first century indeed faced something of an identity crisis. To be sure, funeral service as a professional expertise was always developing new ways to respond to the needs of bereaved client-families. A closer review of the developing specializations was helpful to understand the current conflict faced by funeral practitioners today.

At the beginning of American history, families who experienced a loss sought assistance with a coffin, typically made of simple wood, for the purpose acknowledging human dignity in final disposition. Additionally, other needs emerged as well, such as the need to prepare deceased bodies for viewing and a public wake in one’s home (i.e. laying out of the dead) and to transport the deceased to a local church graveyard or cemetery (i.e. livery services). By the end of nineteenth century, and after having worked through the practical problems of burying Civil War soldiers who were killed in battle, professional undertakers offered embalming to the public as a new and profitable specialization that would become a standard practice in American culture. This specialization required additional training at speciality schools of higher learning and eventually the need for government regulated professional licensure (Habenstein and Lamers 1955). As the funeral industry matured, additional services were added, such as the use of specially-designed facilities for funeral ceremonies and elaborate inventories of merchandise like steel caskets99 and vaults in lieu of simple wooden coffins. By the end of the twentieth century, the funeral industry had added other specialities as well to respond to public needs, including advanced planning, cremation services, and the use of technology and media (Rikard 2014) to memorialize the dead and connect practitioners (Bryan 2014; Isard 2014a-d). In short, today’s funeral service practitioner employed a multitude of skills and abilities that

99 Caskets eventually replaced coffins in the funeral industry. Though both served similar functions to encase dead human remains and transport to a place of final rest, the modern caskets differed in terms of design and cost. In contrast to the anthropoid shape of coffins (i.e. with six or 8 sides), modern caskets were rectangular and were typically constructed of wood or metal, such as 16, 18, or 20 gauge steel, stainless steel, or non-ferrous metals like copper or bronze. Modern casket designs included a variety of colors and included ornamental lining. A recent lower cost trend in caskets included laminate and engineered wooden alternatives.
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were designed to respond to client-families’ needs prior to death (i.e. pre-need), at death (i.e. at-need), and post death (i.e. after-care).\textsuperscript{100} Nevertheless, as was noted earlier in the review, the industry clearly focused most attention toward pre-need and at-need sales, with after-care playing only a tertiary role as an industry standard or specialization.\textsuperscript{101}

Table 11 below demonstrated the various roles and specializations that many funeral practitioners wrestled with each day with corresponding threats to professional identity. In a changing cultural climate of deritualization that was brought on by economic downturns, changes in religious preferences, and a more highly mobilized society, funeral professionals struggled with finding an adequate organizing model for twenty-first century deathcare.

\textit{Table 11: Splintering of Funeral Service Identity}

<table>
<thead>
<tr>
<th>Specialization</th>
<th>Description</th>
<th>Threat to Professionalization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Industry Merchandisers</td>
<td>Funeral directors sell caskets, vaults, urns, guests books, clothing, keepsakes</td>
<td>Yet, caskets and other merchandise can be purchased through other retailers</td>
</tr>
<tr>
<td>Ritual Specialists</td>
<td>Funeral directors assist clergy with a variety of sacred rituals to assist the bereaved</td>
<td>Yet, there is a growing number of non-religiously affiliated people</td>
</tr>
<tr>
<td>Insurance Agents</td>
<td>Funeral directors offer tailored insurance policies for advanced funeral plans</td>
<td>Yet, sometimes guaranteed plans are not advantageous for families or funeral homes</td>
</tr>
<tr>
<td>Personalization Experts</td>
<td>Funeral directors know that client-families value personalized funeral services</td>
<td>Yet, sometimes client-families do not choose a ceremony</td>
</tr>
<tr>
<td>Event Planners</td>
<td>Funeral directors want to provide celebratory ceremonies to non-traditionally minded client-families</td>
<td>Yet, a funeral event is not a mere party, regardless of food, music, drink, and venue</td>
</tr>
<tr>
<td>Direct Disposers</td>
<td>Funeral directors offer simple direct cremations</td>
<td>Yet, something is being lost when death is deritualized</td>
</tr>
</tbody>
</table>

\textsuperscript{100} Examples included Funeral One’s integrated website design that incorporated pictures, videos, obituaries with interactive guest registries, memorial videos, aftercare modules, and an on-line sympathy store, popular blogs such as Caleb Wilde’s Confessions of a Funeral Director (http://www.calebwilde.com/connectin) and Lauren LeRoy’s Little Miss Funeral Director (http://littlemissfuneral.com), and daily industry newsfeeds such as ConnectingDirectors.com. See also Milano’s \textit{Building bonds strengthening your business with social media} (2014).

\textsuperscript{101} One report stated that only 33% of funeral homes offered aftercare services to client-families (Stacy 2007:26-27).
With respect to the table of funeral service specializations, many funeral directors were unsure of what role or roles should be paramount in their profession. Were funeral directors primarily industry merchandisers, ritual specialists, insurance agents, personalization experts, event planners, or even direct disposers of the dead (Finocchiaro 2015)? Moreover, many funeral directors and industry insiders questioned what other roles may emerge next in the evolution of funeral service (Gadberry 2000). Obviously, the funeral industry had a vested interest in understanding what was happening in the context of their profession, including the consumer environment, the business environment, the economic environment, and the regulatory environment (“Light Bulbs” 2013).

Some industry experts, such as Jacquie Taylor, argued that professional funeral service faced many challenges. In a presentation to the National Funeral Directors Association Women’s Conference entitled Who killed the funeral? The really inconvenient truth, Taylor listed internal contradictions, role confusion, and conflict among leadership organizations as just a few of the current challenges facing the industry (Taylor 2011). Taylor even questioned: “are funeral directors at risk of becoming irrelevant due to erosion of their cultural authority?”

Changing consumer preferences toward deritualization obviously contributed to the rise in cremation and the shrinking of profit margins – a key metric in any business or industry. To this end, Taylor noted that the funeral industry must recognize that times are changing, and funerals must become adaptive and meaningful, or funeral directors are in danger of being irrelevant or even extinct in time. Other industry analysts echoed a similar sentiment. For example, Josh Sanburn’s article The new American way of death argued that in the 1980s, “every funeral was pretty much the same: a welcome, a prayer, a song, a passage of Scripture, another song, a message, a benediction and then a trip to the cemetery” (2013:36). Yet, seasoned funeral director Mark Musgrove of Musgrove Family Mortuary in Oregon advised that in a state with a cremation rate over 70%: “to survive, we need to adapt – we need to listen to the families we serve and find those things that are meaningful to them” (Sanburn 2013: 36).
To be clear, funeral rituals were long established as positive and helpful human experiences, yet the research was unclear how the funeral industry would respond to a growing segment of client-families who now chose to deritualize their death experiences – to manage their loss without traditional ceremony and support (Roberts 2010). Moreover, what new challenges were to emerge in the new culture where minimal or no ceremonies were becoming standard fare?

The key inflection point surfacing from a comprehensive review of literature in the discipline group of American funeral service was the idea of meaningful caregiving (Jennings 2012; Sanburn 2013; Funeral Service Foundation 2013). The review made clear that bereaved people have always benefited from effective caregiving – from coffins for human dignity and disposition, livery services to the grave, laying out of the dead, embalming, the use of funeral homes, caskets and vaults, advanced planning, cremation services and event planning (see Figure 18).102 Caregiving often included some kind of end-of-life ceremonies that communicated that one’s life had meaning and value.103 This fact suggested that despite the splintering of funeral professionalization, a revitalized focus on meaningful bereavement caregiving or simply nurturing care as the sine qua non of funeral service may be the best way

102 Other contemporary examples of how meaningful caregiving has emerged as a focal point in funeral service included the Funeral and Memorialization Information Council’s (FAMIC) Have the Talk of a Lifetime™ program as well as the Aurora Casket Company’s Be Remembered program. The FAMIC program was designed to be used with a workbook that guides family members through a series of conversations recording what matters most and how one wants to be honored after death. The Aurora program was designed to be utilized as an interactive website (www.beremembered.com) where one records a biography, a life in pictures, a list of favorite things, lasting words of wisdom, private messages, and a personal timeline and then assigns a guardian (i.e. a trusted friend or family member) with access to the on-line information to be shared following a death. Both the FAMIC and Aurora programs added value to funeral service by focusing on meaningful memorialization. The full impact of these programs were unknown; however, early responses by funeral advocates and client families were positive. In fact, Matthews International Corporation acquired Aurora Casket Company from Kohlburg & Company for 214 million dollars in June 2015.

103 Because the literature review exposed the paucity of funeral homes who maintained significant after-care programs as part of their business model (i.e. as little as 33% according to Stacy 2007), after-care was not included as a normative part of funeral home-based caregiving services. The reviewer noted however that the funeral industry had debated the relative value of after-care services for many decades, in many cases encouraging industry leaders to incorporate after-care as part of regular caregiving services offered to bereaved families. Unfortunately, to date there was not a compelling and sustainable model emerging across the industry. Nevertheless, it is the opinion of the researcher that inclusion of after-care as a normative component of meaningful caregiving should be implemented more broadly by the industry as a further development of professionalization.
forward for funeral professionals, especially given a culture prompted to reduce or eliminate common ritualization when faced with a loss.

If indeed nurturing care was the essential function of professional funeral service, the role of after-care, though being largely a latent category of professional funeral service, remained a significant option for further development. Canine (2012:64) contended that funeral directors needed to focus “on how they can support and encourage families as they take the grief journey.” A focus on after-care services provided one avenue that not only cared for a funeral home’s client-families, but reached out into communities to help all families who suffered the loss of a loved one. Canine argued that “no one in our society works closer to death than a funeral director…a funeral director should be considered the deathcare expert in the community” (2012:64). As such, funeral directors needed to recognize that bereavement care was not an ancillary service just for large funeral homes, nurturing caregiving should become the face (or the “brand” in business vernacular) of the profession. Canine concluded (2012:66):

If funeral service is to be a genuinely valued and respected social service, it must offer society more than cars and caskets. Quality
bereavement aftercare is neither a trend nor just the wave of the future. It is likely to become a competitive factor among funeral providers. The day is here when funeral homes keep social workers or psychologists on staff or as a resource to serve their clients’ array of ongoing emotional and pragmatic needs.

At the same time, for the funeral profession to become fully recognized as nurturing bereavement caregivers, the industry needed much work to develop more effective continued care services to assist client-families before, during, and after the loss of a loved one (Defort 2012). It was evident that every facet of professional funeral service should provide nurturing care; yet, nurturing care presumes a special body of knowledge and skill set that the industry may not currently be equipped to provide. Obviously, the industry needed to examine educational training programs for aspiring funeral directors as well as continuing education opportunities for seasoned practitioners as well. The real challenge, however, was that the funeral industry, as a big business enterprise, often lacked an adequate epistemology to support the knowledge development a paradigm of care would require. Current and future funeral directors needed to integrate the developments of bereavement psychology into their professional expertise (Hockenbury and Hockenbury 2011). What was needed was an understanding of the phenomenology of grief and the development of narrative approaches to caregiving.

**The Phenomenology of Grief and the Development of Narrative Approaches to Caregiving**

The literature review explained that in the evolution of bereavement psychology, grief was conceived over time as a shared experience of sorrow, intimate mourning,
transitory melancholy, grief work, necessary stages, mourning tasks/needs, a dual process, disenfranchisement, and resilience theory. A comprehensive review of the discipline group of bereavement psychology suggested that after a standard model of grief was formed, researchers and clinicians corrected and fine-tuned much of the thinking in this field of study.\textsuperscript{106} In fact, some scholars in the field suggested that grief counselling as a whole was in a revolution by the end of the twentieth century (Neimeyer 1999). To be sure, more sophisticated understandings of grief were developed by the twenty-first century that focused upon an over-arching construct. Robert Neimeyer, one of the most recognized scholars in the field of contemporary bereavement psychology, referred to the new emerging construct of grief as the reconstruction of meaning (see Figure 19 below).\textsuperscript{107}

\begin{figure}
\centering
\includegraphics[width=0.5\textwidth]{meaningful_reconstruction.png}
\caption{Bereavement Psychology As Meaningful Reconstruction}
\end{figure}

\textsuperscript{106} Interestingly, grief as a psychological construct was not developed exclusively out of any one of the predominant counseling theories, including the first force or the psychodynamic perspective (e.g. Sigmund Freud), the second force or the cognitive-behavioral perspective (e.g. James Watson and B.F. Skinner), the third force or the existential-humanistic perspective (e.g. Carl Rogers), and any of the fourth forces, including feminist, multicultural, and positive psychology perspectives (Ivey, D’Andrea, and Ivey 2012).

\textsuperscript{107} The study chose the term “meaningful reconstruction” as the apex of bereavement psychology for illustrative purposes only (see Figure 19). The precise term used in the literature is “meaning-reconstruction” (Nadeau 2001).
The higher view of meaning reconstruction represented a breakthrough in the knowledge of grief and bereavement that incorporated much of the contemporary thought by the leading theorists, researchers, and clinicians. For example, meaning-reconstruction recognized the dual process of coping (Stroebe and Schut 2001) and the role of continuing bonds (Klass, Silverman, and Nickman 1996; Neimeyer 2006). With this more holistic model, Neimeyer (2010/2001:xii) claimed that “meaning-reconstruction is the central process in what we conventionally refer to as grieving.” Neimeyer further added (2001:xii):

I have come to believe that loss, and our personal, relational, and cultural responses to it, are definitional of human life, not because of its intrinsic significance – if there is any – but precisely because it initiates a quest for meaning in deeply personal and intricately social terms.

In the older standard model of grief, a modernist framework presupposed that the quintessential process of mourning was to let go of one’s attachment to the deceased, move on with one’s life, and gradually recover to normal behaviour over time (Neimeyer 2001:2). Yet, grief appeared not to be something to recover from like a sickness; instead, in grief and loss, one was forever changed (Wolfelt 2006). After decades of inadequate empirical support for the standard model, Neimeyer (2001:3) concluded:

At the most obvious level, scientific studies have failed to support any discernible sequence of emotional phases of adaptation to loss or to identify any clear endpoint to grieving that would designate a state of ‘recovery.’ Neither is it clear that a universal and normative pattern of grieving exists that would justify the confident diagnosis of symptomatic deviations from this template as ‘disordered’ or ‘pathological.’

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108 A perpetually cared for cemetery represented a significant practical context for meaningful continuing bonds (Richards 1849; Yalom 2008). Cemeteries were recognized as an important place for final disposition of human remains that provided bereaved family and friends permanent sacred spaces for remembrance that dignified life in burial and/or cremation (Gibson 2015).
In contrast to the standard model of grief, a growing consensus of bereavement professionals emerged that now understood grief as a more complex process of adaptation to a significant changed reality. Instead of aiming for a return to normal, caregivers were called upon to help the bereaved negotiate their grief and support their search for significance (Neimeyer and Sands 2011:11). The agreed upon concept that described this process was meaning-reconstruction.

Meaning-reconstruction, as the central process of grieving, recognized that grief was not about stages and universal tasks as outlined in the standard model of grief extant in the twentieth century. Meaning as an essential construct and focal point for bereavement caregiving was connected to the evolution of humanity. Neimeyer and Sands (2011:9) reflected: “we as human beings are distinguished by living not only in a present physical world, but also in a world populated by long-term memories, long-range anticipations, reflections, goals, interpretations, hopes, regrets, beliefs, and metaphors – in a word, meaning.”

The term “meaning making” was first used by Brunner (1990) to describe the process by which both individuals and families struggle collectively to make sense of what happened when a significant death occurs (Nadeau 2008). Nadeau explained that through family conversations, “threads of meaning start to emerge and, over time, these threads become woven into a tapestry of family meanings” (Nadeau 2008:512). The meaning in “meaning making” may be related to a much earlier concept of searching for meaning in a difficult event in life (Frankl 1959).109 Yet, Neimeyer and others built upon this earlier conception of meaning and developed a more sophisticated understanding of meaning through a postmodern constructivist lens. Constructivism, as a postmodern theory of knowledge, suggested that meaning was generated from the interaction between experiences and ideas. People develop workable fictions to order and cope with the data of life (Kelly 1955/1991; Neimeyer 2009). According to Neimeyer, although most therapists acknowledged “that a ‘real

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109 Victor Frankl may have focused the concept of meaning to positive messaging; however, negative meanings can also result in meaning construction through difficult or troubled bereavement experiences (Nadeau 1998). Examples included deaths that were perceived as a failure to respond to a crisis (e.g. calling an ambulance) or as a preventable crisis (e.g. forcing hospital staff to act in time).
world’ exists outside of human consciousness or language, they are much more interested in the nuances in people’s construction of the world than they are in evaluating the extent to which such constructions are ‘true’ in representing a presumably external reality” (2009:3). In short, constructivism, as an empathic inquiry, was built upon the seminal belief that reality was socially constructed (Berger and Lockman 1966). In contrast to an associationist type of empiricism that assumed the mind can produce a copy of the actual order of things, constructivism emphasized a phenomenal world of human experience. As such, the emphasis in grief was not on a universality of response, but on individuality of response to loss. For social constructivists, there was no “single ‘grand narrative’ of grief but a panoply of perspectives within which any given family or individual is positioned” (Neimeyer 2001:264). Moreover, the emerging knowledge of grief emphasized “the bereaved individual’s unique quest for a personal narrative that ‘makes sense’ of a changed reality and that finds support in the social domain” (Neimeyer 2001:261).

The current body of knowledge on grief recognized the phenomenology of bereavement and mourning (Dubose 1997). Though grief was identified as a ubiquitous human experience, each person constructs a different phenomenological world. Caregivers, such as funeral directors, were not encouraged to approach one’s unique experience of loss with expert knowledge. Instead, caregivers needed to recognize that “each person is a constructor of a different phenomenological world and occupying a different position in relation to broader discourses of culture, gender, and spirituality” (Neimeyer and Keesee 1998). Nurturing caregiving was less anchored to a strict form of objective reality, but more focused upon the individuality of the grief journey. Neimeyer (2006:184) concluded: “human beings are inveterate meaning-makers – weavers of narratives that give thematic significance to the salient plot structure of their lives.”

Having outlined the basic conceptualization of the phenomenology of grief, the review discovered that both funeral service and bereavement psychology merged together on an essential integrated construct – that of meaningful caregiving and reconstruction (Wolfelt 2011a; Neimeyer 2001) (see Figure 20). The practical aim for all bereavement
caregivers, including funeral and grief professionals, was helping families and individuals adapt to personal loss. In funeral service, professional caregivers were encouraged to assist families in creating meaningful ceremonies and events that would aid in grief adaptation. Bereavement psychology suggested that “the most common strategy used by families to make sense of a death in the family is to tell their story” (Nadeau 2008:521). Gilbert (2002:236) offered sage advice pertinent to funeral practitioners: “we need to create stories to make order out of the disorder and to find meaning in the meaningless.” Without ignoring or abandoning the skills, expertise, and services that the profession was known for since its inception, the review suggested that funeral service practitioners may best help the bereaved by walking with them as they confront and revise their life narratives (Long 2009; Gilbert 2002; Davis and Nolen-Hoeksema 2001). Narrative, as both a phenomenon and method (Gilbert 2002:224), provided a powerful approach to bereavement caregiving applicable to funeral service practitioners and others given to nurturing care (Crites 1971). As such, meaningful caregiving may be informed best by meaning-reconstruction.

Figure 20: Integrated Paradigm of Funeral Service and Bereavement Psychology

Relative to the concern of the present study regarding deritualization (i.e. the possible lack of care provided to those who chose to dispose of their dead with minimal or no
ceremonies), the concept of meaning-making offered an intriguing insight. Without rituals to tell one’s story and seek meaning and understanding of a significant loss, there was a paucity of research about adaptive outcomes. Nevertheless, in an empirical study of bereaved college students, Currier, Holland, and Neimeyer (2006) suggested that “failure to find meaning in a loss was a better predictor of grief complications than were the circumstances of violent death” (Nadeau 2008:515). These kinds of findings indicated a possible correlation between deritualization and grief complications that nonetheless appeared absent from the research literature.

In summary, meaning provided the chief integration point between current funeral service and bereavement psychology. As the central process of grieving, meaning-reconstruction was more than an esoteric theory for academicians, it provided a basis to benefit all the helping professions, like professional funeral service, “who assist people with the reconstruction of their lives in the wake of unbidden transition” (Neimeyer 2001:xii). At the same time, integrating meaningful caregiving and meaningful reconstruction may have posed a challenge to practitioners (Neimeyer, Harris, Winokuer, and Thornton 2011). Operating from two different epistemological bases, the funeral industry entrenched in applied business thinking, and bereavement psychology entrenched in academic and clinical contexts of social science, a need for a practical theology of caregiving was recognized. Pastoral care connected and informed the disciplines of funeral service and bereavement psychology for improved bereavement caregiving, specifically adding knowledge to the spiritual realm of coping, a major concern for the current study. To this subject, the review of literature was further developed.110

110 The study noted that one could argue that the meaning-giving and meaning-reconstructionist options open up new avenues for exploring not merely the psychology of mourning and loss but also the spirituality of mourning and loss and its connection to the realm of the transcendent.
2.5 Part II: How the World Should Be According to Practical Theology

Guided by the conceptual framework provided by the LIM model of practical theology, Part II of the literature review developed an informed perspective of how the world should be according to the discipline of practical theology. The review addressed the current inquiry into the development of a practical theology of caregiving for the bereaved, with a special focus on the interplay between loss, bereavement, and the spiritual realm of coping. Part II of the literature review provided the critical evaluation of the third discipline (i.e. practical theology) suggested in the first research question of the study:

1: What do the multiple disciplinary fields of funeral service, bereavement psychology, and practical theology add to a conceptualization of bereavement caregiving, given the current cultural shift toward deritualization?

To address this research question, Part II was organized into three main sections. First, to provide a broad context for understanding the research topic, the review provided a brief overview of practical theology as an academic discipline designed to address complex social problems. Second, the review explored how postmodernism shaped the pervasive ethos extant in contemporary bereavement care. Third, the literature review provided a Louwian perspective of practical theology most applicable to the research in order to foster a deeper understanding of how to improve bereavement caregiving in terms of pastoral care.

The intent of the literature review in practical theology was to raise awareness and understanding of the theological dimension in the current study. The research in this discipline provided insights that the role a theology of compassion on anthropology has in cura animarum as well as on processes of bereavement in pastoral care. The research in the field of practical theology was therefore undergirded by the interplay between grief care and rituals for mourning taking into consideration that comfort is an essential element of the ecclesial praxis of a community of believers (koinonia).
Brief Overview of Practical Theology as a Twenty-first Century Academic Discipline for Addressing Complex Social Problems

In the broad categories of traditional disciplines that organize all human knowledge, practical theology was located within the religious studies division in general and a specific branch of theology in particular. To be clear, practical theology was commonly recognized as a distinct theological discipline, such as systematic theology, historical theology, and biblical theology. To provide an overview of the disciple of practical theology, the literature review was organized in terms of 1) the origins of practical theology, 2) definitions of practical theology, and 3) the scope, approaches, and expected outcomes of practical theology.

ORIGINS OF PRACTICAL THEOLOGY

Practical theology was recognized as a burgeoning subject area always "moving, changing, and adapting" (Woodward and Pattison 2000:xiii). The roots of practical theology were connected to the ancient history of Christianity in its quest to provide guidance, healing, reconciliation, and sustenance to that faith community (Clebsch and Jaeckle 1975; Thesnaar 2011). Other roots were found in the historical traditions of practical wisdom (i.e. phronesis) associated with Aristotle, Augustine, Aquinas, Hume, Kant, James, and Dewey (Browning 1996:2). Yet, Woodward and Pattison suggested that practical theology was "a term that emerged in the German Protestant tradition as part of the academic theological curriculum in the late eighteenth century" (2000:2). The individual credited as one of the chief founders of practical theology was German theologian Friedrich Schleiermacher (1768-1834), as he worked to formulate a practical answer to the Enlightenment's ascent of modern autonomous humanity (Heitink 1999:4). Schleiermacher was instrumental in the formation of a Protestant chair of practical theology at the University of Berlin in 1821 where the focus was the

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111 Schleiermacher did not envision what pastoral bereavement care would look like in today's contemporary context, where some bereaved fit neither into either a Protestant or Catholic group, but a pluralistic and secular group that embraced deritualization. He stated, "it is unnatural for the [funeral] ceremony to be carried out without involving the minister as a representative of the church" (1988:79). At the same time, Schleiermacher demonstrated his penchant for practical theology in his insightful instructions regarding a minister and a funeral. To warn against indifference that could arise by frequent repetition, Schleiermacher brilliantly contended that every funeral should have not only a kerygmatic liturgical element, but should also include a voluntary element that links religious considerations directly to a personal element "and represent the family" (Schleiermacher 1988:80).
Chapter 2: Review of Related Literature

theory of the church’s practice of Christianity (Anderson 2001:24). Operating from
within a clerical paradigm, Schleiermacher “was the first to set forth a vision of practical
theology as a unified field of study” (Schleiermacher 1988:7). Heitink observed that
Schleiermacher was “the first modern theologian, who, recognizing the value of the
Enlightenment, wanted to build a bridge to modern humanity by reflecting on the
Christian faith on the basis of experience of the subject” (1999:19).

Practical theology did not develop in a vacuum as a single new discipline, but was
inextricably connected to classical pastoral theology. In Terry Veling’s *Practical
Theology: On earth as it is in heaven*, practical theology and pastoral theology were
described as interchangeable terms (2005:xii). Nevertheless, Woodward and
Pattison argued that “pastoral theology is an older term than practical theology”
(2000:1). To be sure, the practical elements of classical pastoral care represented a
deep stream of pastoral images (Dkystra 2005) that gave shape to practical theology,
such as pastoral care being described as a living human document (Boisen 1936,
Gerkin 1984), a living human web (Miller-McLemore 1996), a solicitous shepherd
(Hiltner 1959), a courageous shepherd (Campbell 1981), a wounded healer (Nouwen
1972), a wise fool (Capps 1990), an intimate stranger (Dykstra 1990), and an
indigenous storyteller (Wimberly 1991). These broad terms provided the underpinning
for a pastoral care of souls (McNeil 1951; Mitchell and Anderson 1983) that ensured
“the individual and corporate wellbeing and flourishing of the Christian ‘flock’”
(Woodward and Pattison 2000:2).

While earliest forms of practical theology was located within the institutional activities
of religion and church life, such as preaching, Christian education, and counselling as
a baseline for the subject, later forms of practical theology was much broader in scope,
and broke away from a clerical paradigm of ministry (Farley 1983; Campbell 1972).
Miller-McLemore explained that in the 1950s and 1960s, “scholars in the study of

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112 Miller-McLemore argued that although pastoral theology and practical theology shared a
common interest in lived experience, “they are not as interchangeable now as in other periods, places,
and traditions” (2014:6). As such, practical theology represents a much broader enterprise than pastoral
theology. In other words, pastoral theology today was one of many valued subdisciplines of practical
theology (Miller-McLemore 2014:6).
theology and religion began to challenge a structure of theological knowing particular to modernity that restricted practical theology to the application of doctrine to pastoral situations" (2014:1). Contemporary practical theology was therefore not concerned solely with the tasks of clergy or the life of congregations; in fact, “the scope of the field includes matters of public importance beyond the church” (Osmer 2008:x). Practical theology combatted both the fragmentation of theology and the specialization of clerical ministry in favour of a more integrated whole. As such, in the Reformed tradition, practical theology became the preferred term that included pastoral theology. The difference between the terms pastoral theology and practical theology was perhaps one of emphasis. With pastoral theology the focus in many cases was related to pastoral care within the church; with practical theology however, the focus was often more academic in terms of developing theoretical frameworks for understanding issues that extend beyond the church community (Woodward and Pattison 2000:3).

Practical theology was not the first attempt of the church to describe faith as an embodied act, where the gospel of Christ was not merely something to be believed, but something to be lived (Swinton and Mowat 2011:5). Jean Leclercq’s seminal book *The love of learning and the desire for God* (1961) described a time when, within a wonderful monastic culture, theology was not fragmented. Veiling explained (2005:3):

*Leclercq evokes a time when study and the love of learning was part and parcel of the desire for God, and was never divorced from liturgy and prayer, human work and labor, contemplation of the scriptures,*

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113 Seward Hiltner was also a pioneer figure of practical theology in the 1940-1950s (see his 1949 *Pastoral Counseling*, his 1958 *Preface to Pastoral Theology*, and his 1959 *The Christian Shepherd*). According to Woodward and Pattison, “Hiltner did perhaps more than anyone else to establish and foster practical theology as an area of serious, distinctive academic and practical concern. His thinking both reflected and helped to stimulate the contemporary renaissance in pastoral and practical theology as serious, critical academic as well as pragmatic concerns” (2000:27).

114 The review of literature suggested that Anglicanism still tended to use the term pastoral theology when discussing practical action of individuals and the church. Moreover, pastoral theology was used within the Catholic tradition to describe practical priestly functions, such as administering the sacraments, marrying couples, and burying the dead (Woodward and Pattison 2000:2). At the same time, though pastoral theology and practical theology were often regarded as synonymous terms, by the 1990s it was perhaps significant the British Pastoral Studies Teachers’ Conference changed their name to the British and Irish Association for Practical Theology (Woodward and Pattison 2000:4).
the search for wisdom (in philosophy and the arts), or pastoral concern and the “love of neighbour.”

As such, practical theology was best understood in broad interdisciplinary terms wherever theology and pastoral care meet (Hunsinger 1995). As such, practical theology was aimed at reclaiming “a certain reintegration of theology into the weave and fabric of human living, in which theology becomes a “practice” or “way of life” (Veiling 2005:3). In short, practical theology was not something delimited by professional clergy, but found its point of departure in shared human experiences (Swinton and Mowat 2011:5).

While the focus of practical theology was not limited to the religious institutional work of pastors alone, but extended to all human experiences of daily life, practical theology eventually developed into a distinct academic discipline. Practical theology was not fully formalized until the 1960s as demonstrated by publications appearing in the Netherlands, Germany, and the United States (Heitink 1999:1; Ballard and Pritchard 1996:ix). As the discipline of practical theology came of age, one significant distinctive was the embrace of a post-foundational epistemology that recognized “an old world is dying and with it the relics of a church and its theology too” (Maccallan 2014:vii). Post-foundationalism moved practical theology as a discipline away from modernism in terms of methodological assumptions and understandings of life. Practical theology was forged within the space of a new world paradigm. Maccallan explained (2014:vii):

In the old world church and theology was caught by the hubris of the illusion that fallible humans can have absolute knowledge and certainty, can actually solve whatever problem they are confronted with. This certainty is described by the word foundationalism. It was born during the Enlightenment and reared in modernity. Fundamentalism is its rather ugly offspring, the bitter fruits from which nobody can escape.

Practical theology was understood from a historical perspective as a crisis discipline (Heitink 1999). By 1968 for example, practical theologians at the Catholic University in Nijmegen, the Netherlands reported “a growing divide between the teachings of the
church and the convictions of the church members” (Heitink 1999:3). Moreover, Jacob Firet, the first professor of practical theology at the Free University of Amsterdam, argued in 1968 that modern society did not follow the model of the church any longer (Heitink 1999:3). As a result, under Firet’s leadership, the Institute of Practical Theology (IPT) was founded (Heitink 1999). Practical theology, as a specialized discipline, was developed therefore out of a need for adaptation and renewal amid social crises. Heitink (1999:4) summarized: “practical theology has borne this character of a crisis discipline since it originated at the end of the eighteenth and beginning of the nineteenth century.”

By the end of the twentieth century, practical theology as an academic discipline worthy of study was fully legitimized internationally. In fact, the International Academy of Practical Theology was born in Princeton in 1991 and formally inaugurated in 1993 (Ballard and Pritchard 1996:2). Also, Poling explained that “practical theology was recently recognized as full member of the American Academy of Religion, one of the largest international meetings of religious scholars” (2011:150). As a relatively recent field of study, practical theology provided much promise for broad interdisciplinary research to be developed in time.

DEFINING PRACTICAL THEOLOGY

To understand the significance of practical theology, an operational definition was needed. Practical theology was not an easily defined in the literature because of its multivalent nature. The following definitions were considered before providing a more nuanced operational definition for the current study. Swinton and Mowat offered the following definition of practical theology (2011:6):

Practical theology is critical, theological reflection on the practices of the Church as they interact with the practices of the world, with a view to

115 The first chair for pastoral theology in the Netherlands was established in 1964 among the faculty of theology at a Catholic University in Nijmegen (Van der Ven 1998a).

116 Though there are many reputable practical theologians in the field today, three early pioneers identified were Don Browning, Chuck Gerkin, and Hans Van der Ven (Osmer 2008:viii). Van der Ven himself listed other founding fathers in pastoral theology: Frans Haarsma, Osmund Schreuder, Willem Berger and Fons Knoers (1998b:1).
ensuring and enabling faithful participation in God’s redemptive practices in, to and for the world.

Heitink defined practical theology as a theory of action: “the empirically oriented theological theory of the mediation of the Christian faith in the praxis of modern society” (1999:6). The Dictionary of pastoral care and counselling (Hunter 1990) offered a traditional concept as well as contemporary correctives. From a traditional perspective, practical theology was a term in theology “long before it came to mean a discrete field of clergy studies” (Hunter 1990:934). From this perspective, practical theology consisted of five prominent activities of vocational ministers – preaching, liturgics, catechetics, pastoral care, and church polity. Yet, from contemporary perspectives, practical theology was criticized for being limited to clergy activities. Instead, contemporary practical theology moved out of the limited context of clergy and the church and focused on the importance of thematising Christian action. In short, practical theology was defined as “an area or discipline of theology whose subject matter is Christian practice and which brings to bear theological criteria on contemporary situations and realms of individual and social action” (Hunter 1990:934).

In a more recent work, Miller-McLemore (2014) suggested that practical theology consisted of four distinct enterprises, each with a different audience and objective. Practical theology was a discipline among scholars, an activity of faith among believers, a method for studying theology in practice, and a curricular area of subdisciplines in seminaries (Miller-McLemore 2014:5). These four enterprises of practical theology were beneficial to demonstrate the complexity of practical theology in descriptive, rather than prescriptive terms (Miller-McLemore 2014:5).

Nevertheless, for the purpose of the current study, a definition of practical theology was focused upon interaction between orthodoxy and orthopraxis – that is, religious belief and behaviour. In this way, Woodward and Pattison offered perhaps the best operational definition of practical theology:

*Pastoral/practical theology is a place where religious belief, tradition and practice meets contemporary experiences, questions and actions and*
conducts a dialogue that is mutually enriching, intellectually critical, and practically transforming (2000:7).

Given an operational definition of practical theology, two common questions emerged. “What’s practical about practical theology” and “what’s theological about practical theology?” First, practical theology was considered practical because the discipline was not relegated to mere academic theory and esoteric language. Practical theology was concerned with “actions, issues, and events that are of human significance in the contemporary world” (Woodward and Pattison 2000:7). Practical theology was designed to connect with people in real lived experiences. As such, practical theology was designed to make a real difference in life. To be clear, the identity of practical theology was explained in terms of contemporary human conditions. At the same time, “this does not mean, however, that practical theology has to adopt a dogmatic instructive, minute, or monolithic approach to things” (Woodward and Pattison 2000:7). Second, practical theology was considered theological because the discipline was informed primarily by Christian tradition, beliefs, and practices, including the Bible, theology, and liturgy. Practical theology was also theological in the sense that it aims at making a contribution to Christian understanding. Woodward and Pattison noted: “practical theologians may be able to help alter, deepen, or even correct theological understandings” (2000:8). In this way, practical theology was iterative, dynamic, and intentionally interdisciplinary.

THE SCOPE, APPROACHES, AND EXPECTED OUTCOMES OF PRACTICAL THEOLOGY

The scope of practical theology was much broader than other branches of theology. In fact, the discipline was designed to provide an almost infinite reach that relate real world issues of daily life to the theological enterprise. Woodward and Pattison noted: “Any issue that is of practical contemporary human and religious concern may become the focus for practical theological consideration” (2000:8).

With a limitless scope of the field, the review of literature not surprisingly surfaced a broad spectrum of approaches to practical theology as well. For example, Johannes Van der Ven proposed an empirical approach to practical theology (1998b). Van der
Ven recognized that by 1975, practical theology fully embraced an interdisciplinary approach:

Theologians themselves began applying the methodology of empirical research to the field of pastoral theology, in order to describe, analyse and explain pastoral and ecclesiastical problems from their own particular theological point of view. Just as exegetes apply the methods of linguistics and literary theory, church historians and theological historians the methodology of the historical sciences, and systematic theologians the systematic procedures of philosophy, so the pastoral theologians now utilize the tools and techniques of the empirical sciences in order to gain a better understanding of the theological questions of particular interest to them and solve their own theological problems (1998b:2).

An empirical approach to practical theology was not the only approach, nor the preferred approach in the literature. In fact, the conversation of practical theology extended to a variety of approaches, such as an African practical theology, African American practical theology, Asian American practical theology, Evangelical practical theology, Feminist practical theology, Liberationist practical theology, Neo-Protestant practical theology, and Postmodern practical theology (Cahalan and Mikoski 2014; Lartey 2013; Barnett 2012; Ackermann 1998).

Despite the wide varieties of approaches to practical theology, there were common elements identified that solidified the discipline. In the introduction to Opening the field of practical theology (2014), editors Kathleen Cahalan and Gordon Mikoski, described eleven (11) key features representative of practical theology. Practical theology was characterized as being:

1. Attentive to theory-practice complexity;
2. Practice and performance oriented;
3. Oriented to multidimensional dynamics of social context and embodiment;
4. Holistic;
5. Interdisciplinary;
6. Open-ended, flexible, and porous;
7. Theologically normed;
8. Hermeneutical;
9. Interventionist and critically constructive;
10. Teleological and eschatological; and
11. Self-reflective and self-identified.

Just as Cahalan and Mikoski (2014) provided an excellent description of practical theology is, Richard Osmer (2008) offered perhaps the best description of what practical theology accomplishes. According to Osmer, the core tasks of practical theology addressed four (4) basic questions: What is going on? Why is this going on? What ought to be going on? How might we respond? To answer the first question (“what is going on?”), practical theology focused on the descriptive-empirical task, gathering information to help discern patterns and dynamics in particular episodes, situations, or contexts. To answer the second question (“why is this going on?”), practical theology focused on the interpretive task, drawing on theories of the arts and sciences to better understand and explain why these dynamics were occurring. To answer the third question (“what ought to be going on?”), practical theology focused on the normative task, using theological concepts to interpret particular episodes, situations, or contexts. To answer the fourth question (“how might we respond?”), practical theology focused on the pragmatic task, determining strategies of action that influenced situations in ways that were desirable and entering into a reflective conversation.

Despite the limitless scope and broad spectrum of approaches to the field, practical theological activity, as a transformative process, included desired and tangible outcomes. Though not attempting to excavate an exhaustive list of potential outcomes, practical theology sought various types of changes, including changes in understanding, thinking, attitudes, beliefs, and behaviour. These types of changes were not necessarily independent of one another, but often were combined in a practical theological task. In broadest terms, practical theology was the attempt to
“understand and respond to contemporary human issues from a theological perspective” (Woodward and Pattison 2000:10). Woodward and Pattison described how various outcomes of practical theology were often related: “it may also be hoped and expected that the practical theological process will lead to people changing their attitudes and beliefs in practice so that they actually begin to behave differently” (2000:10). At the same time, with deference to desired outcomes, practical theology as a field of study had the potential to extend beyond Christian religious communities to influence wider human interests and concerns. Because of the ubiquity of death and bereavement across all cultures and contexts of religious and non-religious beliefs, practical theology was an important field for the current study.

Postmodernism as a Pervasive Ethos for a Practical Theology of Bereavement Caregiving

With a broad understanding of the dynamics of practical theology being developed through the literature, the current study established the fact that the field of practical theology and pastoral care provided an unique and significant perspective to the research problem – the realm of spirituality (Ganzevoort 2013:7). However, to advance an improved conceptualization of effective pastoral care in the twenty-first century, the study recognized that the problematic field of bereavement care must be understood first within a particular localized context. To be clear, the goal of the study was not to approach pastoral care naïvely, as if caregiving occurred in a vacuum, but rather to understand the dynamics involved in the contextualization of care. In specific terms, the study focused on bereavement caregiving in the United States that operated in a cultural environment characterized by a pervasive ethos of postmodern thought – what Long and Lynch referred to as being “lost in the shuffle of postmodernity” (2013:182). As such, the literature review gave specific attention to the dimensions of postmodernity with respect to the development of meaningful pastoral care for the bereaved in the current century.

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117 Ganzevoort explained how the concept of desire “can be seen as the power of self-transcendence, moving us beyond the boundaries of our existence towards something or someone else. As self-transcendence, it almost immediately takes on spiritual meanings” (2013:7).
THE DIMENSIONS OF POSTMODERNITY
In order to seek an effective model of practical theology that could address contemporary bereavement needs, the study engaged the literature in order to seek a deeper understanding of what gave postmodernity its distinctive shape. By better understanding the postmodern climate, the study maintained that bereavement caregiving could be improved.

Franke explained the postmodern turn at the beginning of the twenty-first century well: “the intellectual milieu of Western thought and culture is in a state of transition precipitated by the perceived failure of the philosophical assumptions of the modern world spawned by the Enlightenment” (2004:117). Though going well beyond the scope of the current study, there was indeed much critical analysis in the literature that traced the development of postmodern thought to individuals such as Gilles Deleuze, Michel Foucault, Jean-François Lyotard, Jacques Derrida and others (McGrath 2012; Moreland 2005; Hart 2003; Dockery 1995). Ramshaw (2010:171) in particular offered a helpful summary of the essential contours of postmodern thought.

*Increasing pluralism and secularism, the decline of tradition-bearing communities, the decreasing authority of traditional meta-narratives, the public/private split and the relegation of questions of meaning to private sphere, and the growing values of individualism and consumer entitlement to choice.*

Kelly (2008) concurred in part with Ramshaw, but offered perhaps a more nuanced understanding of the dimensions of postmodernity appropriate for bereavement care. In short, Kelly rejected the notion of inevitable secularization (2008:10): the true hallmarks of postmodernity were the collapse of the modern concept of a meta-narrative (i.e. a grand story to explain all other stories), the autonomy of the individual, and the sharp divide between the public and the private.\(^\text{118}\)

\(^{118}\) Another way to describe this collapse is to suggest that postmodernity is modernity correcting itself.
The review noted that postmodernity did not extend support to the secularization thesis (i.e. that the world was getting continually more secularized), particularly the world as seen through the eyes of United States citizens living in the twenty-first century. Kelly explained: “secularization is not so much about a reduction in religious belief but a privatization of those beliefs and expression” (2008:17). Volf proffered a similar interpretation: Under the conditions and forces of increasing globalization, religions were alive, growing, and publically assertive…“but religions are changing” – ostensibly in part under the influence of postmodernity (2015:66).

The significance of a turn from modernity to postmodernity was not overstated in the review (Doehring 2015, Kelly 2008). In prior periods of bereavement caregiving, the basic (even unquestioned) acceptance of the concept of a metanarrative certainly influenced a belief in attending to the bereaved through the appropriation of specific ritualized experiences using prevailing theories of care. Within a postmodern context however, there would no longer be a monolithic approach to how the bereaved should find healing and comfort. In fact, postmodernity rejected rigid meta-theories that guided caregivers in the sure application of care to all people. With regards to the current study, the review made clear that deritualization as an openness to revise, replace, or even avoid post-mortem ritual practices grew out of postmodern sensibilities. Postmodernism was therefore critical to understand the pervasive cultural ethos of the bereaved. Instead of addressing pastoral care with a modern technocratic approach of fixed rituals with sequential expressions of grief experiences, attention on the individual and how he/she processes loss, was needed.

The literature suggested that postmodernity highlighted the perspective of the mourner. Postmodernity rejected grand theorizing and clinical lore in favor of more personal and existential expressions of grief and mourning. A postmodern context did not remove or eliminate the inevitable pain and suffering associated with the experience of a death of a loved one; instead, postmodernity moved the focus of care away from a prevailing clinical lore toward the perspective of individual mourners (Ganzvoort 2010). This emphasis on individuality did not mean that all grief knowledge and theories were rejected in entirety. In fact, McNeish suggested that
“models of grief are therefore perhaps most useful when considered as framework upon which grieving can be negotiated rather than as a mold into which grieving must fit” (2013:200). Even Derrida, considered by many to be a father of postmodern thought, corroborated the significance of individual encounters with grief with a powerful description of what it means for a postmodernist to lose a friend:

To have a friend, to look at him, to follow him with your eyes, to admire him in friendship, is to know in a more intense way, already injured, always insistent, and more and more unforgettable, that one of the two of you will inevitably see the other die...the day will come when one of the two of us will see himself no longer seeing the other and so will carry the other within him a while longer, his eyes following without seeing, the world suspended by some unique tear (Derrida 2001:107).

For Derrida, there was no metalanguage for a work of mourning, only another experience of it (2001:143). Grief therefore was not at all rejected by postmodern sensibilities; instead the experience of the interplay between death and loss was significantly personalized and arguably intensified in a postmodern context.

POSTMODERNITY AND THE SEARCH FOR MEANING IN GRIEF AND BEREAVEMENT

Obviously, understanding the climate of postmodernism was critically important to bereavement caregivers, because care must be defined now by the particular needs of the individual, not necessarily by a grand story that would prescribe fixed rituals and liturgies to meet all needs. The literature suggested that there was not one size to fit all when it came to compassionate nurturing care of bereaved people. In this way, pastoral care must not advance fixed solutions to caregiving. Postmodernity gave rise to a more personal and flexible approach to bereavement care. In this way, care seekers often sought the kinds of funeral rituals that were most meaningful to them – even if that meant having to step away from traditional or even familiar rituals. Ramshaw explained: “the equation of ‘meaningful’ with ‘personal’ is a giveaway of postmodern culture’ (2010:172). Moreover, Ramshaw concluded that “a ritual is likely to be meaningful to the extent that it is personally constructed or tailored to one’s own
experience” (2010:172). Bereavement caregivers, such as funeral directors and vocational pastors, needed to recognize that the postmodern turn was a key driver to the perception of meaningful ritual being defined in terms of the personal story of the deceased. Ramshaw asked: “Do personalized rituals help the grieving? Certainly for those for whom meaningful = personalized, some personal crafting of the ritual is critical to its effectiveness” (175).

What must not be misconstrued however was that postmodernity did not create less complexity toward bereavement caregiving, but more complexity and fluidity. To be sure, postmodern care seekers reflexively move from multiple diverging standpoints, often mingling theologies formed in childhood and young adulthood with ongoing practices of personal meaning-making (Doehring 2015:24,191). Doehring (2015:20) explained the complexity of postmodern context for pastoral care well by using a metaphor of a trifocal lens: “people in the twenty first century are cognitively able to shift back and forth among different approaches to knowledge, heuristically identified as precritical (using first-order absolute religious language), modern (using second-order interpretive language), and postmodern (using third-order socially constructed language).” Within this complexity, the review turned toward a specific model of practical theology that would be effective in a fluid postmodern climate.

**A Louwian Perspective of Practical Theology for Bereavement Caregiving and Pastoral Care**

Having provided an overview of the discipline of practical theology as well as outlining the postmodern context for twenty-first century pastoral care, the current study sought a comprehensive perspective of practical theology that proffered an effective approach to pastoral bereavement care. The main argument of the study was predicated upon a fundamental belief that the field of practical theology had much to add to the conversation, dynamics, and challenges that exist in providing meaningful caregiving for the bereaved. The quest for adequate care and support of those who have experienced a significant loss of a loved one to death was connected to the ancient quest of *cura animarum* – the cure of human souls (Oden 1984; McNeill 1951). A faith-based view of human caregiving recognized that “the problems confronting
humans are not limited merely to physical, economic and material issues” (Louw 1998:20). Yet, in a society shaped by postmodernity, “it is no longer clear exactly what ‘cure of human souls’ mean” (Louw 1998:1).

In reviewing the breadth of literature on practical theology, an informed decision was made by the researcher to utilize the work of Professor Daniël J. Louw to advance the study. Professor Louw’s extensive body of work embodied a perspective of practical theology that not only understood how to engage pastoral care within a postmodern context, but offered significant insights applicable to the particulars of the research problem of bereavement caregiving amid a climate of growing deritualization. Though Louw was recognized internationally as a reputable scholar in the field of practical theology, the researcher noted that Louw’s body of work had yet to be brought into a full conversation with contemporary bereavement caregivers in professional funeral service – particularly in the context of the United States of America. Of all of the practical theologians reviewed, Louw’s scholarship demonstrated the most integrated and coherent insights for bereavement caregiving relevant for the advancement of the current research. Louw wrote: “the fact is: life is demarcated by the reality of death” (2012:11). Further, Louw stated that “the art of how to live purposefully despite the reality of death” was what the network of the human soul was all about (2012:21). Louw explained (2012:21):

*The art of living coincides with the rhythm of meaning-giving (purposefulness) and the challenge of discovering the pace of being human. Death is the only landscape in which one draws the profile of life.*

As a motivation for bringing Louw’s body of work into a full view of professional bereavement care among practitioners in the United States, the review synthesized a Louwian perspective of practical theology and pastoral caregiving by considering a

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119 Daniël Louw was currently serving as the president of the International Council for Pastoral Care and Counseling and Professor of Practical Theology at the University of Stellenbosch, South Africa, where he served as Dean of the faculty of theology (2001-2005). Louw served as president of the International Academy for Practical Theology (2003-2005) and was also listed as one of the key contributors in the field (http://www.ia-pt.org/membership/readings/).
theological anthropology, the concept of promissiotherapy, the principle of bipolarity, and the hermeneutics of care and encounter for meaning-reframing.\textsuperscript{120}

\section*{CAREGIVING AND THEOLOGICAL ANTHROPOLOGY}

With an aim towards the role of a theology of compassion, a logical place to begin in the pursuit of bereavement caregiving of people was anthropology – who exactly are human beings? Unfortunately, “very few works in pastoral theology pay special attention to anthropology” (Louw 1999:17).\textsuperscript{121} Louw argued that “one of the most important tasks of a pastoral theology must be to give attention to the theme of what it means to be human” (1998:125). Fortunately, Louw provided a basis for theological anthropology that shaped pastoral care for the bereaved.

Locating the unique contribution of the field of practical theology, Louw contended that “pastoral care and pastoral theology are those disciplines within a practical theology which are engaged with what traditionally has been called \textit{cura animarum} – the care of souls” (1999:5). The basic ancient idea of \textit{cura animarum}, or care of the soul, was that human beings were more than physical, psychological, and social components; instead, soul care extended to the total human person, including one’s spiritual essence (Anderson 2001). The care of souls recognized that humans inhabit more than just a personality, and more than just a physicality. In fact, soul is more than an amalgam of human consciousness, biochemical processes, and psychic functioning – “soul describes the essence of human existence” (Louw 1998:21). To explain, Louw argued that the human soul “should be reinterpreted as a qualitative principle determining our human quest for meaning and dignity” (2012:29). In this way, the care and cure of souls was about the qualitative state of soulfulness – helping people

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\textsuperscript{120} Macallan (2014:39) indicated that a Louwian perspective demonstrated how “pastoral theology forms a part of practical theology…he (Louw) spends a good portion of his time delineating the hermeneutical dimensions of practical theology, and indeed concludes that ‘pastoral hermeneutics is a subdivision of practical theology.’”
\end{flushright}

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\textsuperscript{121} One reason for the difficulty of developing an adequate theological anthropology was the danger of anthropocentrism, or becoming so spellbound by being human (the issue of personal identity), that the issue of God was ignored. Another difficulty in forming an adequate theological anthropology was the opposite danger of theocentrism, or becoming so spellbound by attention to God that the quest for human identity was ignored (Louw 1999:2-3).
\end{flushright}
discover the qualities of human wholeness. Understood this way, the soul was not relegated to a part of a person, a different anthropological category such as the body or mind, but rather more directly, a mode of being. In this way, Louw’s anthropology connected well to Heidegger’s classic understanding of being: “Dasein is an entity for which, in its Being, that Being is an issue” (236). Stated another way, being or “being there” (i.e. dasein) is care and perhaps ontologically cannot not care. This profound integration of Louwian and Heideggerian perspectives highlighted the significant insight that cura animarum in pastoral care was more than mere knowing and doing functions, but must also recognize the significance the functions of simply being present.

In biblical terms, the Hebrew word for soul, nēfésh, broadly denoted the breath of life for any living being, and was closely related to breathing in its verbal form (Pyne 1999: 107). The Greek term for soul, psyché, signified that which was vital in particular for a human being – in other words, human life itself, the totality of one’s being. Taken both terms (nēfésh and psyché) together, the soul was not a separate part of a trichotomous division of three distinct human entities – spirit, body, soul. Louw argued that “Scripture does not divide the human person into three segments when referring to the triad” (1998:168). Instead of referring to a different part of a human

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122 Blackmon and Pyne (2006) critiqued proponents of Exchanged Life and Keswick theology for sharply organizing the mind, will, and emotions as capacities that neatly reside in the human soul. These naïve views of anthropology were too compartmentalized. The soul and the spirit were not separate immaterial entities that were easily distinguishable biblically. Pyne (1999:119) argued for a complex dichotomy of human nature (i.e. material and immaterial aspects) in lieu of a simplistic trichotomy: “those who make an overly simplistic distinction between soul and spirit (or between soul and heart) often approach sanctification in a formulaic but complex fashion. Using charts and diagrams, they describe the conflict between different parts of human nature, noting what happened to each at conversion and suggesting ways in which the “real you” can be manifested. A more biblical approach affirms the complexity of human nature – we cannot be neatly divided into parts – while suggesting a must simpler approach to the spiritual life. Love the Lord your God with all your heart” (see also Pyne’s Dependence and Duty: The Spiritual Life in Galatians 5, 1994 and The new man and immoral society, 1997). In this way, Pyne connected a complex theological anthropology (i.e. humans as material and immaterial aspects) with a more simplistic approach to the spiritual life, and an aberrant simplistic theological anthropology (i.e. trichotomous view) with a more complex approach to the spiritual life.

123 Plato advanced the idea of a basic dualism, where the soul of a human being could exist apart from its body. Matthew seemed to indicate a similar dualism: “And do not fear those who kill the body, but are unable to kill the psyché; but rather fear Him who is able to destroy both psyché and body in hell” (Matthew 10:28).
being, the soul indicated “the quality of life experiences” (Louw 2012:31). In fact, “our humanity and personhood are dynamic and arise from within a systemic network of relations” (Louw 1999:22). Within this qualitative view, soul refers to “a collective identity within the corporate structures of life (i.e. marriage, family, clan and society). Soul reflected a network of social systems and spiritual forces” (Louw 2012:33). Simply put, soul was the whole of human existence; “one does not have a soul, but one is in every fabric of one’s being human, soul” (Louw 2012:33).

A Louwian view of soul was significant for developing a deeper understanding of the research problem. In view of the problem of deritualization, and the possible threat to grief adaptation, a better understanding of human suffering was paramount in order to provide adequate care. Louw’s insightful view of the human soul brought into sharp focus the social network and spiritual forces affected by grief and loss. Louw explained that cura animarum “describes a very special process of caring: caring for human life because it is created by God and belongs to God” (Louw 1998:22). Coping with the demands of life impacted the network of human souls.\(^{124}\) In terms of suffering brought on by acute grief and bereavement, the fear was that human suffering “often leads to disorientation and despair” (2012:29). This was regrettably true even for professing Christians as faith was unable to safeguard against vulnerability and brokenness. In deference to the problem of deritualization, the fear was that turning away from the pain associated with a significant loss, rather than embracing the pain, opened the door for people to become stuck in the liminal space of their woundedness. Louw explained that when people are exposed to severe loss, they can become stuck – “their soul becomes twisted, squashed, and involuted” (2012:29). In fact, in some instances the failure to cope well with loss contributed to the collapse of the soul (Goetz 2006).

Given the threat to existential woundedness when one faced a significant loss, Louw’s perspective of a theological anthropology discussed common approaches to human

\(^{124}\) Louw earlier suggested that pastoral care has undertaken something of a paradigm shift, “moving from the traditional ’soul care’ to a much broader undertaking: ‘faith care within the contextuality of life care’” (1999:1).
healing and well-being. In specific terms, Louw’s anthropology not only included an important understanding of the human soul, but also provided a corrective to two common views of humanity – humans as sinners and humans as living documents.\textsuperscript{125} Louw discussed “the kerygmatic model, with its accent on humans as sinners and the phenomenological, or client-centred model, with its focus on humans as living documents with potential for growth, change and self-realization (Louw 1998:121).

One view of anthropology suggested that humans were basically sinners – guilty before God, and only freed through the expiatory sacrifice of Christ. This reformed view of anthropology focused on the brokenness of humanity and the transient fallibility that stood behind all human problems. Restoration was beyond human competence. Instead, healing was found in the proclamation of forgiveness of sin. Louw criticized the kerygmatic view as exhibiting “the danger of elevating the Fall, thereby completely distorting the notion of creation in a very negative and pessimistic way” (Louw 1998:130). In this view, the Fall had a status beyond God, as “grace is described as a mere reaction to the Fall” (Louw 1998:130). The kerygmatic view was described further as hamartiocentric theology which diminishes the very creatureliness of humanity (Weber 1972:612). Nevertheless, Louw questioned that if a kerygmatic model was abandoned, “do people need grace at all, or have they become so self-sufficient and autonomous that God has become superfluous” (1998:131)?

A second view of anthropology identified humans as living documents. Louw explained this client-centered approach using Carl Rogers’ “non-directive, client-centered therapy to introduce the theme of self-actualizing in pastoral care” (1998:131). The client-centered approach was governed by a phenomenological inner frame of reference. Unlike the kerygmatic view, the client-centered understanding was more supportive than presentative and proclamational. Louw suggested: “sin becomes secondary: inner potential becomes the key to all pastoral therapy”

\textsuperscript{125} Stellenbosch University  https://scholar.sun.ac.za

Thesnaar suggested that there were, in fact, many approaches used in pastoral care; the kerygmatic approach and the client-centered approach were substantial common examples of two polar opposite perspectives in the vast continuum of pastoral care (2012:216).
Chapter 2: Review of Related Literature

To be sure, “the client-centered model risks interpreting sin in psychological terms and diminishing it to a mere obstruction or pathology” (Louw 1998:135).

Louw recognized that pastoral care was not limited to a sinner’s redemption (e.g. kerygmatic view) or about freeing a person from blocked potentials (e.g. phenomenological/client-centered view). In fact, both the kerygmatic model and the client-centered model represented what could be referred to as zombie categories (Possamai 2007). Slater and Ritzer explained that “zombie categories are ‘living dead’ categories which govern our thinking but are not really able to capture the contemporary milieu” (2001:262). In this way, zombie categories within a theological anthropology were “irrelevant and inappropriate categories and conceptualizations of issues and belief systems” (Louw 2012:11). Thesnaar concurred: “it is clear that both the kerygmatic and the individual client-centered approach to healing and reconciliation are too limited and one-sided” (2012:217). Eventually, both approaches to pastoral care led to reductionism: “pastoral care commuted between either a theological reduction (our basic problem is sin – one is in need of redemption) or a psychological reduction (our basic problem is blocked, inner potentialities – one is in need of self-realization)” (Louw 1999:5).

Table 12 below contrasted the two aforementioned approaches to pastoral caregiving. Though both models had the goal of human healing, the kerygmatic model was deductive, based on the religious doctrine of human sin, and emphasized a homiletic event, where the client-centered model was more inductive, based on the psychological doctrine of inner human potentialities, and emphasized phenomenology (Sava 2011). Moreover, caregiving in the kerygmatic model found its remedy in the religious orthodoxy of salvation and going to heaven when one dies; the client-centered model found its remedy in perceived needs and psychological well-being. While each approach affords some important aspects, such as the kerygmatic emphasis on truth and the client-centered emphasis on empathic listening, shortcomings were evident in both approaches. In terms of the current study dealing with bereaved families, when a kerygmatic approach overemphasized the role of the
funeral sermon, participatory rituals were often underutilized. Also, when a client-centered approach overemphasized the role of non-direction from caregivers, helpful rituals that could have been employed by the bereaved were ignored.

Table 12: Pastoral Care Models Contrasted

<table>
<thead>
<tr>
<th>Kerygmatic Model</th>
<th>Client-Centered Model</th>
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<tbody>
<tr>
<td>Goal: helping and healing people</td>
<td>Goal: helping and healing people</td>
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<tr>
<td>Deductive – Humanity as sinners</td>
<td>Inductive – Humanity as living documents</td>
</tr>
<tr>
<td>Based on religious doctrine of human sin before a</td>
<td>Based on psychological doctrine of inner human potentialities</td>
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<tr>
<td>perfect and Holy God</td>
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<tr>
<td>Emphasis is on a homiletic event</td>
<td>Emphasis is on phenomenology</td>
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<tr>
<td>Care is located in a religious proclamation</td>
<td>Care is located in an empathetic response</td>
</tr>
<tr>
<td>Remedy is found in religious orthodoxy</td>
<td>Remedy is found in the perceived needs</td>
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<tr>
<td>Focus: going to heaven when you die</td>
<td>Focus: psychological well-being</td>
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<tr>
<td>Anthropology is anchored to the idea that people</td>
<td>Anthropology is anchored to the idea of improving the quality of human life</td>
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<tr>
<td>are spiritually broken</td>
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<tr>
<td>Short Falls:</td>
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<tr>
<td>- Care is often reduced to proclamation of words</td>
<td>- Care is often reduced to psychological potential</td>
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<tr>
<td>- The theological idea of the &quot;Fall of humanity&quot; is</td>
<td>- Approach may weaken the reality of human brokenness</td>
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<tr>
<td>often overly elevated</td>
<td>- Rituals may be ignored if desired</td>
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<tr>
<td>- Rituals can often be non-participatory</td>
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</table>

In deference to understanding the soul and human personhood from the perspective of the two common models of anthropology, humans as sinners (the kerygmatic approach) and humans as living documents (the client-centered/phenomenological approach), Louw summarized:

A kerygmatic model frequently results in a reduced anthropology: human beings remain mere sinners. A phenomenological and client-centered model frequently results in an over-estimation of human abilities for self actualization. This model also runs the risk of oversimplification and opportunism, thus creating unrealistic objectives. In a theological anthropology a person’s abilities should be viewed with regard to the work of the Spirit. Hence, the role of pneumatology and the importance of an understanding of our human potential from the perspective of faith (1998:169).

Building outward from a base in theological anthropology, the challenge was to develop an interdisciplinary approach without falling into the shortcomings of the
aforementioned anthropological models. Fortunately, Louw offered a much better pastoral approach for human caregiving. Yet, before describing that view, Louw suggested a further significant nuance to develop a better anthropology – the work of the Spirit. Louw stated that “the notion of person as a pneumatic being should play a decisive role in a theological anthropology” (1998:167). Louw defined the key question as such:

If our argument for a theological design for a pastoral anthropology moves toward a paradigm shift (that is, away from the traditional founding of anthropology in the ‘image of God’ to the pneumatic dimension of new life in Christ: spiritually linked to the Spirit of God), what then is the role of pneumatology in a pastoral anthropology? What is meant by the term ‘pneumatic human being’ (1998:168)?

The reason to adopt a pneumatological approach to pastoral care was to help human beings cope with different crises in life from the perspective of the charismatic dimension of spirituality. De Freitas contrasted Louw’s pastoral approach described as a covenant-oriented dialogue to a psychological approach limited to a communication-oriented dialogue (2012:255). Louw explained that “the fruit of the Spirit should be embodied and enfleshed within the systematic interrelatedness of human life” (2004:109). For example, unconditional love, the most basic gift of the Spirit of God, helped the bereaved respond (i.e. *respondeo ergo sum*) and discover purposefulness in the context of human grief and suffering with respect to human spirituality (Louw 2004:109). From a Louwian perspective, an important point of departure for an adequate theological was therefore not simply the traditional *imago dei* (i.e. humankind made in God’s image), but included the human *pneuma* – the capacity for humans to have knowledge of self, knowledge of other selves, and knowledge of God (Louw 1998:168).

What must not be missed was the significance of Louw’s emphasis on the human pneuma for bereavement caregiving. By insisting that a theological anthropology included more than the traditional view of the *imago dei*, but also the concept of
Chapter 2: Review of Related Literature

pneuma, human existence ontologically was not only inherently valuable, it was also inherently vocational. Louw’s depiction of a pneumatic humanity coincided with both a responsibility to care and steward God’s creation – sometimes referred to as the cultural mandate for human beings to create and cultivate (Crouch 2008), but also a capacity to respond to God as the Creator of life.\footnote{126} In this way, a pneumatic anthropology provided a strong basis for thebereaved to no longer be stuck in the liminal space of their grief – what Alan Wolfelt called the wilderness of grief (2007) – but to reengage patiently, however intentionally with life once again. By being pneuma, humans had both responsibility and respondability in life. As such, bereaved people were not just made in the image of God, but were called by their Creator for ongoing work and devotion.

What was made clear in the review was that a Louwian perspective of theological anthropology provided a wealth of helpful knowledge and insights to aid in healing and care of the bereaved.\footnote{127} Louw explained the rationale for a critical need for theological anthropology: the logic was that “when one understands the basic characteristics or ‘design’ of something, one can develop appropriate coping skills” (Louw 2012:12).

CAREGIVING AND PROMISSIO THERAPY
In addition to a theological anthropology, coping skills for bereavement care were also informed by what Louw described as promissiotherapy. Promissiotherapy was a term defined simply as hope care (Capps 1995; Capps 2001). In a pastoral context,

\footnote{126} Interestingly, extending both a responsibility and a respondability to human anthropology (i.e. humans being both valuable and vocational), was consistent with Bishop N.T. Wright’s depiction of the future resurrection of bodily life – a new glorified physicality – in the age to come. Wright suggested: “According to the early Christians, the purpose of this new body will be to rule wisely over God’s new world. Forget those images about lounging around playing harps. There will be work to do and we shall relish doing it. All the skills and talents we have put to God’s service in this present life – and perhaps too the interests and likings we gave up because they conflicted with our vocation – will be enhanced and ennobled and given back to us to be exercised to his glory. This is perhaps the most mysterious, and least explored, aspect of the resurrection life” (161).

\footnote{127} A Louwian perspective of anthropology provided great solidarity and depth to current psychological constructs, such as Stroebe and Schut’s Dual Process theory that emphasized the necessity for restoration-oriented stressors for healthy coping. In addition, a Louwian perspective matched well with Bonanno’s Resilience theory in terms of what accounts for human ability to move forward, adapt to loss, and re-engage life (Bonanno 2004). From a Louwian perspective, the bereaved will (and must) adapt to loss because ultimately they are hard-wired for work in God’s creative world.
promissiotherapy was directed toward problems at a spiritual level, where caregiving was offered “in a koinonic relationship motivated by God’s faithfulness to His promises” (Agbiji 2013:169). However, Louw contended that effective pastoral care created hope, even within a postmodern context where people were no longer affiliated with a particular faith-perspective. From a Louwian perspective, hope was:

…the dimension of creativity, imagination, anticipation and expectation. The intention of pastoral care is the creation of a positive environment of peace and love in order to help people to anticipate the future in a positive manner. Pastoral care wishes to facilitate a hope which motivates the sufferer to move forward and to reorient anew (2007:155).

In the therapeutic traditions (Yalom 2002), seen in terms of treatment and attending, care often included “psychology, insight, catharsis, verbalization, empathy, and relationship building” (Louw 1998:440). While including traditional elements of care, promissiotherapy offered an important revision by recalling and reapplying the meaning of salvation to pastoral care. Louw remarked that in the New Testament, Jesus and the early Christian community’s healing ministry was “integral to the proclamation of the kingdom of God, a sign of the salvific purposes of God” (1998:440). This salvific effect had relevance for all people.

In terms of bereavement caregiving for people of faith, hope was embraced as they faced their grief as a challenge for a maturing faith. Louw explained that “the foundation of a mature hope in Christ is the faithfulness of God. Because of this unique theological dimension of hope, promissiotherapy links God with our past and present

\[128\] The study operationalizes the academic term promissiotherapy as the healing and empowering effect of God’s fulfilled promises in the present (Louw 2014:501). As a distinctive feature of pastoral care, promissiotherapy recognizes the art of being present to those within the realm of existential suffering and woundedness in an effort to provide new energy and imagination in order to affirm life. Hope care is not limited to an eschatological future event, but extends to a holistic perspective applicable to personal and social spheres of everyday life.

\[129\] Capps explained that “the major causes of depression are hopelessness and unresolved grief, both of which create the sense of a blocked future” (2001:101).
in order to adapt us to a new future” (2007:157). At the same time, promissiotherapy was not relegated to the faithful alone, as the salvific effects of God’s promises on earth serve the common good of all.

Though psychotherapy was strongly connected to psychology and the social sciences, promissiotherapy was the distinct product of a practical theology of pastoral care. In terms of spirituality, promissiotherapy was the “transformation of the person towards mature faith” (de Freitas 2012:255). Louw explained promissiotherapy as an academic term “which distinguishes the uniqueness of pastoral therapy as a theological phenomenon from therapy as a psychological or medical phenomenon” (1998:448). Promissiotherapy was described as a means to live out God’s promises within life’s desperate situations (Louw 2007:155). With regard to bereavement care, Louw (2012:220-221) offered clear goals for practical theology that were remarkably compatible with contemporary grief theory in a postmodern context, yet retained a distinctive theological perspective and spiritual character.131

1. To provide structures by means of rituals and symbols for the expression of emotions in the severance of the bonding experience.
2. To act as an interpreter between the pain of the griever and God’s compassion.
3. To facilitate the processes and phases of grief (i.e. the help the mourner to deal with both expressed and latent effect).
4. To provide support in the making of choices for the future, as well as in orientation to the reality of the loss.
5. To provide support by means of practical tasks of service and assistance.
6. To mediate hope by means of an organic use of Scripture, an appropriate text or narrative which apply to the needs of the griever and is within the context of the griever.

130 The new future hope was referred to in the Bible as the parousia: the Second Coming of God in Christ (1 Corinthians 15:23-27; Philippians 3:20-21; 1 John 2:28, 3:2).

131 To be sure, Louw suggested that promissiotherapy differed from psychological therapy because it has a different purpose (i.e. faith maturity), effect (i.e. reconciliation), and uses different media to generate change (e.g. Scripture, prayer, sacraments, etc.) (1998:448).
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7. To encourage communication with the deceased via a consciousness of the reality of resurrection. The same quality of life which the deceased believer already shares in Christ belongs to the still living on the grounds of their corporate fellowship with Christ.

Louw described promissiotherapy with regards to bereaved people of faith as such:

*It helps us to make a realistic assessment of our situation and helps us to focus our attention upon our quality of life: praise, joy and gratitude in the presence of God; it creates peace and patience, which help us to affirm our life, even in the face of suffering and death. Life becomes meaningful; and it builds a relationship of faith and communion in which one learns to trust God and anticipate life from the perspective of the resurrection* (1998:157).

What needed to be emphasized about promissiotherapy however was that salvation was not limited to an eschatological future event, but extended to a holistic understanding, applicable in the personal and social dimensions of everyday life within a postmodern context (Bloch 1986). Human well-being (i.e. shalom or peace) had to do “not only with the physical and psychical (including spiritual) health of the individual, but with the health of the social and political order, and vital balance of nature” (Louw 1998:440). In this way, salvation was not limited to the age to come, but was closely related to healing and humanization. Wright (2008:191-193) suggested that in living between the not yet (or future hope extending out from Jesus Christ) and the already (or present hope that is the basis for Christian mission), there was indeed hope for a better future world for all, including:

*…the poor, the sick, the lonely and depressed, for the slaves, the refugees, the hungry and homeless, for the abused, the paranoid, the downtrodden and despairing, and in fact for the whole wide, wonderful, and wounded world…What you do in the present – by painting, preaching, singing, sewing, praying, teaching, building hospitals, digging wells, campaigning for justice, writing poems, caring for the needy,*
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*loving your neighbor as yourself – will last into God’s future. These activities are not simply ways of making the present life a little less beastly, a little more bearable, until the day when we leave it behind altogether…they are part of what we may call building for God’s kingdom.*

Wright’s depiction was also related to the grief-stricken and those who mourn as well as to caregivers, such as pastors, funeral directors, after-care coordinators, chaplains, hospice workers, and bereavement psychologists. In short, promissiotherapy was tied to the interplay between the promises of God and the common good of all humankind.

Finally, promissiotherapy, as an important concept of practical theology, was supported by a Louwian understanding of the network of grief. In terms of the grief dynamics of mourning and bereavement, Louw described the pathway between detachment and attachment to the deceased as well as the pathway between remembering and replacement. The network of grief included five possible positions, often intertwined and interconnected among the bereaved.

1. The corner of solitude: One tendency in grief is to withdraw and to seek a corner of solitude where one can be on one’s own with one’s grief.

2. The open window of reorientation: To see the grief as an intrinsic part of one’s life and to say: I must face the reality of loss, opens up a new window of options.

3. The pantry of cherishing: To realize that the loss in an ingredient of one’s journey through life; to say: this is my grief and loss, is to start to cherish the loss. By cherish is meant to understand the value of what has been lost. The loss is now part of the pantry or your memory; you preserve it in the archive of your mind (the photo album of memory).

4. Backyard of sorrow: There is an aspect of mourning that indicates sorrow. Sorrow means that one starts to weep about the loss. But weeping is not merely about shedding tears. Sorrow and weeping mean that to a certain extent the loss becomes part of your journey through life; it becomes so to speak a “backyard” of your being.
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5. The safe haven of wait-and-see: When the loss is very severe, and the emotions deep and in turmoil, the wise option is to do nothing. It is important to have a safe haven where you can mourn without external pressures.

CAREGIVING AND BIPOLARITY
In addition to a theological anthropology and the concept of promissiotherapy, another component needed to be evaluated that was essential to a practical theology of caregiving for the bereaved – the principle of bipolarity. Despite the great advances in the knowledge of bereavement psychology, grief often remained a phenomenological mystery – a construct beyond full rationalistic investigation and understanding. To be sure, grief was recognized as the liminal space between the initial experience of acute loss (including anticipatory loss), and a return to life forever changed by the experience of loss (see Figure 21 below).

![Figure 21: The Liminal Space of Grief](image)

The liminal space where grief emerged in an existential experience of loss bore witness to the principle of bipolarity, an important concept for all helping professions (Hugo 2010; Heitink 1977). Bipolarity spoke to both ambivalence and paradox as axiomatic conditions of regular human suffering (Louw 1998:34-37). At the same time, bipolarity was not limited to the natural realm, but created a useful category in practical theology for understanding a healthy tension between God’s presence and human suffering and struggle (Louw 1998:37). To provide caregiving to the bereaved was not therefore a quest for resolution of paradox or an attempt to dissolve tension by an artificial means. Instead, bipolarity was a helpful concept to recognize that grief

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132 In referencing Heinz Kohut’s *The Restoration of the Self* (1977), Capps explained one view of the human self as bipolar, “with one pole being the exhibitionistic, ambitious or *grandiose* self that emerges in infancy, and the other being the values- or goal-oriented or *idealizing* self that emerges in later childhood” (2001:126).
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care does not aim at purely rationalistic solutions, but the ability to live with and sustain one’s self through paradox.¹³³ Louw described the principle of bipolarity (1998:31-32):

*The fact that pastoral care is connected to the content of the Gospel (the faith dimension) stresses the bipolar tensions between theology and empirical observation; pastoral care and psychology; revelation and experience; faith and religion; the care of souls and psychotherapy…On the one hand, this tension reflects the real difference between two realities: the reality of revelation with its dimension of faith, and the reality of phenomenology, with its dimension of experience. On the other hand, the tension reflects the connection between faith and context.*

A bipolar approach utilized mutuality and correlation – God and human beings (Louw 1999:5-6). The best example of the necessary paradox of bipolarity as an important principle for bereavement care was the theology of the cross (McGrath 1985; Moltmann 1974), where the cross was recognized as a mysterious “symbol of God’s presence and his identification with our suffering” (Louw 1998:37). Louw explained: “our emotional experience and our empirical perception make it seem as if God does not care and is absent in the cross. But, when viewed from a perspective of faith, there is the knowledge of God’s faithful presence and compassionate love” (1998:37).

To be clear, the theology of the cross was an important concept for developing an adequate practical theology of pastoral care (Louw 2000:73).¹³⁴ As people experienced the loss of a significant other, a good question was asked: “how is God

¹³³ The study’s stated preference toward a ministerial transversal rationality is in line with the postfoundational thought found in Louw’s pastoral approach. Louw’s view of bipolarity may be more in line with Van Huyssteen’s postfoundational perspective, marking a further advancement over Heitink’s bipolar tension between theory and practice. Heitink’s rationality should not therefore be strictly equated with Louw’s. Louw’s transversal position differs in part from Heitink’s concept of correlation and complementarity. While Heitink’s bipolarity suggests a complementarity between God and human kind, Louw’s postfoundational perspective, with a focus on eschatology and teleology, provides a view of bipolarity where God and human kind are not seen as complementary in order to maintain a tension and not neglect the significant difference between the two (Hugo 2010:43).

¹³⁴ Luther was not the first to propose a theology of the cross. In fact, as early as Ignatius of Antioch (d. 107 AD) and Tertullian (160-220 AD), theologians wrestled with the ideas of a suffering God, a crucified God, and a God who could experience death.
in this?” The question, “why did God allow this to happen?” or “why did God do this to me?” was difficult, if not impossible to answer given the bipolar tension of human suffering. In terms of death, easy answers to these type of very difficult questions, such as “Your Dad/Mom is in a better place” or “Be thankful you had your Dad/Mom these number of years”, were rarely beneficial to those who were suffering. Louw suggested that a *theologia crucis* bridged the distance between someone who was suffering and God Himself (Louw 2000:74). Luther’s construction of a *theologia crucis* recognized that at the cross of Christ, God was hidden. In the contemplation of the theology of the cross, a special link was made between the hopelessness of those who suffer the death of a dear loved one and the suffering of Christ. Though beyond rational categories of comprehension, the faithful bereaved “enters into a spiritual identification with Christ, and thus with God” (Louw 2000:78). To be sure, Louw explained (2000:78): “The intention of Luther’s theology of the cross is to reveal, on an epistemological level, the radical discontinuity between the empirically perceived situation and the situation as discerned by faith.”

In summation, a theology of the cross explained how both God’s divinity and God’s humanity were involved in suffering (Louw 2000:112). In this way, the bereaved found hope in a God who identifies Himself with human suffering; “God is alongside me, with me, and provides the fundamental framework in which I can discover meaning in suffering” (Louw 2000:113). Through the theology of the cross, pastoral caregiving did not explain away human suffering through grief, but nonetheless provided hope for God’s final triumph over all suffering and death. Louw concluded that “the theology of the cross is about the courage to enter darkness so that the light may be seen…[this] does not lead to a passive acceptance of the status quo, but to very active resistance” (2000:115). The theology of the cross therefore sustained the bereaved through the bipolar liminal space between grief and the continuation of life. To be sure, God did not provide the bereaved with logical solutions to human suffering and death, but “in

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135 A theology of the cross was not limited to epistemological dimensions, but also included ontological dimensions as well. Questions such as “does God suffer Himself?” and “Is a suffering Christ an essential characteristic of God?” were better addressed by Moltmann’s *eschatologia crucis*. For Moltmann, there cannot be a theology of hope without a theology of the cross (Moltmann 1974).
the midst of our questions, He inserts the ‘therefore’ of the cross and the exclamation mark of the resurrection. God does not provide a solution, but a redemption: his Son, Jesus Christ” (Louw 2000:171).

A CONVERGENCE MODEL: THE HERMENEUTICS OF CARE FOR MEANING-REFRAMING
Building upon Louw’s view of a theological anthropology, promissiotherapy, and bipolarity, the review examined perhaps Louw’s greatest contribution to the field of practical theology and pastoral care – a convergence model of caregiving referred to as the hermeneutics of care and encounter (Louw 1998). Louw’s convergence model blended both contemporary psychological and theological perspectives.

Louw recognized that people often live with the illusion that death can be controlled (2012:21). In characterizing the seriousness of grief and death, Louw stated, “death refers to the destruction of relationships, i.e. human beings’ exposure to loneliness, isolation, rejection and loss” (2012:22). Through decades and research and practice, Louw designed an integrative approach to caregiving that has direct relevance to the research problem regarding human suffering among the bereaved, even despite complications made apparent by increasing deritualization (1998:9). The review organized the Louwian model into three (3) parts to aid in the understanding and applicability towards the current study: the hermeneutical task, the caring and encountering tasks, and the challenge to meaning-reframing.

The Hermeneutical Task
Louw’s convergence model of care was first and foremost a hermeneutical task aimed at real problems people deal with in daily life. Louw suggested that there were two factors to understand human problems. First, human problems were embedded in cultural contexts, where attitudes, values, customs, and rituals played an important role; second, human problems correlated with a given network of relationships (Louw 1999:272). Hermeneutics was concerned with the interpretation of these cultural contexts and networks of relationships (Smith 2010). Capps explained that although hermeneutics was originally concerned with the interpretation of texts (including the biblical texts), in recent years, “the principles of hermeneutics have been applied to
phenomena other than texts, and there have been proposals for applying hermeneutics to the sphere of human action” (Capps 1984:12). Louw’s model was an exemplar of applying hermeneutics to the sphere of human problems needing pastoral care. In this way, a text was not the location for an interpretative task; instead, suffering people as living documents were the contexts and networks where problems emerged. Gerkin confirmed that those called to the helping professions, not just limited to professional clergy, could utilize the hermeneutics of living documents (i.e. people) as a “task of alleviating human psychic and spiritual suffering” (Gerkin 1984:12).

The hermeneutics of pastoral care referred to “the understanding of different narratives and life stories within the existential reality of pain, suffering, anxiety, guilt and despair, as well as our human need for meaning, hope, liberation, care and compassion” (Louw 1999:1). In contrast to the natural and social sciences that were based upon explanatory power, hermeneutics in practical theology was described generally as a “science of understanding” (Capps 1984:40). Louw explained:

*Pastoral care should be interpreted more and more in a hermeneutical paradigm than in a kerygmatic or homiletic paradigm. It becomes clear that the pastoral encounter is not merely about proclamation and admonition. Pastoral care is about communication, trying to establish a relationship of trust and empathy through listening skills* (1999:7).

Moreover, Louw stated: “our challenge in pastoral care is a hermeneutical one: the task to interpret and to understand; to enhance the courage to be, and to foster growth and hope” (2000:17). Pastoral care was traditionally thought of as healing, sustaining, guiding, reconciliation and nurturing. Yet, within “the framework of a hermeneutics of pastoral care, a sixth one must be added: interpretation and diagnosis/assessment” (Louw 1999:7). For the purpose of the current study, Louwian hermeneutics was utilized to assist in understanding and interpreting the changing dynamics and needs of specific “living documents” – individuals and families facing the loss of a loved one.

One significant contribution of Louw’s perspective of hermeneutics that was helpful for caregivers was the recognition of the interplay between spiritual healing and
appropriate God images. Louw stated: “Inappropriate God images can lead to pathology and ‘spiritual illness’” (2007:65). In pastoral hermeneutics, the caregiver “functions as an interpreter or hermeneutist of God images (i.e. people’s perceptions and noetic concepts of God)” (Louw 1998:56). In terms of people of faith dealing with suffering, Louw explained:

Inappropriate God-images are often the cause for believers’ and parishioners’ inability to apply their Christian faith to painful events. Inappropriate God-images often lead to a pathology of faith: wrong expectations regarding God’s role and function in suffering and a naïve interpretation of God’s will in suffering. Eventually, a pathology of faith becomes a stumbling block in our quest for meaning (2000:19).

At the same time, the appropriateness of hermeneutics was not limited to people of faith. In fact, the broad applicability of the hermeneutics was most compelling to the current research, reaching all the bereaved, including both people of faith and those not currently attached to a faith perspective. Hermeneutics functioned through practical dimensions of life care, including communication and interpretation of dialogue, realization and action, and liberation and transformation (Louw 1998:4).

The broad applicability of hermeneutics was that it reached to all people through the power of narrative (Capps 1998; Crossan 1988). Louw suggested that “with regard to a holistic approach the method of storytelling should be mentioned. The drama of life and death is embedded in a spiritual realm where stories, symbols and metaphors play a decisive role in the process of healing” (2007:117). Not entirely removed from the current emphasis of narrative therapy located within the field of psychology (Neimeyer 1999), a narrative approach in hermeneutics suggested that caregivers “interpret human beings and the world in which they live in such a way that these contexts are brought in touch with the Gospel;” in short, a narrative approach created a “fusion between the stories about God and the stories about human beings” (Louw 1998:15). Further, Louw indicated however that a narrative approach did not imply that the caregiver must act in a posture of authority to command or direct those in
need, but instead must act to clarify, interpret, guide in understanding. From that posture, caregivers were extended authority to “build pastoral guidance relationships with persons in all manner of modern situations” (Louw 1998:15).

The Caring and Encountering Tasks

In addition to the hermeneutical task, the review examined Louwian perspectives of the caring and encountering tasks (Louw, Ito, and Elsdörfer 2012). To begin with, pastoral caregiving was rooted in existential experiences. At the same time, though phenomenology played a role in how one understood his/her suffering and how one expressed these narratives to others, pastoral caregiving presupposed that the caregiver was competent and enabled with sufficient knowledge to act upon the pastoral interpretation (Clinebell 2011). To be clear, pastoral hermeneutics was not just about interpreting and understanding human problems from a faith perspective. Helping actions, such as healing, sustaining, guiding, reconciling, nurturing, and assessing, were converged with practical wisdom and a mature faith perspective, to provide adequate care. Listening, the first obligation of caring conversations (Noyce 1981), needed to be followed by comforting knowledge and actions across disciplinary boundaries. Louw explained the importance of maintaining a theological perspective with other disciplinary knowledge:

*We attempt to further promote an interdisciplinary dialogue by eclectic discussion and critical reflection. At the same time, we still maintain a theological perspective: the need to assess …life stories in the light of the Story – God’s involvement in history. We have advocated a systems*

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137 Practical theology as a field of pastoral encounter was decidedly interdisciplinary. Woodward and Pattison stated that practical theology “uses methods and insights of academic and other disciplines that are not overtly theological as part of its theological method. Theology…cannot reveal all that one needs to know adequately to respond to contemporary situations and issues. Thus economics, sociology, psychology, and other disciplinary findings and perspectives must be utilized” (2000:15).
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...hermeneutical model, which is closely related to data and theories coming from the human sciences (Louw 1998:121).

Similarly, just as the caring task of pastoral hermeneutics was rooted in a perspective of faith, the encountering task of caregiving was based upon faith as well – an eschatological perspective that converged God’s grace and His promises. In the encountering task of pastoral hermeneutics, caregivers facilitated relevant opportunities with those in need. The ultimate purpose of the encounter was described as “the fostering of a mature faith and spirituality” (Louw 1998:19).

Louw reminded pastoral caregivers that “our hope should be more than mere human expectation for a better life. Christian hope is based on more than mere optimism and the desire for better opportunities” (1998:62). Further, Louw stated: “humans are more than psychological energy. They are spiritual beings, whose resources do not depend solely on psychological energy and potential” (1998:62). As such, faith as a dimension in pastoral care was essential.

Another essential component to encounter was connectedness. Louw explained:

*Encounter does not describe a relationship between a personal God and an isolated individual. When seen in terms of the Gospel’s covenantal framework, ‘encounter’ implies a network of relationships, reciprocal interaction and associations* (1999:270)

For bereavement care, Louw’s words helped in understanding the often complicated dynamics of families as groups or networks of relationships needing care in order to cope with the existential demands of losing a loved one to death.

One particularly helpful development relative to the encountering task was the need for space. The significance of space was not a Louwian invention per say; space as a concept was traced to early Greek thought as an important component for being human. Louw suggested that “the ancient Greek term chora means space or place…as an intransitive it means ‘to give room.’ In an extended and metaphorical sense it can refer to the intellectual and spiritual capacity of being able ‘to understand’”
(Louw 2007:20). As such, space as a pastoral aid functioned as a container or location of meaning. To this end, Thesnaar elucidated on the Louwian perspective of space:

Where two or more people encounter one another within a spirit of availability, acceptance (unconditional love) and appreciative awareness, a space of intimacy occurs. This is the kind of space, which human beings need to be healed and to grow to maturity. Within this space human dignity is safeguarded and fostered. The occurrence of space (intimacy) can be called the sacred space of encounter and the soulfulness of embracement. Within the space of intimacy (belongingness), meaning is discovered” (Thesnaar 2010: 270; Louw 2004).

Thesnaar explained that “the key to form a pastoral space whereby people could find healing and regain meaning in life is compassion. Pastoral care and counselling need to embody a hermeneutics of compassion” (2010:270).

Within the context of bereavement caregiving, the concept of space within a hermeneutics of compassion elucidated important insights into the pastoral task of helping families develop meaningful opportunities where they can mourn and engage their suffering and be enabled to move toward healing, hope, and meaning. Cilliers (2006:11) offered a stirring account of how having space for the language of lament in grief opened the door for hope:

Through the language of lament we grieve and learn to relinquish all perceived forms of human restoration. This opens up the space for the language of hope to be born, a language that anticipates a new beginning beyond all human endeavors. It invokes God to step in, on the grounds of His covenantal faithfulness. It is a language that broadens our horizons, spells out alternatives, holds forth unthought-of-possibilities – as portrayed in the biblical text. The language of hope is dangerous and restless, as it challenges conventional answers and criticizes the status quo. It is revolutionary and radical, not impressed by
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cover-ups. It yearns for true and deep transformation, and is celebratory in its vision of the perceived transformation.

The Challenge to Meaning-Reframing

In summarizing the tasks of pastoral care and encounter, Louw connected caregiving with the discovery of meaning:

*Pastoral hermeneutics attempts to clarify the significance and existential implications of the encounter between God and humankind, thereby focusing its attention on the discovery of meaning and on fostering the growth of faith* (1999:242).

In terms of grief care, an existential crisis of death often required the bereaved to find new meaning in life – in short, to reframe their life without the physical presence of their loved one. In pastoral hermeneutics, the discovery of finding new meaning was informed by Donald Capps’ concept of reframing (1990). According to Cilliers, “the theory of reframing was originally developed within the context of a philosophically based theory of change, which was consequently adapted by psychologists and neurological-change theorists” (2012:6). At the same time, reframing was more of a gentle or unobtrusive art rather than a hard science – “although it is obviously not unscientific in nature” (Cilliers 2012:7).

In terms of pastoral care, reframing was a helpful concept. Capps explained: “the meaning any event has for us depends upon the frame in which we perceive it” (1990:10). Based on the landmark work of Paul Watzlawick, John Weakland, and Richard Fisch entitled *Change: Principles of problem formation and problem resolution* (1974), reframing was defined as follows: “to change the conceptual and/or emotional setting or viewpoint in relation to which a situation is experienced and to place it in another frame which fits the ‘facts’ of the same concrete situation equally well or even better, and thereby changes its entire meaning” (Capps 1990:17).

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138 Cilliers (2010) suggested that reframing was a key concept for the “liminality of liturgy.”

139 Donald Capps was the William Harte Felmeth Professor of Pastoral Psychology at Princeton Theological Seminary.
Watzlawick, Weakland, and Fisch distinguished between two types of change – first order change and second order change. First order change occurred within a given system “which itself remains unchanged; and second order change that alters the system itself” (Capps 1990:12). In first order change, new learning was not required as adjustments were made within an existing structure. Second order change required seeing things in a new way and often required new learning. A simple example of a first order change was to adjust the temperature on a thermostat – change occurred within an existing system. A simple example of a second order change was shifting from a state of dreaming to a conscious state of being awake. Where first order change was somewhat superficial, second order change altered an entire system (Dreyer 2005:126). Capps clarified: “in first order change, the more things change, the more they remain the same. In second order change, everything is different because the system itself is no longer the same” (1990:12).

To provide helpful bereavement care, meaning-reframing included pastoral negotiation. Through the existential experience of death, the bereaved experienced a second order change. One was not able to have closure – as some popular vernacular suggested. Nor was a bereaved person able to recover – as if grief was a pathological condition. Instead, caregivers negotiated care by recognizing that the frame of life set before a bereaved person (which included the deceased loved one as part of a relational network) was changed. In short, because the bereaved were forever changed, their frame of life must be reframed into a new whole. Reframing did not mean forgetting the deceased, as was prescribed in older psychodynamic ideas of cutting ties. Reframing entailed setting forth a new reality, which was often manifested in paradox and tension rather than clear logic and reason (Dreyer 2005:127).

Reframing as a technique for caregivers corrected some of the earlier problems outlined in the kerygmatic and client-centered approaches. Proclamation alone was not a sufficient model of bereavement caregiving because it largely ignored the complex and individual modes of an existential experience with death. Moreover, kerygmatic proclamation, while offering an anchoring reference point, often lacked an understanding of how bereavement may ravage the network of relationships within a
family. The kerygmatic approach was often unable to attend to all the many existential needs of a given family. Similarly, a client-centered approach to caregiving was also found wanting and inadequate in pastoral contexts of grief. While a non-directive approach made much improvement with its subjective posture of individuality, an overemphasis may leave too many bereaved families with the responsibility to engage their initiatives without adequate guidance and practical wisdom. Capps concluded: “While I am deeply grateful for the client-centered approach, I am also convinced that pastors should seize more initiative in their care and counselling work. The reframing method supports such initiative taking” (1990:24).

A Louwian model of practical theology culminated in the hopeful art of meaning-reframing – helping those in need form a revised but valid way to understand their world and find meaning despite the existential problems of life. Louw asked: “Does the search for meaning imply an understanding of suffering which opens our very existence to the transience of being human? Does meaning reveal our human predicament, as well as God’s vulnerability” (2000:6)? Meaning played an obvious key role in pastoral care. A Louwian perspective was not aimed at easy answers and tidy solutions to human problems; nor was a Louwian model aimed at carefree non-directed postures that do not provide adequate support (i.e. a Rogerian view). Instead, the review suggested that a Louwian model was shaped by a theological anthropology, promissiotherapy, bipolarity, and hermeneutics (see Figure 22 below).

Figure 22: A Louwian Model of Practical Theology
Within a Louwian model of practical theology, the goal was for caregivers to facilitate relevant opportunities for bereaved families to engage their bereavement needs and to enable them to move toward healing, hope, and ultimate meaning.

What was further helpful in terms of bereavement caregiving from the viewpoint of practical theology was to demonstrate concrete examples of how a Louwian model affected change among an interplay between caregivers and the bereaved. In terms of a theological anthropology, funeral professions and pastors provided better care when they understood the concept of the soul – namely that care was more than physical, psychological, and social aspects, but also included one’s spiritual essence. Also, many funerals had historically placed the funeral sermon as the key element of bereavement caregiving; however, by understanding a theological anthropology, funeral directors recognized that care was bigger than kerygmatic proclamation in a funeral sermon alone. Moreover, though funeral directors in recent years had moved away from template oriented funerals, where every funeral looked basically the same, funeral directors improved their care when they recognized that using a client-centered non-directive approach during arrangement conferences were not always the best way to provide care for families. In short, families often needed professional guidance to aid in grief adaptation. Another helpful concept in a Louwian anthropology was the emphasis on pneuma, as funeral directors and pastors recognized the inherent need for movement among bereaved families to avoid being stuck in their grief. Being able to return to life and work was more than a product of psychological restoration-oriented processes and human resilience; God breathed responsibility and respondability into the very fabric of human existence.

In terms of the Louwian concept of promissiotherapy, funeral directors and vocational pastors were implored to be agents of hope (Capps 2001). As such, offering hope to families was not limited to a hopeful eternal future, as important as that is, but included helping families embrace a present hope for the continuation of life and a better world. Also, funeral directors and pastors were encouraged to look at the power and effectiveness of creative sustaining rituals for the expression of emotions that tied
together both the severance and continuation of bonds as a means to foster peace, affirm life, trust God, and anticipate eternal life.

Louw’s categorical emphasis on bi-polarity was another component that benefited funeral professionals and pastors. Bi-Polarity recognized both mystery and tension as helpful concepts in bereavement caregiving. In terms of mystery, funeral directors and pastors were beseeched to recognize that grief remained a phenomenological mystery, despite the wealth of comforting information available through grief psychology. As such, the important work of caregivers was not about giving closure to families or resolving inexplicable mysteries, but helping families get a good start on adapting to their lives without the physical presence of their loved ones. Moreover, funeral directors and pastors were better caregivers when they embraced the inevitable tension that was birthed out of acute grief – the transcendent tension between human suffering and God’s presence. To be sure, grief was not understood as something the bereaved recovers from, as if grief were relegated to a disease or sickness rather than normal human responses to death. In grief, the bereaved received healing and comfort when they were resolved that life was forever changed.

Louw’s category of hermeneutics was also very helpful for funeral professionals and pastors. For example, Louw’s concept of interpretation helped funeral directors and pastors seek understanding of the context and network of relationships that shaped the narratives of the bereaved. Caregiving occurred at much deeper levels when the bereaved were more fully understood. Also, the concept of space was excellent tool for caregivers. In this way, funeral directors and pastors were reminded that care was not attached to formalized activity alone. Instead, funeral directors and pastors were encouraged to look for opportunities where bereaved families could have adequate space to engage their loss and grow toward wholeness and maturity. Funeral and pastoral professionals in the past placed much emphasis on the formalized rituals, such as receiving friends in a public gathering, funeral ceremonies, and graveside committal services. While all of these services do provide great care for hurting families, the concept of space helped funeral directors and pastors to see beyond traditional lines of care and look for more dynamic opportunities to extend to families.
to process their grief more organically. Examples of cathartic space included giving families private time with their deceased without the public support, such as privately attending to the deceased’s body, like putting on makeup, fixing hair, holding their hands, or simply touching the deceased’s body for an undetermined period of time. Also, an option for cathartic space in terms of direct cremation was giving families opportunities to follow their deceased loved one to the crematory and to witness the cremation event.\textsuperscript{140} Further, the concept of meaning taught directors and pastors the need for pastoral negotiation between the bereaved and caregiver to set forth life in a new frame that fostered hope and meaning. Table 13 provided a helpful summary.

\textit{Table 13: Examples of a Louwian Model for Bereavement Care}

<table>
<thead>
<tr>
<th>Louwian Category</th>
<th>Concept</th>
<th>Caregiving Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Theological Anthropology</td>
<td>Soul</td>
<td>Care was more than physical, psychological, and social aspects, but also included one’s spiritual essence.</td>
</tr>
<tr>
<td>A Theological Anthropology</td>
<td>Care</td>
<td>Care was bigger than kerygmatic proclamation in funeral sermons and better than client-centered non-directive arrangement conferencing.</td>
</tr>
<tr>
<td>A Theological Anthropology</td>
<td>Pneuma</td>
<td>Care required spirit-led movement among the bereaved to avoid being stuck in grief.</td>
</tr>
<tr>
<td>Promissiotherapy</td>
<td>Hope</td>
<td>Care was not limited to a hopeful eternal future, but included present hope for the continuation of life and a better world.</td>
</tr>
<tr>
<td>Promissiotherapy</td>
<td>Ritual</td>
<td>Care was directed at creative rituals to express severance and continuation of bonds as means to foster peace, affirm life, trust God, and anticipate eternal life.</td>
</tr>
<tr>
<td>Bi-Polarity</td>
<td>Mystery</td>
<td>Care was not about giving closure, but helping the bereaved live through the phenomenological mystery of death.</td>
</tr>
<tr>
<td>Bi-Polarity</td>
<td>Tension</td>
<td>Care involved a tension between human suffering and God’s presence, where the bereaved did not seek recovery from a sickness, but a resolution that life was forever changed.</td>
</tr>
<tr>
<td>Hermeneutics of Care &amp; Encounter</td>
<td>Interpretation</td>
<td>Care sought understanding of the context and network of relationships that shaped the narratives of the bereaved.</td>
</tr>
<tr>
<td>Hermeneutics of Care &amp; Encounter</td>
<td>Space</td>
<td>Care was not attached to formalized activities alone, but looked for opportunities where bereaved families can have space to engage loss and grow toward maturity.</td>
</tr>
<tr>
<td>Hermeneutics of Care &amp; Encounter</td>
<td>Meaning</td>
<td>Care required a dynamic pastoral negotiation between the bereaved and caregiver to set forth life in a new frame that fostered hope and meaning.</td>
</tr>
</tbody>
</table>

\textsuperscript{140} In this way, the liminal space of grief is met with the cathartic space of engagement.
2.6 Faith-Informed Integrated Insights from Funeral Service, Psychology, and Practical Theology

The second significant research question the current study sought to address was:

2: What insights emerge from integrating current developments in funeral service, bereavement psychology, and practical theology, that shape an interdisciplinary conceptualization of bereavement caregiving?

By triangulating insights from all three disciplines in the literature review, namely that of funeral service, bereavement psychology, and practical theology, a faith-informed interdisciplinary perspective of pastoral care to the bereaved emerged. Pastoral care represented more than offering healing, sustaining, and guiding assistance to individuals in need, “…rather, it attends to the web of relationships and systems creating suffering through ministries of compassionate resistance, empowerment, nurturance, and liberation” (Osmer 2008:16). As described in Chapter 1, the study engaged in two primary methods of qualitative research – hermeneutics and ethnography. Chapter 2 of the study was therefore designed to attend to the method of hermeneutics. The objective of the literature review was to develop a thicker description and understanding of bereavement caregiving within a context of deritualization and from the perspective of pastoral care. To this end, the study circled through understandings of each of the three fields of inquiry. To point was not to merely learn what each discipline offered to the discussion in terms of a multi-disciplinary perspective. Instead, the study sought integration of knowledge in hopes to further advance the learning.

A significant observation of the review was that all three disciplines chosen for the study culminated in the contemporary world with an emphasis on meaning. In short, caregiving in the funeral profession culminated in meaningful services to families; caregiving in bereavement psychology culminated in meaningful reconstruction. In the same way, practical theology culminated in a deep interest in “our human quest for meaning” (Louw 1998:127). These independent findings suggested a surprising point of significant integration of knowledge. To be clear with regard to funeral service: one insight was that despite the challenges of an industry that struggles with identity,
relevance, and professionalization, bereaved families were well-served through the execution of meaningful end-of-life ceremonies and events. With deference to bereavement psychology: another significant insight was that after decades of empirical testing and assessments of older grief theories, the field circled around a general consensus regarding the importance of meaning-reconstruction for the bereaved. Finally, with deference to practical theology: a third significant insight was that utilizing a Louwian perspective of pastoral care, the need for meaning-reframing was made paramount among the bereaved. As such, funeral service, bereavement psychology, and practical theology, though each with a different operating epistemology, converged upon the importance of meaning (i.e. caregiving, reconstruction, and reframing) as essential modes of bereavement care.

Figure 23 below graphically summarized the findings applicable to the fourth research question by depicting the insights that emerged from current developments in funeral service, bereavement psychology, and practical theology. In addition, Figure 23 illustrated how these disciplinary insights were integrated to advance learning within an interdisciplinary conceptualization of bereavement caregiving. In short, the concept of meaning, described from three significant disciplinary perspectives, emerged as the profound integration point to address the problematic field of caring for the bereaved.

*Figure 23: A Practical Theology for Bereavement Caregiving*
Chapter 2: Review of Related Literature

2.7 Summary

Thomas Long and Thomas Lynch’s *The good funeral: Death, grief, and the community of care* (2013) stated: “If our practices around death are to become more grounded, more humane, and, indeed, more faithful, it will require wise leadership from those who most closely care for families at the time of loss.” To garner wise leadership applicable to the research problem, the literature review provided a hermeneutical task that interpreted and critically prioritized knowledge in the fields of funeral service, bereavement psychology, and practical theology in order to support the research inquiry of caregiving for the bereaved. In addition, the review of literature aimed at uniting biblical/theological insights with disciplinary insights in order to develop a Christian worldview understanding of a practical theology of bereavement care. To accomplish these goals, the review utilized the LIM model of practical theology for an interplay between the examination of how the world is according to fields of funeral service and bereavement psychology and how the world should be according to the field of practical theology and pastoral care. As a result, the literature review developed a Christian interdisciplinary understanding of the research problem of deritualization and bereavement care. Insights from the integrated data helped shed light on the connection between theology, anthropology, and comfort in pastoral caregiving for acute processes of grief and post-mortem ritualization. These insights were critical in order to assimilate knowledge from the three disciplinary domains and to provide substance for formulating conclusions and implications from the study toward a practical theology of caregiving for the bereaved.

Using the research method of hermeneutics, Chapter 2 specifically addressed the first two research questions essential to the study. What was crucial was that the literature review provided an informed interdisciplinary understanding of bereavement caregiving necessary to facilitate a design and methodology for the empirical component of the research (see Chapter 3: Research Design and Methodology for Educational Perspectives).
Chapter 3
Research Design and Methodology for Educational Perspectives

3.1 Introduction to Research Design

The current study was designed for the development of a practical theology of caregiving for the bereaved in order to address the interplay between loss, bereavement, and the spiritual realm of coping. The deritualization of death was identified as a key problem of the research as bereaved people in the twenty-first century began revising, replacing, minimizing, or even eliminating rituals that were historically designed to provide nurturing care in the adaptation of loss. Taylor opined (2011b:6):

\textit{It is not an overstatement to say that in 21st century North America, it can no longer be taken for granted that when a death occurs there will be a funeral. All of the historical assumptions about what constitutes proper death care in North America are now in a state of flux.}

Long and Lynch further explained (2013:199):

\textit{An increasing number of people in our society…are choosing the ‘no service’ option, deciding not to have any ceremony whatsoever for the dead. They have concluded that funerals and memorial services are at best unnecessary and at worst even harmful, in the sense that they are built on illusions and wishful thinking.}
The current cultural shift toward deritualizing death was identified clearly as a multifaceted concern that may inhibit grief adaptation among bereaved families and individuals. The research was designed therefore to elucidate a deeper understanding of the complexities of the problem of deritualization in order to better address the needs of those who have experienced death without funeral services and ceremony. To be sure, deritualization impacted the spiritual realm of loss and bereavement and was notably a large problem for the funeral service profession, the mental health profession, and pastoral care.

By approaching the research problem from multiple interdisciplinary angles, the current study focused on perspectives of bereavement caregiving as the first domain of inquiry. In specific terms, Chapter 2 addressed the first area of inquiry by critically discussing the first two research questions (1-2). Given the interdisciplinary shape of the study, three professional disciplines were explored to foster deeper understanding of the research problem, including funeral service as an applied business discipline, bereavement psychology as a social science discipline, and practical theology as a religious and theological discipline. The interdisciplinary integration of the three applicable disciplines chosen for the study provided useful contexts for understanding the landscape of contemporary bereavement caregiving.

The study proposed two qualitative research methods to be utilized – hermeneutics and ethnography. In the review of related literature in Chapter 2, a hermeneutical method was used to synthesize key insights from each discipline. A significant discovery of this methodology was that all three disciplines intersected with a distinct emphasis on meaning. To be sure, caregiving in the funeral profession culminated with an emphasis in meaningful services to families, caregiving in bereavement psychology culminated with an emphasis in meaning-reconstruction, and caregiving in practical theology culminated with an emphasis in meaning-reframing.

In addition to utilizing hermeneutics, the study also identified ethnography to advance the research. By organizing the current study from a Christian perspective of practical theology, particularly a Louwian approach, a further research design with an empirical
component was warranted to examine in detail the dynamics of contemporary bereavement caregivers. The research problem of the current study also focused on a second domain of inquiry – the dynamics of bereavement caregiving education. A decision was made for the study to thereby utilize ethnography to organize the research design around two of the primary contexts for training bereavement caregivers, namely the education and preparation of funeral directors and vocational pastors.

In Chapter 3, as well as Chapter 4, the remaining four (4) research questions were designed to engage the dynamics of bereavement caregiving education applicable to funeral directors and vocational pastors. These remaining four research questions (3-6) were restated below to address the “how” of pastoral bereavement care.

**Dynamics of Bereavement Caregiving**

3: How do caregiving education models frame the goals and objectives of grief and bereavement care?

4: How do caregiving education models understand the context of needs facing today’s bereaved families?

5: How do caregiving education models integrate current bereavement research to shape directives of care?

6: How do caregiving education models implement rituals that meaningfully address the changing social/cultural dynamics of the bereaved?

**3.2 Research Design**

In addition to the use of hermeneutics in Chapter 2, the study was advanced by applied research using a qualitative design approach consistent with an ethnographic
methodology. In choosing ethnography for Christian interdisciplinary research, Scharen and Vigen explained (2011:28):

> God is known most fully in Jesus of Nazareth. Echoing this ‘scandal of particularity’ at the heart of Christian tradition, theologians and ethicists involved in ethnographic research draw on the particular to seek out answers to core questions of their discipline.

Qualitative research was defined as a research community “of globally dispersed persons who are attempting to implement a critical interpretative approach that will help them (and others) make sense of the terrifying conditions that define daily life” (Denzin and Lincoln 2011:xiii). Unlike basic research that maintained a goal of new knowledge, applied research was geared toward improving the quality of practitioners within specific disciplinary domains. In terms of the current research, the practitioners were limited to those professionals who were involved in the nurturing care of bereaved families and individuals. The overarching goal of the research was to improve care of the bereaved.

The applied design focused upon qualitative, rather than quantitative research. Unlike concise quantitative research that was based in objective “hard” natural science and systematic testing of hypotheses and deductive reasoning as a means to test theory, complex qualitative research was based in subjective “soft” social science, systematic discovery and inductive reasoning as a means to develop theory. At the same time, while quantitative research was geared at statistical analysis and generalization to a given population, the current study emphasized individual interpretation and uniqueness of discovery as a means to gain depth and exploration of complexity (see Table 14).

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141 Three paradigm wars in the 1980s that crippled qualitative research were identified: the post-positivist-constructivist war against positivism (1970-1990), the conflict between competing postpositivist, constructivist, and critical theory paradigms (1990-2005), and the current conflict between evidence-based methods and mixed methods (2005-present).
Table 14: Contrasting Qualitative and Quantitative Research

<table>
<thead>
<tr>
<th>Qualitative Research</th>
<th>Quantitative Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>Based in subjective &quot;soft&quot; social science</td>
<td>Based in objective &quot;hard&quot; natural science</td>
</tr>
<tr>
<td>Systematic discovery of research subject</td>
<td>Systematic testing of research hypotheses</td>
</tr>
<tr>
<td>Inductive reasoning</td>
<td>Deductive reasoning</td>
</tr>
<tr>
<td>Development of theory</td>
<td>Testing of theory</td>
</tr>
<tr>
<td>Individual interpretation and</td>
<td>Statistical analysis and</td>
</tr>
<tr>
<td>Exploration of complexity</td>
<td>Generalization of population</td>
</tr>
</tbody>
</table>

The current applied research utilized ethnography as a further qualitative methodology of choice for the study. Ethnography was a common approach in the humanities and social sciences where the purpose of inquiry was understanding (verstehen) rather than proof or prediction (Denzin and Lincoln 2011:44). In terms of etymology, ethnography combined two Greek words together – the verb graphein, which means to write, and the noun ethnoi, which means the others. In this way, ethnography emerged in the last quarter of the 19th century as a term anthropologists used for writing comprehensive and descriptive accounts of lifeways of specific people or groups living in particular contexts that improved the depth and quality of information from that of basic travelers’ accounts (Denzin and Lincoln 2011:44). In general terms, the central aim of ethnographic research was “to provide rich, holistic insights into people’s views and actions, as well as the nature (that is, sights, sounds) of the location they inhabit, through the collection of detailed observations and interviews” (Reeves, Kuper, and Hodges 2008:512).

Key features of ethnographic research included the investigation of primarily unstructured data and “a small number of cases (perhaps even just one case)” (Reeves, Kuper, and Hodges 2008:512). In the current study, ethnographic research methodology was important for the researcher to get inside the particular perspectives of two (2) key groups. In short, the current study was methodologically based upon the ethnography of bereavement caregivers – specifically the training schools of pastors and funeral directors in the respective locations of a Christian university and

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142 Denzin and Lincoln explained that the “first monograph of the kind that would become modern realist ethnography was The Philadelphia Negro, by W.E. B. DuBois (1899)” (2011:45). Others traced the term ethnography to the fieldwork of scholars in the early 1900s, such as Bronislaw Malinowski and Alfred Radcliffe-Brown (Reeves, Kuper, and Hodges 2008:512).
Chapter 3: Research Design and Methodology

a mortuary college. The study focused on bereavement caregiving at a larger public level among pastors and funeral directors in lieu of more narrow and specialized segments of clinical work and grief therapy.

Though contradicting a dated traditional view that research must be conducted by an outside objective observer, ethnographic research included the newer development of auto-ethnography, where the researchers’ own perspectives form an important element to a study (Denzin and Lincoln 2011:49; Reeves, Kuper, and Hodges 2008:512). The current study therefore included the perspectives of the researcher, who was a second-generation licensed funeral director with over fifteen (15) years of experience in vocational bereavement caregiving. In this way, the researcher served in a reflexive role by sharing in the world of bereavement caregiving. By being immersed in a context of bereavement care, the researcher aimed at gathering insights from the educational and training programs of a Christian university for pastors and a mortuary college for funeral directors that were “normally hidden from the public gaze” (Reeves, Kuper, and Hodges 2008:514). The aim of the ethnographic methodology was to provide a thicker description of the culture that prepares bereavement caregivers in hope of a deeper understanding to improve grief care.

3.3 Participants

Because ethnographic research was aimed at deep description rather than large sample sizes, the current research identified two (2) primary participants for the study. The study proposed that data would be collected from both a leading mortuary college and a reputable Christian university located in the United States of America. To strengthen the motivation for delimiting the study to a single case participant for each educational domain (i.e. one Christian university and one mortuary college), the study needed to elaborate clearly on what was meant by a qualitative approach aimed at “thicker” and “deeper” research. To this end, the study noted that in qualitative research, the number of cases were not as important as whether the case chosen

143The researcher’s father, Don Gibson (b.1939), was a long-time licensed funeral director and embalmer with fifty-nine (59) years of experience (from 1957-2016). The researcher was therefore connected to a context of nurturing bereavement care since his birth in 1970.
could actually shed additional light on the issues at stake in the research. In general terms, case studies have been widely used to “offer insights that might not be achieved with other approaches” (Rowley 2002:16). Yin explained that “all case study research starts from the same compelling feature: the desire to derive a(n) (up) close or otherwise in-depth understanding of a single or small number of ‘cases,’ set in their real-world contexts” (2012:4). In this way, single case designs were one experimental approach recognized as being particularly flexible and efficient to make vital and detailed inferences in the research (Barlow, Nock, Hersen 2008).

Though single case studies have demonstrated the ability to achieve key advances in qualitative research, they were often underutilized (Nock, Michel, Photos 2008). In fact, Murale and Preetha argued that because single case study designs offer much to the research process in learning how to process theory relative to real-world phenomenon as well as to augment existing bodies of knowledge, “single case study design researchers should be given much more prominence” (2014:813).

In deference to being a scientifically valid approach to qualitative research, the researcher chose a single case design format for the current study given the normalization of the participants. For example, in funeral service, though there were a myriad of degree programs offered by mortuary colleges across the United States, each with a different approach to curricular requirements, all accredited mortuary colleges teach toward a common goal – the passing of the same national board exam administered by the International Conference of Funeral Service Examining Boards (Gibson 2005). This normalization standard was so significant in fact that the American Board of Funeral Service Education (ABFSE) maintained a directory of accredited programs disclosing each mortuary college’s pass/fail rate on the national board exam.

With respect to pastoral education, one case study was deemed appropriate given the normalization of praxis offered by vocational pastors within traditional funerary ritualization. Despite very significant differences in funeral liturgies offered by pastors to grieving families, there was nonetheless a strong commonality of processes within
normative funeral ritualization (Long 2013; Jackson 1966). To be clear, regardless of denominational affiliation across Catholic, Protestant, Orthodox, even Jewish clergy, traditional funeral rituals were marked by a normative presence of pastoral care (Long 2013; Horton 2000; Ramshaw 1987). Table 15 below suggested many of the broad normative functions commonly offered by vocational pastors in bereavement care.

**Table 15: Normative Pastoral Processes in Traditional Funeral Ritualization**

<table>
<thead>
<tr>
<th>Sequence</th>
<th>Ritual Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Clergy receives a call from a family who recently experienced a loss of a loved one</td>
</tr>
<tr>
<td>2</td>
<td>Clergy meets with the bereaved family (and funeral director) to coordinate events</td>
</tr>
<tr>
<td>3</td>
<td>Clergy often does not attend a private farewell viewing for immediate family</td>
</tr>
<tr>
<td>4</td>
<td>Clergy is present (however briefly) at wake/visitation hours (i.e. the receiving of friends)</td>
</tr>
<tr>
<td>5</td>
<td>Clergy presides over the funeral ceremony and delivers a funeral message/sermon</td>
</tr>
<tr>
<td>6</td>
<td>Clergy provides the final words at the graveside committal service at the cemetery</td>
</tr>
<tr>
<td>7</td>
<td>Clergy often has little personal involvement in after-care grief counseling with family</td>
</tr>
</tbody>
</table>

The accepted use of single case designs within qualitative research combined with the normalization of both funeral service examination and pastoral care processes apparent in the research provided sufficient impetus to warrant the chosen participants for the study (Jupp 2008; Kelly 2008).

The research design noted that both schools chosen for the study were accredited and had a strong reputation for training caregivers (i.e. future funeral directors and vocational pastors) to assist the bereaved. Both schools were regionally and nationally accredited as recognized by the U.S. Department of Education (USDE) and the Council on Higher Education Accreditation (CHEA). The American Board of Funeral Service Education (ABFSE) was identified as the sole national academic accreditation agency for college and university programs in funeral service and mortuary science education. The study intended for the Christian university to be regionally accredited by an agency, such as the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), as well as institutionally accredited by a reputable Christian academic agency, such as the Association of Theological Schools (ATS).
Chapter 3: Research Design and Methodology

The two schools selected for the research met the study’s requirements for academic accreditation. With regards to a mortuary college, the Cincinnati College of Mortuary Science (CCMS), located at 645 W. North Bend Road, Cincinnati, Ohio 45224 was chosen (http://www.ccms.edu). CCMS was selected for its long reputation for being a rigorous training program for funeral professionals and for its relative proximity to the researcher (i.e. less than 300 miles; approximately a 4 hour and 15-minute drive). With regards to a Christian university, Johnson University (JU), located at 7900 Johnson Drive in Knoxville, Tennessee 37998 was chosen (http://www.johnsonu.edu). JU was selected for its academic reputation since 1893 as a leading institution for Christian higher education and the training of pastors. JU was also chosen for the relative proximity to the researcher (i.e. less than 30 miles; approximately a 30-minute drive). The study proposed that representatives of both CCMS and JU would be contacted to participate in the study.

3.4 Interview Questionnaire (see Appendix B)

The design for the current study proposed semi-structured interviews as an ideal tool for ethnographic research. As such, an interview questionnaire was developed for the participants to complete within a ninety-minute time frame through a face-to-face discussion with the researcher. The questionnaire was organized into four (4) main sections, including the background and demographics of the school, the educational program, the conceptualization of the research, and the key research inquiries. Each of these sections were explained below.

Section One: Background and Demographics of the School

The interview questionnaire confirmed the background and demographics of the participating schools in section one. The research interviewer proposed questions to the participants in order to address the following categories:

- Interviewee Name;
- Interviewee Position;
- Age of School;
- Accreditation;
- The Mission Statement of the School;
Chapter 3: Research Design and Methodology

- Program(s) Offered;
- Size of Student Body;
- Average Age of Student;
- Gender Percentages of Student Body;
- Pass/Fail Rate of National/Comprehensive Exams.

Section Two: The Educational Program
The interview questionnaire also discussed general questions related to the participant’s educational program. The research interviewer proposed the following questions:

- How is the current program(s) of study structured?
- Has this structure changed in the past ten (10) years?
- What courses have been added or deleted in recent years?

Section Three: The Conceptualization of the Research and Survey
The interview questionnaire provided the participants with an explanation of the conceptualization of the research and survey. The conceptualization of the study was largely influenced by a Louwian perspective of practical theology and pastoral care developed in the literature review. Based upon the four (4) research questions addressing the dynamics of educational perspectives (research questions 3-6 in the study), the conceptualization of the survey was proposed in four parts, including the philosophy of education, the hermeneutics of bereaved families, the care of bereaved families, and the encounter of bereaved families. Each part corresponded to a particular research question.

With respect to the participating school’s philosophy of education and corresponding to the third research question, the research project presupposed a pastoral orientation and need for caregiving education. A short explanation was given so that the interviewee would be clear as to what is meant by “pastoral” in terms of the research. The key questioned proposed for this area was: What is the point of a caregiving/pastoral education and what are we trying to achieve?

With respect to the hermeneutics of bereaved families and corresponding to the fourth research question, the current study sought to develop an improved interpretation and
understanding of the changing dynamics and needs of the target group – families (and close friends) facing the loss of a dear loved one. The key question proposed for this area was: Do we understand the context of needs facing today’s bereaved families?  

With respect to the care of bereaved families and corresponding to the fifth research question, the study inquired how the current body of knowledge in funeral service and pastoral care addressed today’s bereavement needs in order to offer appropriate services of care very specifically within the realm of spiritual healing, given the existential realities of life. The key question proposed for this area was: How does current research inform and give shape to our directives of care?

With respect to the encounter of bereaved families and corresponding to the sixth and final research question, the study inquired how to facilitate relevant opportunities for bereaved families and friends to engage their bereavement needs and to enable them to move toward healing, hope, and meaning. The key question guiding this area was: What rituals meaningfully address the changing social/cultural dynamics of the bereaved? Table 16 below summarized the interview questionnaire.

**Table 16: The Conceptualization of the Research and Survey**

<table>
<thead>
<tr>
<th>The Philosophy of Education</th>
<th>The Hermeneutics of Bereaved Families</th>
<th>The Care of Bereaved Families</th>
<th>The Encounter of Bereaved Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>The research project presupposes a pastoral orientation and need for caregiving education. [A short explanation will be given so that the interviewee will be clear as to what is meant by “pastoral” in terms of the research]</td>
<td>We must understand and interpret the changing dynamics and needs of our target group – families facing the loss of a loved one.</td>
<td>We must know how the current body of knowledge in funeral service and pastoral care addresses today’s bereavement needs so that we can offer appropriate services of care very specifically within the realm of spiritual healing.</td>
<td>We must know how to facilitate relevant opportunities for bereaved families to engage their bereavement needs and to enable them to move toward healing, hope, and meaning.</td>
</tr>
</tbody>
</table>

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144 The Louwian principles derived from a review of related literature represented a practical theology of meaning-reframing and included such key concepts as a theological anthropology, promissiotherapy, bipolarity, and the hermeneutics of care and encounter. These key insights provided guidance into creating an interview questionnaire that supported a practical theology of caregiving for the bereaved. The questionnaire was organized in terms of the philosophy of education, the hermeneutics of bereaved families, the care of bereaved families, and the encounter of bereaved families.
Chapter 3: Research Design and Methodology

<table>
<thead>
<tr>
<th>The Philosophy of Education</th>
<th>The Hermeneutics of Bereaved Families</th>
<th>The Care of Bereaved Families</th>
<th>The Encounter of Bereaved Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the point of a caregiving/pastoral education and what are we trying to achieve?</td>
<td>Do we understand the context of needs facing today’s bereaved families?</td>
<td>How does current research inform and give shape to our directives of care?</td>
<td>What rituals meaningfully address the changing social/cultural dynamics of the bereaved?</td>
</tr>
<tr>
<td>Corresponds to Research Question 3</td>
<td>Corresponds to Research Question 4</td>
<td>Corresponds to Research Question 5</td>
<td>Corresponds to Research Question 6</td>
</tr>
</tbody>
</table>

Section Four: Probe Key Research Inquiries (In Four Parts)
The interview questionnaire probed the key research inquiries among the participants. The research inquiries were designed to move into deeper levels of understanding. Main questions were asked across the four (4) main parts of the study, followed by additional follow up questions. Moreover, the interviewer included clarifying questions as well when needed, such as “can you expand on this?”, “can you give me some examples?”, and “is there anything else I should know?” Section four of the study was further organized into four (4) parts.

PART I(A) THE PHILOSOPHY OF EDUCATION FOR FUNERAL SERVICE
Part I specifically addressed the third research question:

3: How do caregiving education models frame the goals and objectives of grief and bereavement care?

Part I was designed to examine the philosophy of education from the perspective of funeral service (Part IA) and from the perspective of pastoral care (Part IB). The main questions for Part I(A) The Philosophy of Education for Funeral Service were initially proposed as follows:

- What do you see as the chief aim or main objective of the funeral service profession today?
- What is the possible connection between loss and people’s quest for meaning in the suffering of processes of grief and bereavement?
As you think about the interplay between funeral ritual and bereavement, what are the most worrisome short-falls (or weaknesses) in the educational program of your school if any?

Describe any key advantages or distinctives to your school's program within the realm of ritual and bereavement.

The additional questions for Part I(A) were initially proposed as follows:

- What do you feel should be the minimum educational standard for licensure that adequately prepares a student to enter the field of funeral service?
- How does dual licensure (funeral director license and/or embalming license) provide advantages to students in terms of being prepared to address the needs of bereaved families?

PART I(B) THE PHILOSOPHY OF EDUCATION FOR PASTORAL CARE

The main questions for Part I(B) The Philosophy of Education for Pastoral Care were initially proposed as follows:

- What do you see as the chief aim or main objective of the pastoral care profession today?
- What is the possible connection between loss and people’s quest for meaning in the suffering of processes of grief and bereavement?
- As you think about the interplay between funeral ritual and bereavement, what are the most worrisome short-falls (or weaknesses) in the educational program of your school if any?
- Describe any key advantages or distinctives to your school's program within the realm of ritual and bereavement.

The additional questions for Part I(B) were initially proposed as follows:

- What do you feel should be the minimum educational standard that adequately prepares a student to enter the field of pastoral care?
- How do advanced graduate studies provide advantages to students in terms of being prepared to address needs of bereaved families?
PART II: THE HERMENEUTICS OF BEREAVED FAMILIES

Part II specifically addressed the fourth research question:

4: How do caregiving education models understand the context of needs facing today's bereaved families?

The main questions of Part II: The Hermeneutics of Bereaved Families were initially proposed as follows:

- Tell me about how your school helps students develop their abilities to understand the acute needs of a bereaved family in order to suggest meaningful rituals that will aid in grief adaptation.
- Does your school give any attention to the realm of spiritual healing in caregiving?
- How does your school educate students about cultural diversity and its influence on bereavement?
- What effort is made (if any) to discuss the ecclesial (i.e. church-based) contribution to bereavement care in the program, both prior to and after a funeral?

The additional questions for Part II were initially proposed as follows:

- What specific courses in your program help students understand the impact of acute loss on family interaction and identity?
- Explain how students learn interpersonal skills that are necessary to care for a bereaved family.

PART III: THE CARE OF BEREAVED FAMILIES

Part III specifically addressed the fifth research question:

5: How do caregiving education models integrate current bereavement research to shape directives of care?

The main questions for Part III: The Care of Bereaved Families were initially proposed as follows:
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- Tell me how your school educates students specifically about grief and bereavement and its connection to the spiritual realm of healing and wholeness in a holistic approach?
- What is your opinion about the role of after-care as part of professional funeral service?
- Is there still room for the church/clergy to work with professional funeral practitioners to care for bereaved families?

The additional questions for Part III were initially proposed as follows:

- Do you feel that your school adequately addresses these topics? Why or why not?
- What are the key textbooks that are used?

PART IV: THE ENCOUNTER OF BEREAVED FAMILIES
Part IV specifically addressed the sixth and final research question:

6: How do caregiving education models implement rituals that meaningfully address the changing social/cultural dynamics of the bereaved?

The main questions for Part IV: The Encounter of Bereaved Families were initially proposed as follows:

- Would you share your opinion of what explains the changing public attitudes toward traditional funeral ritual and pastoral care?
- How well is your school adapting to the changing attitudes about funeral rituals and ceremonies?
- Has your school’s philosophy on the importance of bereaved families encountering the deceased body of their loved one before final disposition changed? Why or why not?

The additional questions for Part IV were initially proposed as follows:

- Which courses in your educational program are designed to discuss the role of rituals in funeral service?
Chapter 3: Research Design and Methodology

- What are your thoughts about the use of celebrants in lieu of or in addition to clergy in funeral ritual?\(^{145}\)
- Does your school prepare students to think of their roles and responsibilities toward bereaved families as one that should extend beyond final disposition?
- Has the interviewer missed something that would assist bereavement caregivers in their work that you would like to share?

3.5 Research Procedures

The current study followed a set of standard research procedures to ensure a systematic process and appropriateness for the research inquiry. The standard research procedures proposed for the study included the following twelve (12) steps.

1. Secure ethical clearance and ratification of the Interview Questionnaire by Research Ethics Committee at Stellenbosch University (see Section 3.8 below);
2. Develop a list of equipment needed for the interview;
3. Develop a Consent Form;
4. Conduct Pilot Study to test adequacy of Research Instrument;
5. Adjust Research Instrument (i.e. Interview Questionnaire) as needed;
6. Write a Letter of Introduction to Key Informants;
7. Submit letters to Key Informants;
8. Call to establish interview and travel dates to Key Informants;
9. Conduct Interviews;

\(^{145}\) Funeral celebrants represented a growing trend of families hiring trained ritual specialists to facilitate meaningful ceremonies and events in lieu of a traditional pastor. Many celebrants were suitable for both secular and religious ceremonies and worked directly with funeral directors to create meaningful events (Rubin 2014; Staab 2015; Stansbury 2015; Whitaker 2015). The interplay between celebrants and meaningful ritualization warranted further discovery for pastoral care research.
10. Transcribe Interview Notes;

11. Analyze Data;


3.6 Pilot Study

A Pilot Study was designed to collect preliminary data for the purpose of testing the adequacy of the Interview Questionnaire and to assess if the research protocol was realistic and effective in addressing the research questions. The proposed Pilot Study participant was John A. Gupton College, locate at 1616 Church Street, Nashville, Tennessee 37203 (http://www.guptoncollege.edu). John A. Gupton College was an ideal location for a pilot study (i.e. less than 200 miles; approximately a 3-hour drive). The school was located in the same state as the researcher, making the logistics of gathering initial feedback reasonable. In addition, the school had a strong reputation within the field of funeral service for its high academic standards. John A. Gupton College was one of just a few mortuary schools who held both national and regional accreditation. The researcher was also an acquaintance of the president of the school, which facilitated the feasibility of the pilot study. Following the pilot testing, the study proposed that the researcher make adjustments to the Interview Questionnaire and processes as needed.

3.7 Data Analysis, Coding, and Security

The interviews were planned to be recorded using an application on the researcher’s iPhone. An application of this sort was a helpful tool necessary to create an electronic file that could be reviewed and transcribed at a later date. After reviewing several applications, the researcher chose “Voice Recorder” by TapMedia Ltd. because of its simplicity and high reviews by other users. Voice-Recorder was a free application available through the Apple App Store. Once the application was installed, the researcher tested several files to ensure that volume levels were clear and that files could be manipulated for retrieval and playback.
Chapter 3: Research Design and Methodology

Data for the study was planned to be sorted into four (4) main parts consistent with the research questions and the conceptualization of the study, including the philosophy of education, the hermeneutics of bereaved families, the care of bereaved families, and the encounter of bereaved families. For each interview, the researcher planned to transcribe each question and subsequent discussion in a word-for-word format and organized by the four aforementioned categories. After the interviews were transcribed in total, the findings of the interview response data were planned to be compared and contrasted in Chapter 4 of the study.

The raw data was planned to be analyzed through open coding, an important technique of qualitative research. Coding was represented by a word or phrase that captured the essence or evocative attribute of the raw data. The researcher planned to use the codes to discover meaning and to surface categories that would aid in understanding of the research findings. Utilizing the common techniques presented in Saldaña’s *The coding manual for qualitative researchers* (2013), the data was analyzed in two cycles. In the first cycle, the researcher used a hybrid of in vivo and holistic coding. With in vivo coding, the researcher looked for terms or phrases that were participant-generated as a means to honor the interviewee’s voice (Saldaña 2013:91; Bazeley 2007; Charmaz 2006). With holistic coding, the researcher attempted to code the basic themes or issues that emerged out of an interview response as a whole, rather than analyzing the data line by line (Saldaña 2013:142; Dey 1993). Holistic coding was sometimes referred colloquially as “to chunk” the data text into broad topic areas (Bazeley 2009). In the second cycle of coding, the researcher used a method of pattern coding. Saldaña suggested that the goal of second cycle coding was “to develop a coherent metasynthesis of the data corpus” (2013:207). Table 17 below illustrated how opening coding would be utilized to develop useful categories for understanding in the first cycle of coding in Chapter 4: Research Findings.
Chapter 3: Research Design and Methodology

Table 17: Sample First Cycle Coding Technique Using In Vivo and Holistic Methods

<table>
<thead>
<tr>
<th>Mortuary College Example Part IA: Philosophy of Education</th>
<th>Question 1: what do you see as the chief aim or main objective of funeral service?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview Response</td>
<td>Code</td>
</tr>
<tr>
<td>&quot;Funeral service is a profession of folks who have learned special knowledge to embalming deceased bodies.&quot;</td>
<td>Specialized Knowledge</td>
</tr>
</tbody>
</table>

Table 18 below illustrated how the data would be synthesized in the second cycle of coding in Chapter 4: Research Findings. Using a pattern coding method suggested by Saldaña, the second cycle coding would “develop a sense of categories, thematic, conceptual, and/or theoretical” from the first cycle codes (2013:207). Pattern coding described how the researcher was able to pull together a lot of material from the research interviews into a parsimonious unit of analysis (Saldaña 2013:210).

Table 18: Sample Second Cycle Summary of Coded Responses Using Pattern Coding

<table>
<thead>
<tr>
<th>Philosophy of Education</th>
<th>The Hermeneutics of Bereaved Families</th>
<th>The Care of Bereaved Families</th>
<th>The Encounter of Bereaved Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop Higher Standards of Learning</td>
<td>Implement Pastoral Negotiation Initiative</td>
<td>Apply Grief Theory to Fit Perceived Needs</td>
<td>Design Activities to Face Loss</td>
</tr>
</tbody>
</table>

To assist with data security, the audio recordings and transcription files were kept solely on the researcher’s computer, with a password protected (two-step verification) data redundancy built in to store all files in a cloud-base databank. In this way, even if the researcher’s computer failed during the course of the study, the researcher could retrieve all of the data files again without delay.

Finally, in Chapter 5: Conclusions and Implications, the researcher incorporated the coded findings (Chapter 4) with the faith-informed integrated insights from funeral service, bereavement psychology, and practical theology provided by the literature review (Chapter 2). The study suggested the strengths, weaknesses, opportunities, and threats of the research to meet the challenges of bereavement caregiving.146 Also,

146 Though the origins of a SWOT analysis were unknown, the format first appeared in the 1960s at the Stanford Research Institute out of funding by Fortune 500 companies. The SWOT analysis was widely used by researchers and consultants in education, government, and industry to facilitate deeper levels of understanding and change (Humphrey 2005:7-8).
a discussion of research application, obstacles, and possibilities for future research was further considered.

3.8 Ethical Considerations

One essential aspect for reputable peer-reviewed research was the consideration of ethics in the research process. Stellenbosch University employed a specific process for ethical clearance before research interviews were permitted to be conducted. In specific terms, Dr. Len Hansen, the Research Development Officer for the Faculty of Theology reviewed the current research questionnaires that were submitted to the Departmental Ethics Screening Committee (DESC). The DESC explained the critical nature of ethical clearance:

Researchers, supervisors and departmental chairs have the primary responsibility to ensure that research conducted in their respective disciplines is characterized by methodological rigor and comply with the guidelines of relevant professional bodies and scientific organizations, as well as relevant legislation, institutional, national and international ethics guidelines. All research in which humans, institutions, organizations or communities/groups are involved must be screened by Departments. The departmental processes for the ethics screening of research proposals should be integrated with the process of approving research proposals in terms of their scientific integrity and rigor. This means that the Departmental Ethics Checklist for the ethics screening of a research project should be considered in the same process as the approval of the research proposal.

All research instruments submitted to the DESC were required to complete three (3) documents: the Ethics Checklist, Letters of Intent, and Consent Forms from the
proposed participants.\textsuperscript{147} With regards to the Ethics Checklist, the researcher reported on the following ethical considerations:

1. Familiarity with ethical codes of conduct;
2. The nature of the proposed research;
3. A disclosure if specific groups of people were involved in the research, such as minors, people with disabilities, people living with/affected by HIV/AIDS, prisoners, other vulnerable people, and Stellenbosch staff, students, or alumni;
4. Assessment of risk of potential harm;
5. The selection of participants;
6. Steps to ensure established ethical standards were applied; and
7. Conflicts of interest.

Following the checklist, the researcher had to sign the following declaration.

\textit{I hereby declare that I will conduct my research in compliance with the professional code(s) of ethics and guidelines for ethically responsible research relevant to my field of study as specified in the list herein attached, AND the ‘Framework policy for the assurance and promotion of ethically accountable research at Stellenbosch University’, even if my research poses minimal or low ethical risk.}

With regards to the Letters of Intent, each participant selected for the interviews was required to submit a statement on their organization’s letterhead that indicated they were willing to participate in the study and that they acknowledged the topic of the research: The De-ritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved.

With regards to the Consent Forms, the researcher provided each participant with a form that outlined the following:

\textsuperscript{147} Many schools in the United States utilized a similar process, known as an Institutional Review Board (IRB), to secure ethical clearance before a researcher was approved to initiate a formal study.
Chapter 3: Research Design and Methodology

1. The purpose of the study;
2. The procedures of the study;
3. A disclosure of potential risks and discomforts (i.e. none for the current study);
4. The potential benefits to subjects and/or to society (i.e. funeral service, bereavement psychology, and practical theology);
5. Payment the study (i.e. none for the current study);
6. Confidentiality;
7. Participation and Withdrawal Options;
8. Identification of Investigator; and

Signatures of both the research subject (i.e. the interviewee) and the principle investigator (i.e. the researcher) were required on the Consent Forms.

When each of these three (3) requirements were met, the completion of the Ethics Checklist, Letters of Intent, and Consent Forms from all of the proposed participants, the researcher was ethically cleared to proceed with the proposed research. The completed Departmental Ethics Screening Committee Ethical Clearance forms were provided in Appendix A.

3.9 Limitations and Trustworthiness of the Study

Of particular concern in qualitative research was the extent of which trustworthiness was extended to the study. Merriam explained: “being able to trust research results is especially important to professionals in applied fields because practitioners intervene in people’s lives” (2009:209). In qualitative studies, trustworthiness was often measured by the degree of rigor in carrying out the study so that readers were convinced that the proposed research procedures were faithfully followed. Chapter 4: Research Findings was designed to validate that the proposed procedures of the current study were carefully attended and meticulously reported. In addition, qualitative trustworthiness was often tied to ethical concerns. In this way, Stellenbosch University provided outstanding institutional review criteria and processes that ensured the highest of ethical standards were met.
In addition to trustworthiness of the research, the current study recognized certain limitations connected with the nature of the research design. The participants described in the design were selected from prestigious, yet specialized schools of higher learning – one school for the training of funeral professionals and one school for the training of vocational pastors. As such, a preliminary limitation of the study was identified with the willingness and candor of the interview participants. Reeves, Kuper, and Hodges explained that “institutional gatekeepers are concerned that the research may cast their organization in a poor light” (2008:514). To combat this limitation, the researcher noted the importance of communicating to the interview participants that the purpose of the study was to develop a means to gain deeper understanding about how to improve practitioners in bereavement caregiving, not to report the failings or shortcomings of a given program of study. Though researcher bias may threaten validity in some studies, for the current design, disclosing to the interview participants that the researcher was a current practitioner of bereavement caregiving was an intentional means planned to mitigate against institutional gatekeeping.

Despite the rigor given to the design of the current study, the researcher noted that validity threats were nonetheless present. For example, in terms of interviewing techniques, the researcher needed to avoid asking leading questions as a scheme to elicit desired responses. Also, the researcher needed to avoid irrelevant questions that would waste time in the promised 90-minute time period allotted for the interview. In addition, the researcher recognized the need to systematically work through the interview design in a checklist fashion as a means to avoid inadvertently missing critical questions and topics of the research. Further, the researcher strived to counteract an interview effect, where items such as position, sex, age, ethnic origins, etc. of the interviewer negatively affect interviewee responses.

In broadest terms, the researcher noted that the study included other limitations as well. Examples inherent with qualitative studies included non-generalized data, nonrandom sampling, and the possibility that participants could lie to the researcher. However, given the phenomenological nature involved in the current study, the research interview was designed not to arrive at final conclusions or right answers;
instead, the researcher was looking for the driving forces that shaped the perceptions of the participants engaged in training professionals for bereavement care. In terms of internal validity, Merriam explained:

*Validity is also relative: It has to be assessed in relationship to the purposes and circumstances of the research, rather than being a context-independent property of methods or conclusions* (2009:214).

To be clear, because observations were made directly from participant responses, internal validity was a definite strength of the proposed research. With qualitative research:

*It is important to understand the perspectives of those involved in the phenomenon of interest, to uncover the complexity of human behavior in a contextual framework, and to present a holistic interpretation of what is happening* (Merriam 2009:215).

### 3.10 Summary

The current study was designed for the development of a practical theology of caregiving for the bereaved. To facilitate the progress of the research, the study proposed a further qualitative ethnographic methodology component. As such, the study identified two (2) primary participants for the research that were committed to training bereavement caregivers, including a mortuary college that prepares funeral professionals and a Christian university that prepares vocational pastors. In addition, the study proposed a pilot study be conducted in order to evaluate and adjust the interview questionnaire as needed. Data was planned to be gathered through semi-structured 90-minute interviews, and transcribed from secure audio recordings for full data analysis and report of research findings. The research methodology included both ethical considerations as well as limitations and trustworthiness of the study. Research findings from the two educational perspectives (i.e. mortuary college and Christian university) were reported in Chapter 4.
Chapter 4
Research Findings from Educational Perspectives

4.1 Introduction to Research Findings

Findings for the ethnographic component of the study were organized and developed with deference to a conceptual framework appropriate for a practical theology of caregiving for the bereaved in order to address the interplay between loss, bereavement, and the spiritual realm of coping. The qualitative approach to the study sought not to control, predict, or generalize findings, but instead to describe, understand, and interpret findings (Merriam 2009). The conceptual framework provided both the useful logic and sequencing necessary to support the research endeavor. In specific terms, the study utilized the LIM model for organizing and sequencing the overall research in terms of practical theology, and the Oxford IDR model to shape the logical flow of the research, as specified in Chapter 1. With regards to the Oxford IDR model, the current chapter (Chapter 3) represented the fifth of seven steps in the Oxford IDR model. In Step 5: Contextualization, the objective was to communicate the findings of the research so that a case for credible change and improvement in bereavement caregiving from a Christian interdisciplinary perspective could be made. With regard to the LIM model, the current chapter provided the raw data and analysis that described the way the world currently is in terms of nurturing bereavement care among two groups of practitioners in training – funeral service providers and vocational pastors. Both groups were identified as significant caregivers that were faced with providing nurturing bereavement care within an increasing context of deritualization. In twenty-first century America, deritualization was connected in part to the cultural demise of authority that had affected both groups of
caregivers. For example, the fact that the church had lost its cultural authority posed a significant threat to pastoral caregiving, as many families faced the existential crisis of death without the assistance of a trained and experienced pastor. Also, funeral professionals were also affected by lost cultural authority. Taylor suggested that “as a result of the internal and external threats, funeral directors have become vulnerable to being rendered largely irrelevant in the foreseeable future” (2011b:20). Given the significant problem of deritualization, the study aimed at learning more about the current training of funeral directors and vocational pastors in order to contribute toward an improved practical theology of caregiving for the bereaved.

4.2 Pilot Study

The current research utilized a pilot study to evaluate the appropriateness of the interview questionnaire. The findings from the pilot study was used to validate and fine-tune where necessary the proposed interview questions relative to the research questions. The location chosen for the pilot study was John A. Gupton College (JAGC) in Nashville, Tennessee. Steve Spann, the president of the school, agreed to participate in the pilot interview. The pilot interview was held on the campus of John A. Gupton College on Tuesday, July 8, 2014, at 1:00 PM Eastern Standard Time in Professor Spann’s office. The official interview time lasted 1 hour and 8 minutes with 15 additional minutes of conversation. Table 19 below summarized the demographics.

Table 19: John A. Gupton College Demographics

<table>
<thead>
<tr>
<th>Demographic</th>
<th>JAGC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interviewee Name and Title</td>
<td>Steve Spann, President and Instructor</td>
</tr>
<tr>
<td>Age of School</td>
<td>69 years old (Founded in 1946)</td>
</tr>
<tr>
<td>Accreditation</td>
<td>The Southern Association of Colleges and Schools Commission on Colleges since 1971. The American Board of Funeral Service Education since 1946.</td>
</tr>
<tr>
<td>Program Offered</td>
<td>Associate of Arts Degree or a Funeral Directors Certificate</td>
</tr>
<tr>
<td>Size of Student Body</td>
<td>140 Undergraduate Students</td>
</tr>
<tr>
<td>Gender Percentages</td>
<td>56 Male (40%); 84 Female (60%)</td>
</tr>
<tr>
<td>Distinctives</td>
<td>As of 2013, 88% pass rate of the National Board Arts Exam; 97% pass rate of the National Board Science Exam.</td>
</tr>
<tr>
<td>Other Qualifiers</td>
<td>School added a 30 credit hour distance learning Certificate program to qualify students to take the State of Tennessee Funeral Director licensing exam.</td>
</tr>
</tbody>
</table>
The Pilot Study was considered in the summary of findings (see 4.6), but the particular interview responses were not included in the coded data analysis (see 4.5). Nevertheless, the entire unedited Pilot Interview was included in Appendix 7.1 for further reference. For the purpose of the actual interview data, however, several important observations were made from the Pilot Study that suggested fine tuning was needed before the actual interviews occurred. In specific terms, the researcher noted the following:

**Explanation of the Conceptualization**
The researcher planned to discuss the four-part conceptualization of the research and survey with each participant. The initial idea was that the participant might be better prepared to answer the interview questions by knowing how the questionnaire was organized. Upon reflection of the Pilot Study however, the researcher decided to omit this approach. In the Pilot Study, the researcher noted that the explanation took up valuable time before the actual interview began that did not appear to be helpful. In fact, given some of the unfamiliar terms and phrases inherent within the conceptualisation, such as “hermeneutics,” “spiritual realm,” and “meaning-reframing,” the researcher noted that the interviewee did not necessarily need to understand these terms to proceed with the interview. Moreover, the researcher determined that while the explanation of the research conceptualization was intended to clarify the study, the actual process of explaining unfamiliar terms could distract from the interview by making the interviewee feel less relaxed and willing to share.

**The Number and Sequence of Specific Interview Questions**
Another benefit gained from the Pilot Study was that the researcher was able to adjust both the number and sequence of questions. Having a trial run through the interview gave the researcher a perspective for how the flow of the interview should go. What was specifically observed was that the original ordering of main questions and additional questions could be better integrated and ordered. This reordering of questions also proved beneficial in being able to ask clarifying questions as needed.

In specific terms, based upon the findings of the Pilot Study, Part I: The Philosophy of Education was clarified, reordered, and developed around six (6) specific questions,
giving the researcher opportunity to ask clarifying follow-up questions as needed. These questions included:

1. From a big picture (bird’s eye view) perspective, what do you see as the chief aim or main objective of the funeral service profession today? For the Christian College, question 1 reads: What do you see as the chief aim or main objective of pastoral care?

2. What do you feel should be the minimum educational standard for licensure that adequately prepares a student to enter the field of funeral service? For the Christian College, question 2 reads: What do you feel should be the minimum educational standard for licensure that adequately prepares a student to enter the field of pastoral care ministry?

3. Does dual licensure (funeral director license and/or embalming license) provide advantages to students in terms of being prepared to address the needs of bereaved families? For the Christian College, question 3 reads: How do advanced graduate studies provide advantages to students in terms of being prepared to address needs of bereaved families?

4. As you think about funeral ritual and bereavement, what are the most worrisome short-falls (or weaknesses) in the educational program of your school if any?

5. Describe any key advantages or distinctives to your school’s program within the realm of ritual and bereavement.

6. Given the religious and cultural diversity that exists in our society, do you think families who experience a loss today still have a need to search for meaning through funeral services and rituals?

Also based upon the findings of the Pilot Study, Part II: Understanding Bereaved Families, was clarified, reordered, and developed around seven (7) specific questions, giving the researcher opportunity to ask clarifying follow-up questions as needed. These questions included:

7. Tell me about how your school defines the acute needs of a bereaved family.
8. Does your school give any attention to the realm of spiritual healing and wholeness in caregiving?

9. What specific courses in your program help students understand family dynamics – specifically in terms of how different generations interact with one another to cope with the impact of acute loss?

10. What effort is made to discuss church-based contribution to bereavement care in the program, both prior to and after a funeral?

11. Does the program encourage working collaboratively with other organizations as well?

12. How does your school educate students about cultural diversity and its influence on bereavement?

13. Explain how students learn interpersonal skills that are necessary to care for a bereaved family.

Part III: Caring for Bereaved Families, was also clarified, reordered, and developed around six (6) specific questions, giving the researcher opportunity to ask clarifying follow-up questions as needed. These questions included:

14. What are the key textbooks related to grief and bereavement that are used?

15. Which courses in your educational program are designed to discuss the role of rituals in funeral service?

16. How well does your school explain how meaningful rituals aid in grief adaptation?

17. Do you feel that your school gives adequate time to developing student knowledge of how spirituality can help families cope with loss? Why or why not?

18. How do you see the relationship between pastors/clergy and funeral directors changing in the future in terms of their roles to offer bereavement care services to families?

19. What is your opinion about the role of after-care as part of professional funeral service?
Chapter 4: Research Findings

The final section, Part IV: Encountering Bereavement, was clarified, reordered, and developed around six (6) specific questions, giving the researcher opportunity to ask clarifying follow-up questions as needed. These questions included:

20. Would you share your opinion of what explains the changing public attitudes toward traditional funeral ritual and pastoral care?
21. How well is your school adapting to the changing attitudes about funeral rituals and ceremonies?
22. Has your school’s philosophy on the importance of bereaved families encountering the deceased body of their loved one before final disposition changed? Why or why not?
23. What are your thoughts about the use of celebrants in lieu of or in addition to clergy in funeral ritual?
24. Does your school prepare students to think of their roles and responsibilities toward bereaved families as one that should extend beyond final disposition?
25. Has the interviewer missed something that would assist bereavement caregivers in their work that you would like to share?

In total, the Pilot Study helped the researcher solidify and clarify twenty-five (25) main questions for the participant interviews necessary for data collection, coding, and analysis.

4.3 Participant Demographics

There were two primary participants chosen for the official interviews of the study (Murale and Preetha 2014; Yin 2012; Barlow, Nock, Hersen 2008). The Cincinnati College of Mortuary Science (CCMS) was chosen as a preferred mortuary college used for training funeral directors for bereavement caregiving. Johnson University (JU) was chosen as a preferred Christian university used for training vocational

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148 In addition to being considered the oldest college of its kind in the United States, in 1986 CCMS became the first private college of mortuary science in the nation to be authorized to award the Bachelor of Mortuary Science degree.
pastors for bereavement caregiving.\textsuperscript{149} Demographic data was gathered from each school to assist in the interview analysis and summarized in Table 20 below.

**Table 20: Participant Demographics**

<table>
<thead>
<tr>
<th>Demographic</th>
<th>CCMS</th>
<th>JU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interviewee Name and Title</td>
<td>Teresa Dutko, Senior Faculty</td>
<td>David Wheeler, Associate Professor</td>
</tr>
<tr>
<td>Age of School</td>
<td>133 years old (Founded in 1882)</td>
<td>122 years old (Founded in 1893)</td>
</tr>
<tr>
<td>Program Offered</td>
<td>Associate of Applied Science (A.A.S), or the Bachelor of Mortuary Science (B.M.S.).</td>
<td>Associates, Bachelors, and Doctoral degrees. Johnson offers eight (8) schools of focused study, including Business and Public Leadership, Intercultural Studies, Bible and Theology, Arts and Sciences, Social and Behavioral Sciences, Communication and Creative Arts, Education, and Congregational Ministry</td>
</tr>
<tr>
<td>Size of Student Body</td>
<td>90 Undergraduate Students</td>
<td>178 Graduate Students (1348 Undergraduate Students)</td>
</tr>
<tr>
<td>Gender Percentages</td>
<td>40 Male (45%); 50 Female (55%)</td>
<td>98 Male (55%); 80 Female (45%)</td>
</tr>
<tr>
<td>Distinctives</td>
<td>As of 2013, 78% pass rate of the National Board Arts Exam; 76% pass rate of the National Board Science Exam</td>
<td>A Biblical Core includes: Orientation to the Old Testament Exegetical Methods Orientation to the New Testament Fundamentals of Christian Faith</td>
</tr>
</tbody>
</table>

The interview with Professor Teresa Dutko was held on the campus of the Cincinnati College of Mortuary Science in Cincinnati, Ohio on Monday, October 20, 2014, at 10:00 AM Eastern Standard Time. The researcher arrived early to the interview and was given a tour of the campus by an office assistant, including classrooms, labs, and

\textsuperscript{149} Forbes Magazine (August 13, 2013) listed JU among the 100 most financially fit private colleges in the United States. JU also ranked 56th on a list that included universities such as Vanderbilt (ranked 54), Sewanee-The University of the South (ranked 63) and Rhodes College (ranked 94). Johnson ranked 10th among the 807 colleges accredited by the Southern Association of Colleges and Schools Commissions on Colleges (SACSCOC) (Accessed 4-19-2015: www.johnsonu.edu).
the student lounge. The researcher was then invited to meet with the college president, Gene Kramer, in his office for thirty (30) minutes before beginning the interview with Professor Dutko in a school conference room. The official interview lasted 1 hour and 9 minutes. The interview with Professor David Wheeler was held on the campus of Johnson University in Knoxville, Tennessee on Tuesday, November 6, 2014, at 2:00 PM Eastern Standard Time. The researcher conducted the interview in Professor’s Wheeler’s office. The official interview lasted 1 hour and 27 minutes.

4.4 Interview Data and Coding

The analysis of interview responses was organized by the four (4) main parts of the questionnaire (Part I: The Philosophy of Education, Part II: The Hermeneutics of Bereaved Families, Part III: The Care of Bereaved Families, and Part IV: The Encounter of Bereaved Families). Each part corresponded to a specific research question aimed at understanding the dynamics of bereavement caregiving education. The specific conceptualization was developed by the researcher based upon a Louwian perspective of practical theology as described in the literature review (see Chapter 2). Findings were presented in tables by selecting out specific parts of the responses of the interviewees to the interview questions. The entire interviews were fully transcribed and provided in the Appendix for further referencing, including textbooks suggested by both institutions.

Two cycles of opening coding were used to identify salient or symbolic words or phrases to aid in summarizing the findings. Participant responses were given for each main part of the questionnaire before proceeding to the next main part. For example, all of the response codes for Part I: The Philosophy of Education were given for the CCMS and JU participants before moving to Part II: The Hermeneutics of Bereaved Families. There were twenty-five (25) interview questions in total. In the following

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150 The researcher noted student recognition given by CCMS in a hallway display for exemplary projects involving constructing human heads out of clay. The researcher observed that CCMS promoted viewing the dead as a significant component for bereavement care, and as an essential part of mortuary college education (Mowll et al. 2016).

151 President Kramer was a former Assistant Dean of Administration of the University of Cincinnati.
Chapter 4: Research Findings

tables, CCMS corresponded to the Cincinnati College of Mortuary Science and JU corresponded to Johnson University. In the first cycle of coding, the researcher utilized a hybrid technique based upon In vivo and holistic approaches, as described in Chapter 3: Research Design and Methodology. Table 21 below provided the qualitative coding for Part I: The Philosophy of Education for CCMS.

Table 21: Cincinnati College of Mortuary Science Philosophy of Education

<table>
<thead>
<tr>
<th>CCMS Part I: Philosophy</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Question 1: what do you see as the chief aim or main objective of funeral service?</td>
<td></td>
</tr>
<tr>
<td>Interview Response</td>
<td>Code</td>
</tr>
<tr>
<td>“I would say that the chief aim for funeral directors is to serve in the role of bereavement caregivers – to help families cope with their grief.”</td>
<td>Funeral Service as Bereavement Caregivers</td>
</tr>
<tr>
<td>Question 2: What do you feel should be the minimum educational standard for licensure that adequately prepares a student to enter the field of funeral service?</td>
<td></td>
</tr>
<tr>
<td>Interview Response</td>
<td>Code</td>
</tr>
<tr>
<td>“There should be higher standards. I believe that a bachelor’s degree should be the minimum requirement – but, sadly, I don’t think that will ever happen at a national level.”</td>
<td>Higher Standards</td>
</tr>
<tr>
<td>Question 3: Does dual licensure (funeral director license and/or embalming license) provide advantages to students in terms of being prepared to address the needs of bereaved families?</td>
<td></td>
</tr>
<tr>
<td>Interview Response</td>
<td>Code</td>
</tr>
<tr>
<td>“Certainly there is a benefit to having more hours dedicated to preparation and learning in our field, including the sciences and the arts. Dual licensure provides a longer timeframe to accomplish educational requirements. We can do so much more with the extra time.”</td>
<td>Longer Preparation Time</td>
</tr>
<tr>
<td>Question 4: As you think about funeral ritual and bereavement, what are the most worrisome short-falls (or weaknesses) in the educational program of your school if any?</td>
<td></td>
</tr>
<tr>
<td>Interview Response</td>
<td>Code</td>
</tr>
<tr>
<td>“Programs are heavily focused on the sciences. At the national accrediting body level, there is still an uneven distribution of course content. That is not something we (CCMS) can overhaul on our own, because we have to comply with those national requirements.”</td>
<td>More Social Sciences</td>
</tr>
<tr>
<td>Question 5: Describe any key advantages or distinctives to your school’s program within the realm of ritual and bereavement.</td>
<td></td>
</tr>
<tr>
<td>Interview Response</td>
<td>Code</td>
</tr>
<tr>
<td>“Someone like me teaching in a program is beneficial. I know that when the president who hired me, he was specifically looking for a non-funeral director…He was looking for someone with a broader social science background.</td>
<td>Broad Interdisciplinary Perspective</td>
</tr>
</tbody>
</table>

Table Continues
Chapter 4: Research Findings

**CCMS Part I: Philosophy cont.**

**Question 6:** Given the religious and cultural diversity that exists in our society, do you think families who experience a loss today still have a need to search for meaning through funeral services and rituals?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Absolutely! I think that all people regardless of faith or spiritual beliefs or not benefit from being a part of a community of support.”</td>
<td>Meaning in Community of Support</td>
</tr>
<tr>
<td>&quot;And not just immediate family, but their extended family and friends. I absolutely do. We are communal creatures – we are social creatures. And so it is hard to imagine anyone coping with a loss no matter what their culture background is in isolation.&quot;</td>
<td>Ubiquity of Grief</td>
</tr>
</tbody>
</table>

Table 22 below provided the coding for Part I: The Philosophy of Education for JU.

**Table 22: Johnson University Philosophy of Education**

**JU Part I: Philosophy**

**Question 1:** what do you see as the chief aim or main objective of pastoral care?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“It is the care of souls. That’s primarily it. The word pastoral has an image of shepherding. Caring for the sheep. That means that you have to get to know the sheep – to find out what their needs are. How well fed they have been. If not, how do we improve the diet of what they are receiving spiritually? The care of souls mean that we have got to get to know these souls.”</td>
<td>Care of Souls</td>
</tr>
<tr>
<td>“Over the last five, six, or seven years, we have made major moves toward spiritual formation…We have realized that physicians heal thyself. But if you are going to be about the care of souls, your soul better be pretty healthy.”</td>
<td>Care for the Caregiver</td>
</tr>
</tbody>
</table>

**Question 2:** What do you feel should be the minimum educational standard for licensure that adequately prepares a student to enter the field of pastoral care ministry?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“The fact that you had been to college and disciplined yourself to complete the course of study and jump through all the hoops to complete the program says that you are a disciplined person. Education itself says – alright, if this is what they say to do, you know how to do it. So we should require some kind of educational standard if for no other reason than to determine, look, will you even do the work that is necessary? If you are a lazy bum, then don’t even go into this. Because the care of souls requires great self-sacrifice, and discipline, and time management – all the things you learn in an educational environment.”</td>
<td>Discipline of Educational Standards</td>
</tr>
</tbody>
</table>

*Table Continues*
Chapter 4: Research Findings

<table>
<thead>
<tr>
<th>Question 3: How do advanced graduate studies provide advantages to students in terms of being prepared to address needs of bereaved families?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“After I complete my bachelors in youth ministry and worked in it for ten years, making all kinds of mistakes, I realized then that a Master’s degree could be helpful. Then, you recognize how much it is that you do not know. Many younger people go to school just to go to school, but a Master’s degree, if you wait a while, you go to learn something.”</td>
</tr>
<tr>
<td><strong>Code</strong></td>
</tr>
<tr>
<td>Advanced Learning to Increase Practical Knowledge</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 4: As you think about funeral ritual and bereavement, what are the most worrisome short-falls (or weaknesses) in the educational program of your school if any?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“When we moved from a college to a university, it really opened up the number of courses and specialties we could offer. Up until then, it would have been only 21 hours in your specialty – youth ministry, preaching, whatever. Now, we are up to 39 hours. So this was something that I used to be frustrated about. But not now. The primo professor who taught the core of our ministry program – he was one of the most intelligent guys I’ve known with 1 or 2 PhDs – he said our ministry training was above anyone else that he knew of…and I know he was being recruited heavily by other schools. He did a lot of comparisons with other schools and thought our original 21 hours was very strong for ministry training – this does not include normal courses in Bible and theology either.”</td>
</tr>
<tr>
<td><strong>Code</strong></td>
</tr>
<tr>
<td>Ministry Specialization</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 5: Describe any key advantages or distinctives to your school’s program within the realm of ritual and bereavement.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“Now we have 39 hours dedicated to training in ministry. So yes, for an undergraduate school who teaches a lot of different classes, I do not have a lot of frustrations about our program at this point.”</td>
</tr>
<tr>
<td><strong>Code</strong></td>
</tr>
<tr>
<td>Ministry Training</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 6: Given the religious and cultural diversity that exists in our society, do you think families who experience a loss today still have a need to search for meaning through funeral services and rituals?</th>
</tr>
</thead>
</table>

Table Continues
### JU Part I: Philosophy cont.

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I think they need it – though I don’t think they always feel it. Culturally for people who are from around here, when people die, they want that ritual. We know what we are supposed to do. In the town I pastored, we had one little funeral home – just a little house – but maybe the best funeral director I ever worked with in my life. At every level, he was great. But he could not survive in a town of 900 – just not enough people. He finally had to move to Pensacola Florida and bought another funeral home. He became very frustrated. In his original funeral home, he did what he was great at, and everyone really appreciated him. He loved to work with people. But now, he told me, “Dave – when an old widow dies here [in Florida], his kid out in Texas says just burn him and ship the ashes out our way.” And he says, I’m doing everything on email or phones, and he says that he gets the body and takes it to the crematory – this is not what I want to do.”</td>
<td>Lack of Awareness in Meaningful Rituals</td>
</tr>
<tr>
<td>“I think the issue is more geographic. They don’t feel the need for rituals or ceremony. I think they need it. I don’t like the word “closure” but you need that time of grieving to be with people who love you.”</td>
<td>Unrealized need to grieve together</td>
</tr>
<tr>
<td>“ – they don’t know what else to do except come to the funeral home and hug you. They want to see you – to hug you – to stand in line and support you – to give to your church or heart association or whatever. So I think people need that, but apparently in some quadrants they are not sensing that they need it. Just burn dad and ship him to me and we’ll put him on the mantle or something like that.”</td>
<td>Communal Bonds</td>
</tr>
</tbody>
</table>

Having completed the coding for Part I (the first 6 questions of the questionnaire relating to the third main research question of the study), the researcher developed the response codes for Part II of the interview questionnaire next (relating to the fourth main research question of the study). Both CCMS and JU participant responses for questions 7 through 13 were considered and summarized in separate tables using a hybrid version of the first cycle in vivo and holistic approaches referenced above (and described in further detail in Chapter 3). Table 23 below provided the first cycle qualitative coding for Part II: The Hermeneutics of Bereaved Families for CCMS.
**Chapter 4: Research Findings**

### Table 23: Cincinnati College of Mortuary Science The Hermeneutics of Bereaved Families

<table>
<thead>
<tr>
<th>CCMS Part II: Hermeneutics</th>
<th>Question 7: Tell me about how your school defines the acute needs of a bereaved family.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
<td><strong>Code</strong></td>
</tr>
<tr>
<td>“You are looking at specific needs, like the need to have support from other people. That certainly is one. The need to have a safe time and place when emotions can be expressed without fear or embarrassment. The need to remember to reflect to reminisce to share memories and tell stories. The need to say goodbye.”</td>
<td>Need for Safe Location for Mourning</td>
</tr>
<tr>
<td>“…he was probably experiencing the tension between faith and grief.”</td>
<td>Faith and Grief in Tension</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Question 8:</strong> Does your school give any attention to the realm of spiritual healing and wholeness in caregiving?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“We certainly talk about grief impacts all around a person. So, the physical body, the emotions, the cognitions, the thought processes, the social behavioral ways people copy and also their spirituality. So we sort of talk about the whole person and how people think grief are emotions that ripples out and effects all of who we are.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Question 9:</strong> What specific courses in your program help students understand family dynamics – specifically in terms of how different generations interact with one another to cope with the impact of acute loss?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“Not a course, but again the death and dying and the psych courses, both flow one into the other. We talk about family types, and the shift from primarily living and extended families, to now more nuclear ones. Beyond that, single parent, blended. In psychology, we get into more of the grief dynamics that ripple from that. But also in our funeral directing course, we talk about generational characteristics and funeral planning. So, for example, the World War II generation vs the Baby Boomers.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Question 10:</strong> What effort is made to discuss church-based contribution to bereavement care in the program, both prior to and after a funeral?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“…it gets mentioned during the core associates degree program and I teach it in an after-care or continuous care course. And so that starts with the importance of connecting with churches and other resources because your knowing what’s out there is a part of following up with your families.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Question 11:</strong> Does the program encourage working collaboratively with other organizations as well?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“It’s not that a funeral home has to deliver all sorts of services or grief support. You are often just connecting people to what currently exists.”</td>
</tr>
</tbody>
</table>

*Table Continues*
Chapter 4: Research Findings

CCMS Part II: Hermeneutics cont.

“When you contact churches and mental health agencies and hospices and different folks about what they’re doing, you are also able to share your interest in or commitment to supporting bereaved families. So you sort of become a part of that network.”

Networking with Community Organizations

Question 12: How does your school educate students about cultural diversity and its influence on bereavement?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I think I could do a better job. You know, in grief discussions, I’ll introduce this or that cultural difference. But it doesn’t receive thorough coverage. But again, there isn’t really time. So I’ll refer to how this cultural group is more open to wailing or keening that you’ll experience, but this is not a course topic or unit per say.”</td>
<td>Learning Cultural Diversity</td>
</tr>
</tbody>
</table>

Question 13: Explain how students learn interpersonal skills that are necessary to care for a bereaved family.

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I use for the second term course Professional Relationships in Funeral Service, there is an interpersonal skills section. I use Alan Wolfelt’s book Interpersonal Skills Training. Where you are looking at clarifying, paraphrasing, and those skills.”</td>
<td>Clarifying &amp; Paraphrasing Skills</td>
</tr>
</tbody>
</table>

Table 24 below provided the coding for Part II: The Hermeneutics of Bereaved Families for JU.

Table 24: Johnson University The Hermeneutics of Bereaved Families

<table>
<thead>
<tr>
<th>JU Part II: Hermeneutics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Question 7: Tell me about how your school defines the acute needs of a bereaved family.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“To get them thinking about it, I give my final exam at the start of the semester. I want them to know what they are going to have to do. So they really must get into the text books that they just bought. I give them a case study and do interviews...They tell me ‘holy cow – you mean I have to walk into these rooms and people are going to expect me to say stuff?’”</td>
<td>Known Expectations of Grief</td>
</tr>
</tbody>
</table>

| “If you really love the people - anything you say will probably be forgotten within a few minutes. You still have to say something. Yet, there is a ministry of presence – like when the big ol’ biker dude comes to the funeral and sits next to you with tears in his eyes and just pats you on the leg and doesn’t say a word. That is the guy you may remember 10 years later. There is a ministry of presence.” | Ministry of Presence |

Table Continues
### JU Part II: Hermeneutics cont.

<table>
<thead>
<tr>
<th>Question 8: Does your school give any attention to the realm of spiritual healing and wholeness in caregiving?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview Response</td>
</tr>
<tr>
<td>“But at some point, you’ve got to be the shepherd. You’ve got to be there and say something… So I tell my students to not get so caught up in running the damn church you don’t have time for the sheep. The sheep then become almost an irritation, rather than the main function.”</td>
</tr>
<tr>
<td>“I see part of the role of pastoral care is teaching people to be self-feeders. And yet, there will always be that element – Mom dies, so call the pastor – see if he can come over. That is when the repair – the healing – whatever you want to call it – of wounded or damaged souls comes in. So there is the element of teaching people to be healthy, but even if they do everything right – they don’t ever smoke, but they can still get cancer. So at that point, you come in as more of a physician – rather than a feeder.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 9: What specific courses in your program help students understand family dynamics – specifically in terms of how different generations interact with one another to cope with the impact of acute loss?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview Response</td>
</tr>
<tr>
<td>“I’m not sure how to teach this. I try to model it, but how do you teach it?...You need to know how to be around the banker who invites you to the country club and how to act when he introduces you to all of his friends who are judges. At the same time, know how to relate to simple country folks. Paul says be all things to all people. I just don’t know how to do that.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 10: What effort is made to discuss a church-based contribution to bereavement care in the program, both prior to and after a funeral?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview Response</td>
</tr>
<tr>
<td>“They have to all get involved. It says in Ephesians that it is the role of the leaders toquip God’s people for works of service – not to do all the works of service. In essence, that means that you are never working yourself out of a job. There are always new people to equip. And there are always people who say that you are getting paid to be here. But you have to train – there is no way 1 or 2 people or 3 or 4 staff people can do all of the pastoral care in a church.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 11: Does the program encourage working collaboratively with other organizations as well?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview Response</td>
</tr>
<tr>
<td>“Why reinvent the wheel? I tell my students that they need to recognize that there are others that have been doing this for thirty years. We could try to do some of these things ourselves for free, or I’d rather cough up a few bucks and work with folks that are doing something so well. So no problem with collaboration at all.”</td>
</tr>
</tbody>
</table>

*Table Continues*
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### JU Part II: Hermeneutics cont.

#### Question 12: How does your school educate students about cultural diversity and its influence on bereavement?

**Interview Response**

"In the pastoral ministry classes – which is supposed to be about the day in and day out activities of a pastor. Some students call it the “marry them and bury them classes.” But was also talk about worship – a major component of your weekly service. If you are going to do that, then we must talk about this millennial divide. There are at least four distinct cultures – you have your dad’s generation where the church should look and smell like this, with suits and ties, no ladies passing the offering plate – then you got the baby boomer generation, where we are a little looser, but we have memories of church in the 50s – then we have my daughter’s generation, those in their 30s – then you have the millennials with the shirttails out and sandals and everything else. And our students have to be aware of that. Even planning a worship service."

"Gordon McDonald, who has a book called *the Resilient Life*, has a chapter we use that talks about the primary questions you need to ask at every decade of your life. I heard him actually go over this at the Billy Graham center at the Cove. For example, in my 20s, we ask, who am I? In my 30s, we may ask, why am I not progressing more quickly? This goes all the way up to the 70s and 80s. You are asking questions like, is there anyone still around who remembers who I used to be? Why do I feel ignored by most of the culture? Who is going to be around when I die? I go through these decades with students to help them understand. This is to help them in pastoral care and in planning worship services."

"We could spend whole semesters about it. I’m not sure how much time you need to analyze it, other than making them aware."

**Code**

- Cultural Awareness & Diversity
- Understand Human Development

#### Question 13: Explain how students learn interpersonal skills that are necessary to care for a bereaved family.

**Interview Response**

“One of the assignments in our pastoral ministry class is to go to lunch with me. I pick out the place and I buy. I ask them to bring 3 questions to lunch that is part of this class. But a part of this is that they see relational skills demonstrated. How I make people feel comfortable when they get into the car. What we talk about in terms of small talk. So I try to model it. Also, when I have students over at my house all the time. We do retreats and everything else. These are vital skills – learning how to deal with people."

**Code**

- Comforting Interpersonal Skills

Having completed the coding for Part II (questions 7 through 13), the researcher developed the response codes for Part III of the interview questionnaire (relating to...
the fifth main research question of the study). Both CCMS and JU responses for questions 14 through 19 were considered. Table 25 below provided the first cycle qualitative coding for Part III: The Care of Bereaved Families for CCMS.

Table 25: Cincinnati College of Mortuary Science The Care of Bereaved Families

<table>
<thead>
<tr>
<th>Question 14: What are the key textbooks related to grief and bereavement that are used?</th>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“The grief text I use is Worden [4 tasks of mourning].”</td>
<td>Tasks of Mourning</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 15: Which courses in your educational program are designed to discuss the role of rituals in funeral service?</th>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Multiple courses build upon this. I think we do a pretty good job at building. Aspects of Death and Dying introduces just general types of ceremonies. Contemporary Funeral Practices in second semester is now called Historical to Contemporary.”</td>
<td>Types of Rituals</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 16: How well does your school explain how meaningful rituals aid in grief adaptation?</th>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I do feel like we are quite effective... so I can make sure that there is a continuous thread throughout the program.”</td>
<td>Continuous Thread of Adaptive Rituals</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 17: Do you feel that your school gives adequate time to developing student knowledge of how spirituality can help families cope with loss? Why or why not?</th>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“We should probably do more of that. I’m not sure we are doing that as much as it might be important to do.”</td>
<td>More Emphasis on Spirituality</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 18: How do you see the relationship between pastors/clergy and funeral directors changing in the future in terms of their roles to offer bereavement care services to families?</th>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Well, I’ve already seen it change a lot. And I have used those changes to affirm the role of the funeral director, because historically, the funeral director could sort of know the clergy was going to support that family in the bereavement period. So, I might share statistics about the decline in church membership and then along with that, among those who are officially members those who actually practice their faith or regularly attend. And beyond all of that, is the issue of geographic mobility. So either the families of faith who practice their faith in a church might be new to your community and that church. So it hasn’t been a long standing church home. And therefore they might not have that really close connection to their clergy person.”</td>
<td>Decreasing Church-Based Care</td>
<td></td>
</tr>
</tbody>
</table>

“...most Americans now say they are spiritual, but not religious. They make that delineation. We believe in God, and we still have faith in a better life after. I see this as a part of the deritualization piece. They go hand in hand. Something as simple as families eating a meal together, I believe is a manifestation, of overall deritualization. So I don’t think it is just around death and grief.” | Need for Spiritual Care |
Chapter 4: Research Findings

<table>
<thead>
<tr>
<th>CCMS Part III: Care cont.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>“I think our society is being deritualized. You can think about big deals, like family gatherings around the holidays or special occasions. Those have lessened. Not a big surprise that funeral rituals have lessened or become shorter. But then, I would offer as an example with students, their daily rituals families used to honor. Like no matter what else we are doing during the day, there is going to be time at dinner for all of us to sit and talk together. Well, a lot of our students didn’t grow up with that family tradition.”</td>
<td>Social Deritualization</td>
</tr>
<tr>
<td>“Funeral directors historically could just assume that the clergy would handle that. But if you look at training in seminaries, it is woeful. I tell our students, for many years, decades now, funeral directors have had better training in bereavement than the clergy you assume.”</td>
<td>Clergy Lack of Knowledge/Preparedness</td>
</tr>
</tbody>
</table>

**Question 19: What is your opinion about the role of after-care as part of professional funeral service?**

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I think a funeral home’s care to a family and for a family should be continuous. Funeral directors generally embrace the pre-need and at-need, but are a little more reluctant in the post-need realm. I think their reluctance is based on some things we’ve shared (in this interview), like assuming that is the role of the clergy, assuming they are not qualified, recognizing that you don’t just do things you are not qualified to do.”</td>
<td>Care in Post-Need Realm</td>
</tr>
<tr>
<td>“Funeral homes don’t need to do all of that. But they need to be able to connect people who will come to them. Because hopefully they have a rapport with their funeral director and it will be safe to say – you know – I need some help”</td>
<td>Continuum of Care</td>
</tr>
<tr>
<td>“So yes, whether a funeral home says they are doing after-care or not, even if you are not, you need to know where to direct people when their requests come.”</td>
<td>Continuum of Care</td>
</tr>
<tr>
<td>“And I say to students that you are the one person they are going to deal with in the face of death. We have already established that they are not necessarily going to work with a clergy person. So when they have questions and concerns about death, funerals, or grief, you are the logical go-to person – unless of course they have a relationship with a hospice.”</td>
<td>Care without Clergy</td>
</tr>
<tr>
<td>“I think there can be sort of a full circle benefit here, going back to your original concern regarding deritualization. Because, funeral homes in Ohio who have more formalized after-care programs that began when the trend got started in the late 80s, they will describe that there has been a shift in their community whereby the funeral home is now being seen as a death education, or grief support center.”</td>
<td>Continuum of Care</td>
</tr>
</tbody>
</table>

*Table Continues*
Chapter 4: Research Findings

## CCMS Part III: Care cont.

So, people are used to this notion that we don’t just go there when someone has just died. We can go there to pick up a brochure on grief, or to borrow a book, or to get information about a support group. So, this changes the whole feel and sense about a funeral home. And I think it makes it seem safer and more comfortable to plan ceremonies and rituals at the time of death… I think that if funeral homes create this shift in perception who they are and what they do, you should be receptive to inquiries and opportunities to help over time… do unless the family says thanks but no thanks. And then, you absolutely respect that. But beyond a year, I don’t think it is important that you do the reaching out, but hopefully you have created this perception that it is ok if you need to reconnect with us.”

Continuum of Care

### Table 26 below provided the coding for Part III: The Care of Bereaved Families for JU.

**Table 26: Johnson University The Care of Bereaved Families**

<table>
<thead>
<tr>
<th>Question 14: What are the key textbooks related to grief and bereavement that are used?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interview Response</strong></td>
</tr>
<tr>
<td>“Well, we are changing it this year in fact… when you teach a topic as broad as pastoral ministries, talking about marrying, burying, hospital visitations, and even candidating for a church position, you only have 30 90-minute sessions, all you can do is just scratch the service of every one of those. But every handout they get when they come in, has got a list of resources”</td>
</tr>
<tr>
<td>Build List of Resources</td>
</tr>
<tr>
<td>“So this is giving students tools they can use or books they can buy. So, once you get out there as a pastor, and you realize that you blew this class off, and then a kid in your church dies, then suddenly you are interested in following up on some of these. Where is that book about the hard sermons to preach and can I get it overnight shipping?”</td>
</tr>
<tr>
<td>Build List of Resources</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 15: Which courses in your educational program are designed to discuss the role of rituals in funeral service?</th>
</tr>
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<tbody>
<tr>
<td><strong>Interview Response</strong></td>
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</tbody>
</table>
| “It’s the pastoral ministry course. We don’t go into a great amount of detail on the rituals, because that varies so much from culture to culture.

I’m surprised for example of how different funerals are in Tennessee than they were up in Indiana. Then in recent years, we’ve seen a shift to just 2 hours of visitation and then the funeral at 7pm. It was always 4 or 5 hours of visitation and the funeral the next morning. That was the model for decades.” |
| Diversity of Rituals |

Table Continues
**JU Part III: Care cont.**

“There are two sessions... What we normally do in one of our sessions, is go over to Atchley Funeral Home in Seymour – it is like an 8 minute drive from campus. Again, we don’t have a lot of time. But we do get 60 minutes in that building – the funeral home. But I tell the guys and we’ve been doing it for years. Basically, we have the funeral director tell the students what preachers do at funerals that are not very good. They have lots of stories to share. Then we do a Q&A where the students can ask the funeral director’s any questions. Of course, some kids want to go see “the room.” So we plan on doing a tour of the whole facility. They see the preparation room, the chapel, which usually has a dead body in a casket. They get to see the selection room of where families choose their caskets. Sometimes they freak out. I tell them, you can’t be freaked out by this, you are going to be the preacher. It is a fast moving hour.”

“But I tell them wherever they go when they do their first funeral, just listen to their funeral director. He’ll tell you where to stand and what to do if you need help. We have too much to cover in this one course to teach them all of the details, so many times young pastors have to just depend upon the funeral director for guidance. Rather than take class time, I tell them that the funeral director knows what to do. And he’ll tell you every minute detail.”

**Question 16: How well does your school explain how meaningful rituals aid in grief adaptation?**

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>“We are very challenged with time. We have one session on grief which typically follows a lecture on hospitals. Then we talk about a session on funerals and a visit to the funeral home. That's four sessions out of thirty – that's a nice chunk – but it is not enough. It is just not enough.”</td>
<td>Familiarity with Funeral Service</td>
</tr>
</tbody>
</table>

**Question 17: Do you feel that your school gives adequate time to developing student knowledge of how spirituality can help families cope with loss? Why or why not?**

<table>
<thead>
<tr>
<th>Interview Response</th>
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</tr>
</thead>
<tbody>
<tr>
<td>“Our whole program has a solid core of classes that deals with that... One of the latest census discusses the issue here. The fastest growing religious category was the none. N-O-N-E.”</td>
<td>Emphasis on Field Education</td>
</tr>
</tbody>
</table>

**Question 18: How do you see the relationship between pastors/clergy and funeral directors changing in the future in terms of their roles to offer bereavement care services to families?**

<table>
<thead>
<tr>
<th>Interview Response</th>
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</thead>
<tbody>
<tr>
<td>“You know this varies from town to town. In my hometown, I was the town chaplain, whether they went to my church or not. It was a real ministry for me. I went the house to meet the family and attended the visitation. I like to make it personal and share real stories.”</td>
<td>Collaboration with Funeral Service Specialists</td>
</tr>
</tbody>
</table>

Table Continues
**Table 2**

**Question 19: What is your opinion about the role of after-care as part of professional funeral service?**

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I have mixed feelings about it. Obviously, you guys have services that we need to take advantage of – we cannot go out and embalm our own person. When my dad died recently, the funeral home provided some grief literature for us. But I don’t know – maybe it doesn’t mean any more to families to receive that than getting a birthday card from my insurance guy. It is nice – I get it. I know families appreciate your personal touches, but I still think that they see you as a business and a provider of services – more than someone we are expecting to minister to us.”</td>
<td></td>
</tr>
<tr>
<td>Clerical View of Ministry</td>
<td></td>
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<tr>
<td>“I can see people at church saying – hey, I don’t need you for that – I have people at my church talking with me and inviting me out to lunch.”</td>
<td></td>
</tr>
<tr>
<td>Paucity of Non-churcherd Bereavement Care</td>
<td></td>
</tr>
<tr>
<td>“It reminds me of the Dollywood Imagination Library – could funeral homes send us home with something about grief? And then 3 months later, you get this little booklet, or even a book. With the Dollywood Foundation, my grandkids get a new book every month. Then again in a few months. You may never hear back from them about it though.”</td>
<td></td>
</tr>
<tr>
<td>MultipleTouches of Care</td>
<td></td>
</tr>
<tr>
<td>“I don’t know – maybe Elizabeth Kübler Ross’ stuff. It is almost irrelevant to me what it is, it is just that we [the funeral home] realize that you are going through this. And then at 6 months or a year, a card that says we’re remembering Frank with you guys today. Three or four touches would be deeply appreciated.”</td>
<td></td>
</tr>
<tr>
<td>Dated Research</td>
<td></td>
</tr>
<tr>
<td>“I use this little CD for friends of mine who are going through grief. I’ve got people who get this CD, and a little booklet. It is by Dr. Tim Clinton. You can buy it on-line on Christian Books or Amazon for 2 bucks. This is for the dark nights, you know, when nobody is around…This is what I call ‘hands-off’ after-care. You don’t know if it is effective. I’ve mailed out 40 or 50 of these CDs over the years, and probably have had 5 or 6 mention it to me. People who do say something about it do so with great emotion. Man, I’ve listened to that CD 100 times.”</td>
<td></td>
</tr>
<tr>
<td>Uncertain Effectiveness of After-care</td>
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</tr>
</tbody>
</table>

Having completed the coding for Part III (questions 14 through 19), the researcher developed the response codes for Part IV of the interview questionnaire (relating to the sixth and final research question of the study). Both CCMS and JU responses for questions 20 through 25 were considered. Table 27 below provided the first cycle qualitative coding for Part IV: The Encounter of Bereaved Families for CCMS.
### Chapter 4: Research Findings

#### Table 27: Cincinnati College of Mortuary Science The Encounter of Bereaved Families

<table>
<thead>
<tr>
<th>Question 20: Would you share your opinion of what explains the changing public attitudes toward traditional funeral ritual and pastoral care?</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I think that before we saw as much deritualization as you and I have been discussing, but perhaps the professionalization of funeral service was part of its own demise. I have probably heard Alan Wolfelt say something like people have gone from being active participants in funeral rituals to being passive recipient.”</td>
<td>From Active Participants to Passive Recipients</td>
</tr>
<tr>
<td>“I thought about that when you discussed proclaimed words. So at some point, funeral directors decided that they could be most helpful if they do everything for us. So people are no longer doing what generations of people you talk about anthropologists tell us – getting up and putting what you feel into motion. I always share with my student the root of the word emotion – a Latin root that means to move around or stir up. So, using the classic fight or flight response as a model, we are not meant to just be still when we are experiencing high levels of or intense emotion. We are meant to move…and to move that through our bodies. But over time, people became so passive.”</td>
<td>Movement, Not just Words</td>
</tr>
<tr>
<td>“In funeral service, we’ll say that since you are going through a difficult time, let us handle it for you. But we have taken the things out of their hands that allowed them to have catharsis for healing in their experience.”</td>
<td>Cathartic Activity</td>
</tr>
<tr>
<td>“I think [deritualization] happened before death, when care of the dying transitioned from family care to medical profession care, and then post-death transitioned from family care to death-care professionals.”</td>
<td>Specialization as Contributor to Deritualization</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 21: How well is your school adapting to the changing attitudes about funeral rituals and ceremonies?</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“It was amazing when I collected journals a few weeks ago how many wrote a piece on how they had not realized how in just over a hundred years how people die has changed so much. And the implications for comfort level around death. So you can talk about the rise in life expectancy and drop in mortality rates and how we just experience so less often. And then when we do, it isn’t so intimate or personal. It is institutional based, not home based. And people are not participating.”</td>
<td>Death and the Change of Comfort Levels</td>
</tr>
</tbody>
</table>

Table Continues
### CCMS Part IV: Encounter cont.

#### Question 22: Has your school’s philosophy on the importance of bereaved families encountering the deceased body of their loved one before final disposition changed? Why or why not?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I do make it very clear that people’s needs are different. Research is limited. It seems to suggest that when people communicate a need to see, and are prepared for that experience, then it is generally healthy.”</td>
<td>Discerning the Need to View the Deceased</td>
</tr>
<tr>
<td>“Some theorists have spoken about it – Worden, Wolfelt, Rando, Grollman, Neimeyer – all the biggies. But specific research is fairly limited. I can send you a pdf of a study that came out of Canada two years ago – very interesting. It was all with families of sudden violent death – suicide, car crash. And it looked at viewing in the healthcare setting like the ER or the morgue, and also viewing at the funeral home. Some did one or another, others did both. And so the people that did both could talk about the shift. Like some people said that the viewing in the ER or the morgue was I have to see to know if this is real. And then the funeral home viewing took things beyond that and brought me comfort because the initial viewing included the trauma and the aftermath of the death, but then the funeral home was able to shift that perspective.”</td>
<td>Viewing to Reframe Life Perspective</td>
</tr>
</tbody>
</table>

#### Question 23: What are your thoughts about the use of celebrants in lieu of or in addition to clergy in funeral ritual?

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>“I have been a celebrant for more than 10 years and so has a colleague with our full-time year-round positions here; we do not have a lot of room [in the program] to practice. I do 2 to 4 per year maybe…The social context of when a family says to find us a minister or show us one – the sort of rent-a-preacher concept. I think Doug Manning, who is a clergy person himself, saw how that wasn’t working because that person just pulls a message or sermon from a pile and didn’t take time to work with the family. So, families are starting to figure out, well if we do not have a clergy person, we don’t have to get one from our funeral director. There are other options. So enter the role of celebrants. And sometimes, people who use celebrants are fairly religious.”</td>
<td>Preaching with Empty Words</td>
</tr>
<tr>
<td>“I have never had a celebrant family say, no religion at all. I almost always pray at some point. I incorporate Scripture for Christian families. It’s never that they don’t want any of that. It’s just…the way I say it is, people figure out that we don’t just have funerals because some one died; we also have them because someone lived.”</td>
<td>Receptivity to Spiritual Realm</td>
</tr>
<tr>
<td>“Now, my concern, as I know you have probably heard from Alan Wolfelt is the opposite swing. That people have taken the celebration of life so far that they want to ignore the death.”</td>
<td>Funerals are not a Party</td>
</tr>
</tbody>
</table>
Chapter 4: Research Findings

Table 28 below provided first cycle coding for Part IV: The Encounter of Bereaved Families for JU.

Table 28: Johnson University The Encounter of Bereaved Families

<table>
<thead>
<tr>
<th>JU Part IV: Encounter</th>
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</thead>
<tbody>
<tr>
<td>Question 20: Would you share your opinion of what explains the changing public attitudes toward traditional funeral ritual and pastoral care?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interview Response</th>
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</tr>
</thead>
<tbody>
<tr>
<td>“I don’t know, but I have thought about it. Death was always one of those taboos — like how much do you make? Maybe we are just trying to gloss over the reality of what has just happened here. And in the process of that, if there is not much eternal reality for them, if you don’t have any concept of that, if you have already given in to this concept that we come from nothing and go to nothing, you get 70, 80, maybe 90 years, and that’s it. Then, what is there left to do except celebrate the 70, 80, 90 years? There is nothing else to celebrate. And so we just party and sedate ourselves.”</td>
<td>Sedate Ourselves From Death</td>
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</tbody>
</table>

Table Continues

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Question 24: Does your school prepare students to think of their roles and responsibilities toward bereaved families as one that should extend beyond final disposition?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Yes, we do...The idea is that people have the inherent ability to bounce back. I think that is true for a lot of people, but historically, having a ritual is part of what helped them bounce back.”</td>
<td>Ritual and Resiliency are not Incompatible</td>
</tr>
</tbody>
</table>

Question 25: Has the interviewer missed something that would assist bereavement caregivers in their work that you would like to share?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;One that I use with [students] is a family who wants their minister or whomever to share words of faith and comfort, but they also want a secular song or a poem or a reading — my concern is that often doesn’t happen well because no one frames that secular stuff. So the funeral director thinks the clergy will, and then he stands up and does his thing and sits back down. He doesn’t introduce that classic rock song or introduce that friend who wants to share a poem or reading. But funeral directors have too long stayed in the back. And those other pieces that are new to people happen better when they are put into a context. So if you just flip on that classic rock song, the older folks in the crowd are going to be put off. But if someone says that we are sharing this song because he always said that if anything happens to me you better this song at my funeral, or because it was his favorite. Grandma may not decide she likes it, but at least she understands how it represents her grandson. So, if the clergy isn’t doing that, and the family isn’t willing to do that, then the funeral director needs to be comfortable in being sort of a master of ceremony.”</td>
<td>Rituals that are Personally and Culturally Relevant</td>
</tr>
</tbody>
</table>
**Chapter 4: Research Findings**

<table>
<thead>
<tr>
<th>JU Part IV: Encounter cont.</th>
<th>Spiritual Apathy in Narcissistic Culture</th>
</tr>
</thead>
<tbody>
<tr>
<td>“We have moved to a self-indulgent, narcissistic culture and the end result is let’s throw a party. We don’t know what else to do. The funeral becomes more about the people that is there. For the most part, we can’t do what Jesus does – we don’t cry. The problem is that as soon as you start crying, we stop thinking about Frank and Jesus, we are thinking about ourselves.”</td>
<td></td>
</tr>
</tbody>
</table>

**Question 21:** How well is your school adapting to the changing attitudes about funeral rituals and ceremonies?

<table>
<thead>
<tr>
<th>Interview Response</th>
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</tr>
</thead>
<tbody>
<tr>
<td>“Through our work with Atchley Funeral Home, we do get to hear about what people are wanting in terms of funerals today.”</td>
<td>Learning Cultural Preferences from Funeral Director</td>
</tr>
</tbody>
</table>

**Question 22:** Has your school’s philosophy on the importance of bereaved families encountering the deceased body of their loved one before final disposition changed? Why or why not?

<table>
<thead>
<tr>
<th>Interview Response</th>
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</thead>
<tbody>
<tr>
<td>“I think Frank’s family should see him again. They need to let the reality of death soak in. Ok – they are really gone. People may never really accept it. They are not going to come walking back in that door. It gives you an opportunity to properly grieve and cry with the support all around you. And I think the ritual of coming back to the church and eat is magnificent. When you come back, then you loosen your tie, and have a sense that life is going to go on. It is a vital ritual. There is great benefit to seeing the deceased body, as long as it is not disfigured.”</td>
<td>Value of Engaging Realm of Loss</td>
</tr>
</tbody>
</table>

**Question 23:** What are your thoughts about the use of celebrants in lieu of or in addition to clergy in funeral ritual?

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<tr>
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</thead>
<tbody>
<tr>
<td>“This is news to me! I’d really have to process that. Huh! You have to leave that one blank.”</td>
<td>Lack of Knowledge of Celebrants</td>
</tr>
</tbody>
</table>

**Question 24:** Does your school prepare students to think of their roles and responsibilities toward bereaved families as one that should extend beyond final disposition?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“A preacher of 80 is different than a church of 800. Use Stephen Ministry or something else. Mentors would be helpful – somebody to walk with them who has gone through this. There is a mentoring program like this for marriage, but I’m not aware of one like that for funerals. Maybe even try to match. If a couple has lost a child, then find another couple who has lost a child as well. Can I meet with you to give you some training so that you can help other couples?”</td>
<td>Small Church-Based Supportive Communities</td>
</tr>
</tbody>
</table>

**Question 25:** Has the interviewer missed something that would assist bereavement caregivers in their work that you would like to share?

<table>
<thead>
<tr>
<th>Interview Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>“You know, nothing jumps off the top of my head. You have been very thorough. This has all been very good.”</td>
<td>Beneficial Dialogue</td>
</tr>
</tbody>
</table>
4.5 Interview Analysis

The research analysed the interview responses provided by the Cincinnati College of Mortuary Science and Johnson University. A second cycle of qualitative coding was used to deepen the analysis of the interview responses. The researcher utilized the method of pattern coding to develop key phrases that best summarized the participant responses.

The interview responses in the first cycle of coding were collated and summarized within the four-part conceptualization of the study using a second cycle of pattern coding. Two final summary tables were developed to summarize the responses from each participant of the study. To be clear, the first cycle interview response codes were collated and analysed through a second time. Using a pattern coding technique, the researcher chose to describe the second cycle codes in a verbal form to indicate actionable responses that supported bereavement care.

Table 29 below illustrated how the second cycle of coding emerged in each category of the study for the Cincinnati College of Mortuary Science, the chosen institution that prepared funeral Directors as practitioners of bereavement care.

*Table 29: Summary of Second Cycle Coded Responses by Cincinnati College of Mortuary Science*

<table>
<thead>
<tr>
<th>Philosophy of Education (Research Question 3)</th>
<th>The Hermeneutics of Bereaved Families (Research Question 4)</th>
<th>The Care of Bereaved Families (Research Question 5)</th>
<th>The Encounter of Bereaved Families (Research Question 6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus on Bereavement Caregiving</td>
<td>Search for Safe Location for Mourning</td>
<td>Recognize the Tasks of Mourning</td>
<td>Move toward Cathartic Active Participation</td>
</tr>
<tr>
<td>Set Higher Educational Standards</td>
<td>Hold Faith and Grief in Tension</td>
<td>Utilize Various Types of Adaptive Rituals</td>
<td>Discern Comfort Levels with Deceased</td>
</tr>
<tr>
<td>Foster Longer Preparation Time</td>
<td>Understand How Grief Impacts Whole Person</td>
<td>Emphasize Spirituality</td>
<td>Reframe Life Perspectives with Private Viewing and Ceremony</td>
</tr>
<tr>
<td>Develop More Knowledge in Social Sciences</td>
<td>Familiarize with Multifaceted Family Dynamics</td>
<td>Support / Train Church-Based Care</td>
<td>Avoid Preaching with Empty Words</td>
</tr>
<tr>
<td>Embrace Broad Interdisciplinary Perspectives</td>
<td>Connect with Pastoral Support</td>
<td>Combat Social Deritualization</td>
<td>Engage Receptivity to Spiritual Realm of Suffering</td>
</tr>
</tbody>
</table>

*Table Continues*
Table 30 below illustrated how the second cycle coding emerged in each category of the study for Johnson University, the chosen institution that prepared vocational pastors as practitioners of bereavement care.

**Table 30: Summary of Second Cycle Coded Responses by Johnson University**

<table>
<thead>
<tr>
<th>Philosophy of Education (Research Question 3)</th>
<th>The Hermeneutics of Bereaved Families (Research Question 4)</th>
<th>The Care of Bereaved Families (Research Question 5)</th>
<th>The Encounter of Bereaved Families (Research Question 6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus on Care of Souls</td>
<td>Know Grief Expectations</td>
<td>Build List of Resources</td>
<td>Reduce Death and Grief Avoidance</td>
</tr>
<tr>
<td>Provide Care for the Caregiver</td>
<td>Practice Ministry of Presence</td>
<td>Deliver Diversity of Rituals</td>
<td>Spiritual Apathy in Narcissistic Culture</td>
</tr>
<tr>
<td>Reinforce High Educational Standards</td>
<td>Develop Ministry of Comforting Information</td>
<td>Incorporate a Familiarity with Funeral Service Trends</td>
<td>Identify Cultural Funeral Preferences</td>
</tr>
<tr>
<td>Foster Well-Rounded Pastoral Care</td>
<td>Feed and Heal Souls</td>
<td>Collaborate with Funeral Service Specialists</td>
<td>Engage Realm of Loss</td>
</tr>
<tr>
<td>Develop Skills in Hermeneutics and Communication</td>
<td>Improve Teaching in Family Dynamics</td>
<td>Advance Learning through Field Education</td>
<td>Obtain Knowledge of Celebrants</td>
</tr>
<tr>
<td>Increase Practical Knowledge of Care</td>
<td>Expand Theology of Ministry</td>
<td>Connect with Intrinsic Spirituality</td>
<td>Encourage Small Church-Based Supportive Communities</td>
</tr>
<tr>
<td>Specialize Ministry Training</td>
<td>Encourage Effective Collaboration</td>
<td>Repair One-Dimensional View of Bereavement Ministry</td>
<td>Organize On-going Beneficial Dialogue between Caregivers And Training &amp; Educational Institutions</td>
</tr>
<tr>
<td>Teach Meaningful Rituals</td>
<td>Solicit Cultural Awareness &amp; Diversity</td>
<td>Mediate Non-churched Bereavement Care</td>
<td></td>
</tr>
<tr>
<td>Combat Isolated Grief</td>
<td>Understand Human Development</td>
<td>Revise Dated Grief Research</td>
<td></td>
</tr>
<tr>
<td>Encourage Communal Bonds</td>
<td>Obtain Comforting Interpersonal Skills</td>
<td>Conceive Effective After-care</td>
<td></td>
</tr>
</tbody>
</table>
4.6 Summary

The purpose of Chapter 4 was to provide a critical contextualization for the study in order to communicate the findings of the research so that a case for credible change would emerge for bereavement caregivers. To this end, findings from ethnographic research were presented from the responses of two (2) participant interviews – one with Professor Teresa Dutko of the Cincinnati College of Mortuary Science and one with Professor David Wheeler of Johnson University. The two schools were chosen to learn more about the training of funeral directors and vocational pastors in terms of bereavement caregiving. After conducting a pilot study with Professor Steve Spann of John A. Gupton College, the researcher adjusted the proposed interview questionnaire to better reflect the core questions of the study. In specific terms, the interview questionnaire included twenty-five (25) main questions for consideration that were generated out of the four-part conceptualization of the study: The Philosophy of Education, The Hermeneutics of Bereaved Families, The Care of Bereaved Families, and The Encounter of Bereaved Families. Each part of the questionnaire corresponded to a specific research question of the study. The study utilized two cycles of qualitative coding techniques to report the findings of each participating school. The first cycle of coding utilized a hybrid form of in vivo and holistic coding; the second cycle of coding utilized pattern coding to further distil the interview responses into actionable statements that supported bereavement caregiving. Several core elements were taken into consideration in the research findings, such as integrating interdisciplinary perspectives of mourning, addressing cultural diversity with comforting information, moving toward more participatory ritualization, and converging a broader network of support to connect with the spiritual realm of suffering and loss. With the analysis of reported findings contextualized for funeral providers and vocational pastors, significant conclusions and implications of the research were needed to complete the study.
Chapter 5
Conclusions and Implications

5.1 Introduction

The current study investigated the problematic field of pastoral bereavement care in the context of significant cultural shifts now shaping the twenty-first century. Deritualization was identified as a significant term to describe the shift in the way bereaved human beings appropriate rituals to facilitate healing and wholeness when faced with the death of a loved one. Sometimes referred to as “ritualistic downsizing” (Weeks 2001), deritualization was described as the growing trend in the United States of American of public preferences to revise, replace, minimize the significance of, and even eliminate (or avoid altogether) long-held funerary rituals that have traditionally been utilized to assist in the adaptation of loss. The research problem was formally stated:

*The current cultural shift toward deritualizing death is a multifaceted concern that may inhibit grief adaptation and adjustment among the bereaved.*

Despite the long history of the importance of rituals for grief adaptation for bereaved human beings, many families today when faced with death of a loved one minimized or ignored the psychosocial and spiritual significance of funerals and bereavement care (Kelly 2008). Taylor argued (2011b:1):

*As the 21st century unfolds, American funeral practices are undergoing seismic change. This is evidenced by the fact that with startling velocity citizens are rejecting the traditional funeral and opting instead for*
minimalist disposition of the body, usually in the form of cremation without obsequies.

Taylor further added: “this rapidly evolving situation dictates a moral imperative to pursue root causes of the phenomenon and to develop appropriate responses” (2011b:2).

The focus of the current study was the elucidation of a response to the problem of deritualization in an area that warrants rigorous academic research. Two groups of practitioners were selected to learn more about responding to the problem deritualization and to develop improved contemporary practices that meet the needs of the bereaved. Specifically, funeral directors and vocational pastors were identified as key specialists trained in the pastoral care of the bereaved. The main objective of the research was to respond to the problem of deritualization by developing a practical theology of compassionate caregiving for the bereaved appropriate for twenty-first century contexts of mourning and loss. To support this research objective, the study framed research questions that facilitated a learning process across two (2) domains of inquiry: (1) interdisciplinary perspectives of bereavement caregiving (Chapter 2) and (2) dynamics of bereavement caregiving education (Chapters 3 and 4). To be clear, the research proposed to integrate knowledge from multiple disciplinary perspectives in deathcare (1st domain of inquiry) and then to subsequently transfer that learning to critically assess educational programs designed to equip funeral directors and vocational pastors (2nd domain of inquiry). The study was therefore well-designed for applied research using the methods of hermeneutics and ethnography within a qualitative design. Table 31 below demonstrates the coherence of the study by organizing the six (6) specific research questions into the two domains of inquiry with the corresponding appropriate qualitative method for each domain. In short, the first two (2) research questions utilized the qualitative method of hermeneutics to address the disciplinary perspectives of bereavement caregiving, specifically in the fields of funeral service, bereavement psychology, and practical theology. The remaining four (4) research questions utilized the qualitative method of ethnography.
to address the dynamics of bereavement caregiving education through the use of semi-structured interviews of a mortuary college and Christian university.

Table 31: The Coherence of Research Questions and Research Methodology

<table>
<thead>
<tr>
<th>Perspectives of Bereavement Caregiving</th>
<th>Dynamics of Bereavement Caregiving Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hermeneutical Component</td>
<td>Ethnographical Component</td>
</tr>
<tr>
<td>Research Questions</td>
<td></td>
</tr>
<tr>
<td>1: What do the multiple disciplinary fields of funeral service, bereavement psychology, and practical theology add to a conceptualization of bereavement caregiving, given the current cultural shift toward deritualization?</td>
<td>3: How do caregiving education models frame the goals and objectives of grief and bereavement care?</td>
</tr>
<tr>
<td>2: What insights emerge from integrating current developments in funeral service, bereavement psychology, and practical theology, that shape an interdisciplinary conceptualization of bereavement caregiving?</td>
<td>4: How do caregiving education models understand the context of needs facing today's bereaved families?</td>
</tr>
<tr>
<td>5: How do caregiving education models integrate current bereavement research to shape directives of care?</td>
<td>6: How do caregiving education models implement rituals that meaningfully address the changing social/cultural dynamics of the bereaved?</td>
</tr>
</tbody>
</table>

The organizing schema of the study followed an inherent logic and sequencing for the advancement of the current research (see Table 32 below). For the basic sequencing of the study, the LIM model of practical theology was utilized in order to assess both how the world is and how the world should be with regards to bereavement caregiving. With deference to the LIM model, Chapter 5 offered a summary of the research findings (5.2) as well as tentative conclusions and implications of the study in terms of how bereavement caregiving could ideally be supported by funeral service professionals and vocational pastors (5.3). In terms of the interdisciplinary logic of the study, the seven-step Oxford IDR model was utilized. Chapter 5 established the final two steps of the Oxford IDR model. In specific terms, Step 6 of the model focused on orthopraxis and therefore required a discussion of how the actual learning of the study applied in real-world social dimensions (5.4). Chapter 5 also established Step 7 of the model, evaluating possible obstacles to orthopraxis and identifying new inquiries for continued learning (5.5). The conclusions and implications of the research were
developed out of both (1) the extensive literature review that examined the disciplines of funeral service, bereavement psychology, and practical theology, and (2) the analysis of findings from the qualitative interviews. In this way, the study provided an informed Christian interdisciplinary understanding that contributed to the development of a practical theology of caregiving for the bereaved.

Table 32: Review of the Organizing Schema of the Study

<table>
<thead>
<tr>
<th>Chapter Title</th>
<th>Oxford IDR Model (Logic)</th>
<th>LIM Model (Sequencing)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter 1: Problem</td>
<td>Step 1 Need for Inquiry: Locate a real world problem that warrants research</td>
<td>How The World Is</td>
</tr>
<tr>
<td>Identification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chapter 2: Review of</td>
<td>Step 2 Hermeneutics and Literature Review: interpret knowledge in selected disciplinary</td>
<td>How The World Should Be</td>
</tr>
<tr>
<td>Related Literature</td>
<td>fields and critically prioritize to support problem inquiry</td>
<td></td>
</tr>
<tr>
<td>Chapter 3: Research</td>
<td>Step 3: Faith/Learning Integration: unite biblical/theological insights with disciplinary</td>
<td>How The World Is</td>
</tr>
<tr>
<td>Methodology</td>
<td>insights to develop a Christian worldview understanding of a given subject/discipline</td>
<td></td>
</tr>
<tr>
<td>Chapter 4: Research</td>
<td>Step 4 Christian IDR: synthesize integrated insights to create a Christian perspective</td>
<td>How The World Is</td>
</tr>
<tr>
<td>Findings</td>
<td>relevant for research methodology</td>
<td></td>
</tr>
<tr>
<td>Chapter 5: Conclusions</td>
<td>Step 5 Contextualization: communicate findings of research to make a case for credible</td>
<td>How the World Should Be</td>
</tr>
<tr>
<td>and Implications</td>
<td>change for those in a relevant mission field</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Step 6: Orthopraxis: apply actual learning in the ethical/social dimensions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Step 7: Evaluation: surface obstacles to orthopraxis, identify new questions, and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>continue learning</td>
<td></td>
</tr>
</tbody>
</table>
5.2 A Summary of the Research Findings

As a measure to support the integrity of the research, the study reviewed how the specific research questions were addressed before finalizing tentative conclusions. Each of the six (6) research questions were considered below relative to the research design.

**Perspectives of Bereavement Caregiving**

1. What do the multiple disciplinary fields of funeral service, bereavement psychology, and practical theology add to a conceptualization of bereavement caregiving, given the current cultural shift toward deritualization?

- **The Disciplinary Field of Funeral Service**
  
  With regards to funeral service, the study demonstrated an anthropological solidarity between ancient human practices of death ritualization and contemporary forms of funeral services in terms of an ongoing need for nurturing bereavement care. A variety of narrative perspectives of funeral service caregivers in popular culture were also examined, including funeral directors being viewed as greedy and insensitive buffoons, necessary social functionaries, and committed vocational caregivers. In addition, current funeral industry issues were considered, including an emerging conceptualization of at-need, pre-need, and after-care services with deference to the issue of deritualization, as well as an exemplary contextualization of re-ritualization designed for nurturing bereavement care.

- **The Disciplinary Field of Bereavement Psychology**
  
  With regards to bereavement psychology, a history of how grief as a concept developed over time was explored, as well as how contemporary issues shaped current grief and bereavement research. The study explained that a paradigm shift emerged from the modern standard model of grief that emphasized decathexis and grief work needed for closure to the postmodern model of grief that was less schematized, yet marked by intersubjectivity,
Chapter 5: Conclusions and Implications

particularity, and an interest in finding an enduring connection with the deceased.

- The Disciplinary Field of Practical Theology
  With regards to practical theology, the study emphasized the theological dimension of bereavement care by locating the field of practical theology and pastoral care as an important academic discipline designed to address complex social problems. Consideration was given to how the dynamics of postmodernity influenced bereavement care through the interplay between the movement toward privatized beliefs and the breakdown in monolithic approaches to post-mortem bereavement rituals. A Louwian perspective identified the role of a theology of compassion on anthropology by providing a convergence model of caregiving that explored the facets of theological anthropology, promissiotherapy, bi-polarity, and the hermeneutics of care and encounter. By taking into consideration that comfort was an essential element of the ecclesial praxis of caregiving, a Louwian perspective provided key insights that shaped pastoral encounters between the bereaved and caregivers, connecting the ageless quest of *cura animarum* to the contemporary need for nurturing bereavement care.

2: What insights emerge from integrating current developments in funeral service, bereavement psychology, and practical theology, that shape an interdisciplinary conceptualization of bereavement caregiving?

- By triangulating insights from multiple perspectives, an interdisciplinary assessment of the knowledge domains revealed the essential role of meaning for effective bereavement care. Contemporary funeral service, epistemologically rooted in applied business, emphasized meaningful caregiving; bereavement psychology, epistemologically rooted in social sciences, emphasized meaningful reconstruction; and practical theology, epistemologically rooted in religious and theological studies, emphasized meaning reframing.
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**Dynamics of Bereavement Caregiving Education**

3: How do caregiving education models frame the goals and objectives of grief and bereavement care?

- The study provided insight into the philosophy of education from the perspectives of a mortuary college and Christian university. The goals and objectives of mortuary college and pastoral education cohered significantly by focusing primarily on bereavement caregiving and the care of souls. At the same time, the research reinforced the need for higher educational standards in both the social sciences and pastoral care informed by broader interdisciplinary perspectives.

4: How do caregiving education models understand the context of needs facing today’s bereaved families?

- The study highlighted the critical nature of understanding and interpreting the changing dynamics and needs of families facing the loss of a loved one. As the study explored the hermeneutics of bereaved families, attention was drawn to the need for a safe location for mourning that respects cultural diversity in ritualization and where the bereaved can hold faith and grief in tension. In addition, the research suggested that more attention was needed in developing comforting interpersonal skills and comforting information within a broader network of community support.

5: How do caregiving education models integrate current bereavement research to shape directives of care?

- The study investigated the care of bereaved families to assess how the current body of knowledge in funeral service and pastoral care addressed today’s bereavement needs so that appropriate services of care could be provided in order to engage the realm of spiritual healing. The research recognized that attention must be given to the tasks of mourning through diverse adaptive (not static) rituals of care. With deference to the problem of social deritualization, there was a need for improved post-mortem care that
Chapter 5: Conclusions and Implications

moved beyond outdated grief research and tired meaningless rituals and connected with the intrinsic spirituality of personhood.

6: How do caregiving education models implement rituals that meaningfully address the changing social/cultural dynamics of the bereaved?

- The study advocated for the need to facilitate relevant opportunities for bereaved families to engage their grief and to enable them to move toward healing, hope, and meaning. The research suggested a reduction in death and grief avoidance by moving toward cathartic participatory ritualization that engages the spiritual realm of suffering and loss. Further, the study encouraged resiliency through cultural re-ritualization shaped by ongoing dialogue between caregivers (e.g. pastors, funeral directors, celebrants), educational institutions (e.g. mortuary colleges, Christian universities, seminaries), and smaller church-based / ecclesial communities of support.

5.3 Tentative Conclusions

Building upon the findings of the research, the study established tentative conclusions based upon synthesizing the learning acquired from the critical evaluation of the six (6) research questions. Tentative conclusions were aimed at addressing how bereavement caregivers, specifically funeral directors and vocational pastors, can improve their level of care despite the challenges of deritualization in a postmodern age. To assist with the organization of the conclusions, a SWOT analysis tool was chosen by the researcher to assimilate the findings that were attained through the literature review of disciplinary perspectives in Chapter 2 as well as the series of categorical and thematic phrases described by the coded responses of the interview data in Chapter 4. As described in Chapter 3, a SWOT analysis was a common tool useful to organize and summarize observations from analysis in terms of strengths, weaknesses, opportunities, and threats.

A benefit of a SWOT analysis was the ability to perceive both internal and external dimensions of a given context. In the current study, the researcher examined internal strengths and weaknesses as well as the external opportunities and threats that
impede bereavement care. Specific conclusions were made in terms of the objective of caregivers to meet the needs of bereaved individuals and families, with full recognition toward the interplay between loss, bereavement, and the spiritual realm. Rather than generalizing the research findings to the population of practicing funeral directors and vocational pastors, conclusions were made in terms of essential declarations that emerged from critical responses to the six (6) research questions of the study.

The LIM model of practical theology aimed at describing the world as it should be. As such, the following tentative conclusions were made in terms of an ideal goal of developing a practical theology of compassionate caregiving for the bereaved. These conclusions were organized below in terms of strengths, weaknesses, opportunities, and threats relative to the two practitioners of bereavement care addressed in the study: funeral directors and vocational pastors.

**Strengths**

**Funeral Directors:**

- Funeral Directors must understand their professional identity in terms of bereavement caregiving.
- Funeral Directors must embrace an interdisciplinary approach to their multi-faceted work.
- Funeral Directors must develop a thorough understanding of the psychological aspects of grief.

**Vocational Pastors:**

- Pastors must understand their professional calling in terms of the care of souls, which necessarily includes more than mere preaching, and extends to the nurturing care of the bereaved facing the existential realities of death as well as dealing on a professional basis with the spiritual realm of life.
- Pastors must provide care and support for bereavement caregivers (including themselves) to sustain faithful and effective ministry in their communities.
Pastors must continue developing necessary skills in hermeneutics and communication to aid in the pastoral care of the bereaved.

**Weaknesses**

Funeral Directors:

- Funeral Directors must expand their educational standards to meet the demands and complexities of a twenty-first century world (Why Funeral Service Isn’t Ready 2015; Altieri 2015; Kann 2015).
- Funeral Directors must develop more knowledge of the spiritual realm of human suffering that challenges the internalization of loss within the existential realities of life.
- Funeral Directors must fashion effective post-need (i.e. after-care) services to complement current service offerings to bereaved families.

Vocational Pastors:

- Pastors must expand their theology of ministry to correct one-dimensional perceptions of bereavement caregiving that unwittingly excludes the expertise of funeral professionals.
- Pastors must advance their understanding of grief psychology in order to become more effective bereavement caregivers.
- Pastors must develop creative and relevant death rituals for meaningful pastoral care to the bereaved.

**Opportunities**

Funeral Directors:

- Funeral Directors must connect their profession to a broader network of bereavement caregiving services in their communities.
- Funeral Directors must learn how to advise the bereaved about opportunities to reframe their life through safe and meaningful locations for mourning, including online or virtual settings.
Chapter 5: Conclusions and Implications

- Funeral Directors must seek to train and connect church-based bereavement ministries with professional funerary care.

Vocational Pastors:

- Pastors must encourage ongoing communal bonds among the bereaved in order to support one another, honor life, and offer hope, comfort, and well-being.
- Pastors must develop stronger cultural awareness and understandings of diversity within and outside the church to address real pastoral needs among all bereaved people who are within the sphere of influence.
- Pastors must explore new modes of ritualization due to the trend toward cremation practices and create on-going opportunities of collaboration with Funeral Directors and other service providers to foster stronger bereavement care across a given community (Hoy 2013; Bregman 2010; Ramshaw 2010; Kelly 2008).

**Threats**

Funeral Directors:

- Funeral Directors must combat the challenges that arise from multifaceted family dynamics, including inter-family relationships (the loss particularized within a given family) as well as intra-family relationships (the loss particularized among the larger community).
- Funeral Directors must develop best practices that move away from tired, ineffective, and empty rituals that are non-participatory and devoid of meaning.
- Funeral Directors must contest social deritualization by becoming intentional public advocates for participatory engagement in active mourning.

Vocational Pastors:

- Pastors must combat the growing spiritual apathy and homogenization of society that discourages active engagement with the spiritual realm of coping with loss (Doehring 2015; Van Der Hart 1988).
Chapter 5: Conclusions and Implications

- Pastors must reconnect with the unchurched people in their communities by developing new approaches to reach beyond church boundaries in order to improve a ministry of presence (Osmer 2008; Stairs 2000; Edwards 1987) among all of the bereaved who suffer from isolated grief because of deritualization.

- Pastors must take the initiative to develop greater collaboration with certified celebrants and others who provide meaningful ceremonies that support the bereaved.

With due consideration to the significant insights from the tentative conclusions, the study was poised to provide an informed response to the problem of deritualization in terms of an improved paradigm of compassionate bereavement care.

5.4 Discussion of Social Orthopraxis – A Case for a Comforting Presence

The central objective of the study was to respond to the problem of deritualization in order to improve contemporary bereavement care. Following the logic of the Oxford IDR model, the study moved beyond research findings and tentative conclusions toward the application of learning in the social dimension of caregiving communities. Addressing Step 6 of the Oxford IDR model, the discussion included how actual learning from the research was applied to the real-world dimensions of bereavement care – particularly at the earliest onset of acute grief. For example, what effective assistance did bereavement caregivers provide to care seekers in an age not tied to a particular course of ritualization? To reiterate the objective of the research, the study was not aimed at a positivistic approach to bereavement care, but rather postulated a practical theology of compassionate caregiving with deference to the impact of deritualization on traditional forms of burials and processes of grief and mourning. In simplest terms, the study’s response to deritualization emerged as a Paradigm of Comforting Presence (Wolfelt 2006; Hunter 2010). A “comforting presence” described

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Osmer suggested that the key to a spirituality of presence is attending to “what is going on in the lives of individuals, families, and communities,” in order to open up the possibility of “an I-Thou relationship in which others are known and encountered in all their uniqueness and otherness, a quality of relationship that ultimately depends on the communion-creating presence of the Holy Spirit” (2008:34).
an “informed there-ness” of bereavement care, involving knowing, being, and doing functions among those facing loss and reframing life. A paradigm of comforting presence provided a helpful description of how caregivers move care seekers toward re-ritualization, with an intentionality of restoring and reengaging in creative and meaningful ritual forms that give symbolic expression to significant thoughts and feelings (see Figure 24). The paradigm was developed in terms of comforting information (i.e. knowing), comforting dialogue (i.e. being), and comforting activity (i.e. doing). An informed there-ness depicts bereavement caregiving as a dynamic movement characterized by knowledge, hermeneutics, and method.

Figure 24: A Paradigm of Comforting Presence

The discussion below appropriated a paradigm of comforting presence to the context of bereaved families in acute grief who reach out for nurturing care in the impact period of working through loss.\(^\text{153}\) In specific terms, the discussion below regarding

\(^{153}\) A paradigm of comforting presence was compatible with Wolfelt’s model of companioning (2006). Wolfelt’s eleven (11) tenets of companioning the bereaved included: (1) Companioning is about being present to another person’s pain; it is not just about taking away the pain; (2) Companioning is about going to the wilderness of the soul with another human being; it is not just about thinking you are responsible for finding the way out. (3) Companioning is about honoring the spirit; it is not just about focusing on the intellect; (4) Companioning is about listening with the heart; it is not just about analyzing with the head; (5) Companioning is about bearing witness to the struggles of others; it is not just about judging or directing these struggles; (6) Companioning is about walking alongside; it is not just about leading or being led; (7) Companioning is about discovering the gifts of sacred silence; it is not just about filling up every moment with words; (8) Companioning is about being still; it is not just about frantic movement forward; (9) Companioning is about respecting disorder and confusion; it is not just about imposing order and logic; (10) Companioning is about learning from others; it is not just about teaching them; (11) Companioning is about compassionate curiosity; it is not just about expertise (http://www.centerforloss.com/companioning-philosophy/#sthash.m6lUsdOW.dpuf).
comforting information, comforting dialogue, and comforting activity, centered upon a pastoral negotiation that occurs when a bereaved family first meets with a funeral director (and possibly a vocational pastor) for assistance with their loss. The paradigm of comforting presence as a whole was critically evaluated below in terms of a practical theology.

**Comforting Information (The Dynamics of the Knowing Functions of Care)**

In a paradigm of comforting presence, bereavement care providers were prepared to offer comforting information to bereaved families and individuals in the wake of acute loss. “Comforting information” described the dynamics of the knowing functions of pastoral bereavement care. A comforting presence required an advanced understanding of the impact that loss incurs on a bereaved person, including physical, emotional, and spiritual elements of care. To this end, the study suggested that the interdisciplinary knowledge needed in contemporary bereavement caregiving was derived in large measure from the fields of funeral service as an applied business discipline (Van Beck 2015; Long and Lynch 2013; Wolfelt 2011a), bereavement psychology as a social science (Troyer 2014; Hoy 2013; Neimeyer, Harris et al. 2011), and practical theology as a field of religious and theological studies (Louw 2015; McNeish 2013; Bregman 2010). In addition to interdisciplinary knowledge, comforting information included recognizing the myth of pastoral hierarchy and embracing a flexible and more personalized approach to funeral ritualization (Ramshaw 2010).

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154 A paradigm of “comforting presence” was inspired in part by James D. Hunter’s *To change the world* (2010), who made a persuasive case for a “faithful presence” of the church within a growing secularized culture. Hunter argued that during the dramatic loss of Israel’s cultural power and influence in the world during the period of the historic exile, individuals were able to integrate a faithful presence within hostile communities by working for the sake of the common good. Jeremiah evoked a faithful presence with these instructions: “This is what the L ORD Almighty, the God of Israel, says to all those I carried into exile from Jerusalem to Babylon: ‘Build houses and settle down; plant gardens and eat what they produce. Marry and have sons and daughters; find wives for your sons and give your daughters in marriage, so that they too may have sons and daughters. Increase in number there; do not decrease. Also, seek the peace and prosperity of the city to which I have carried you into exile. Pray to the L ORD for it, because if it prospers, you too will prosper’” (Jeremiah 29:4-7 NIV). Hunter argued for active Christian cultural engagement by finding ways to participate with life in the larger culture and by seeking to contribute to the common good.
RECOGNIZING THE MYTH OF PASTORAL HIERARCHY

With regards to pastoral care, the research made clear that bereavement care providers needed to recognize long-standing fixed or static assumptions regarding what constitutes legitimate care. To be sure, funeral homes and local churches throughout much of the twentieth century maintained such a high degree of cultural authority that funeral rituals and bereavement care was largely more standardized than truly personalized. The chief assumptions were twofold: 1) there was a necessary sequence of ritual events and 2) there was a prescribed hierarchy of events that delivered adequate care (Irion 1966). In other words, some ritual components were more important than others. As a result, many Americans followed a regular and routine course of ritualization when faced with the death of a loved one (Long and Lynch 2013; Horton 2000; Rutherford and Barr 1990). When a death occurred, families would often call their local pastor and their local funeral director, as both bereavement caregivers knew just what to do to assist a family “in the right way.” For example, for many families, funerary care was standardized in terms of embalming and dressing the deceased body, viewing the deceased body, visiting with friends and family, meeting together for a funeral service, processing to a cemetery, a brief committal ceremony and prayer, and a final burial –what Garces-Foley referred to as the “embalm-and-bury model” (2010:17). In terms of a traditional mode of ecclesiology, funeral directors and clergy worked side by side, each doing clearly delineated roles that were steeped and widely accepted into the consciousness of society. Yet, as Taylor reported (2011b), by the end of the twentieth century the cultural authority for the funeral industry had largely diminished, as evidenced by the deritualization of death.155 Not only were the sequence and number of ritualized

155 Many funeral professionals, including the researcher, recognized anecdotal evidence that demonstrated an entrenched prescribed hierarchy of care. For example, pastors who assumed caregiving responsibility for a bereaved family often (though not always) demonstrated a lack of need to be present with a bereaved family during the initial private viewings of the deceased. As funeral directors noted that this ritual event was often the most difficult time for a grieving family, many questioned the lack of pastoral care offered by the family’s chosen clergy. Also, the prescribed hierarchy embraced by many funeral firms and church communities often missed significant ritualization opportunities for families to gather together following the formal ceremonies for a more informal time to share a meal and/or share stories in a comfortable reception hall or event center (see also Bell 1997; Somé 1997; Bell 2009; Grimes 2010; Solomon and Fan 2012; Loving 2014; Loving 2015). Some practitioners even advocated for the development of informal death cafés (Rubin 2013).
funeral events being challenged, but so was the assumed prescribed hierarchy of care. For example, in the past, many caregivers placed an implicit value on the standardized rituals mentioned above. More often than not, vocational pastors (and perhaps to a slight lesser degree funeral directors), placed the highest measure of effective care on the funeral sermon. As early as 1954, Irion stated that the two (2) main functions of a funeral were: 1) to engage in a therapeutic process of mourning, and 2) to present the Christian faith (1954:8). In this way, a kerygmatic proclamation was paramount in bereavement care for many decades, above all else. This type of sequence and hierarchy was illustrated in Figure 25 below.

![Figure 25: A Prescribed Sequence and Hierarchy of Bereavement Care](image)

Essential for effective bereavement caregiving, funeral directors and vocational pastors needed the acquired knowledge that dispelled the myth of a hierarchy of pastoral care, including the mode and sequence of traditional funeral rituals. To be clear, an informed ecclesiology of bereavement care included not only an advanced interdisciplinary understanding of bereavement and loss, but also included the knowledge that pastoral care was not inextricably tied to traditional funeral ritualization. Of course, traditional modes of funeral ritualization were still a great source of support, comfort, and spiritual healing for many bereaved families. Nevertheless, a paradigm of comforting presence recognized that funeral ritualization was more open and fluid than previously accepted.
EMBRACING A FLEXIBLE APPROACH TO FUNERAL RITUALIZATION

Instead of prescribing fixed rituals for bereavement care, a preferred alternative was proposed. In a paradigm of comforting presence, the number, sequence, value and meaning of rituals were not predetermined, and were expected to differ from one bereaved family to another (Bern-Klug 2004; Bradshaw and Melloh 2007). Within a paradigm of comforting presence, attending to bereaved families eschewed long-held assumptions of care by asserting to a more dynamic hermeneutical process of pastoral negotiation, where funeral professionals and vocational pastors attended to a family’s personal needs by assessing a variety of issues, including a given budget, geographic considerations, personal preferences, and perceived needs just to name a few (Janzen, Cadell, and Westhues 2003; Wolfelt 2014a-e; Wolfelt 2015). In fact, in lieu of a pastoral hierarchy of care found in traditional funeral ritualization, an open and flexible spectrum of personalized pastoral care was preferred.

Table 33 below suggested an alternative perspective in thinking about pastoral care that included five (5) anchors of re-ritualization. With respect to the problem of deritualization, the issue was not that bereaved families rejected all forms of ritualization to assist in the adaptation of grief. Instead, what was at issue was an emerging cultural ethos that embraced an openness and flexibility toward what constitutes meaningful funeral ritual. In this regard, a paradigm of comforting presence supported re-ritualization, including the knowledge of how to appropriate meaningful rituals in bereavement care (i.e. knowing functions). What must not be missed was that the modes of funeral ritual provide a means by which families could meaningfully share the story of one’s life across a spectrum of pastoral care initiatives, including the following:

- a private family time to gather family for support;
- a visitation for family and friends to receive condolences from the public;
- a ceremony to honor life through hosting a special event;

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156 Hoy (2013:4) suggested the helpful metaphor of “anchor” to represent the mooring of a strong gale-force wind in the “swelling tide of grief.” Hoy organized his anchors around five (5) areas: significant symbols, a gathered community, ritual action, a cultural heritage, and a body’s presence.
• a place for final disposition that provided a permanent sacred place for remembrance; and
• a gathering or reception to relax among family and friends.

Doehring (2015:xiv) explained: “storytelling in pastoral care often searches for ways to connect with God, humanity, and creation amidst pain, suffering, and the everyday trials of life.”

Table 33: A Spectrum of Pastoral Care to Anchor the Bereaved

<table>
<thead>
<tr>
<th>A Private Family Time</th>
<th>A Visitation for Family &amp; Friends</th>
<th>A Ceremony to Honor Life</th>
<th>A Place for Final Disposition</th>
<th>A Gather &amp; Reception</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private Farewells and Personal Reflections</td>
<td>Public Opportunity for Family, Friends, and Community</td>
<td>Special Event for Respect, Comfort and Hope</td>
<td>Permanent Sacred Space for Remembrance</td>
<td>Shared Time with Family Friends</td>
</tr>
<tr>
<td>Gathering Family Together for Mutual Support</td>
<td>Receiving Condolences and Support</td>
<td>Express Meaning through Story-Telling and Media</td>
<td>Dignifying Life through Burial and Cremation</td>
<td>Relaxing together with Food and Refreshments</td>
</tr>
</tbody>
</table>

Within a paradigm of comforting presence, the point of embracing a more personalized approach to funeral ritualization (i.e. what was referred to as the re-ritualization of funerals outside of the constraints of a traditional paradigm) was that bereaved families were not compelled by any authority (i.e. social or ecclesiastical pressure) to follow a predefined series of rituals, but instead were encouraged to choose rituals that best ministered to their individual and family needs. In this way, funeral re-ritualization was sensitive to the pervasive postmodern ethos and secularization apparent in the twenty-first century (Ramshaw 2010). Re-ritualization may be contrasted sharply with the long-standing clerical paradigm. Long and Lynch explained: “Puritan minister Cotton Mather would never have dreamed of asking his flock at Old North Church in Boston what they would like to have done in their funerals” (2013:168). Today’s bereavement caregivers however acquired comforting information to assist the bereaved through a process of seeking the specific care they desired. For example, instead of requiring bereaved families to view their deceased again following death (once an entrenched time-honored ritual of care), pastors and funeral directors utilized an approach that informed the family about what the latest
science of bereavement suggests (i.e. comforting information), and then respected the families wishes to do what they deemed was best for them. In this approach, caregivers were more than mere order takers in that they offered care seekers current information about viewing a deceased body so an informed decision could be made. In this regard, one idea was for caregivers to explain how recent research demonstrated that as many as 88% of families who chose to view their deceased prior to final disposition perceived the viewing to be very important in helping in their processes of grief (Mowll et al. 2016:48). In fact, Ramshaw reported that when mourners are often asked what were the “moments of finality” during the ritual process, “by far the biggest category of responses has to do with interacting with the dead body: seeing or touching it” (2010:175). Moreover, explaining that closure was not a good word to describe the possible therapeutic benefit of a private farewell viewing, a funeral director and/or pastor who offered comforting information would seek to guide the bereaved family through the planning process.

To be clear, bereaved families must not be given a false choice between either choosing only tired rituals that had no particular meaningful value to families or simply no funeral rituals at all. Instead, bereaved families were better assisted by receiving comforting information from caregivers that guided a creative process of selecting and developing meaningful events to serve their family in the wake of personal loss. Garces-Foley commented on the caregiving initiatives of funeral directors and vocational pastors:

*The accommodations made by funeral directors and religious leaders all have served to meet the demand of Americans seeking death rituals that*

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157 A recent study even indicated that of the participants who chose to view their deceased as part of their bereavement rituals (75%), a vast majority reported positive feedback (88%). Of those who chose not to see the deceased body for reasons such as wishing to avoid bad memories or to remember the person in life (25%), as many as 50% regretted their decision (Mowll et al. 2016:50). Private viewings in the study included locations such as a hospital, funeral home, church, or place of residence.

158 Even in cases when the deceased body is uncoverable or cannot be viewed, comforting information could include encouraging families to use photographs and personal mementos as funeral rituals to acknowledge the reality of the death (Ramshaw 2010:176). In cases where the deceased body cannot be viewed, some families found solace in the simple touching of an uncovered arm or the holding of a hand.
are more personally meaningful than those they inherited from their parents (2010:19).

**Comforting Dialogue (The Dynamics of the Being Functions of Care)**

Bereavement caregiving was commonly approached in terms of specialized knowledge and activity, placing emphasis on communicating both right words and right actions to care for the bereaved. While both knowledge and action were certainly helpful pastoral functions for both funeral directors and vocational pastors, what was often missed was the key function caregivers provided by their actual physical presence with the bereaved – an informed there-ness. Building upon what was described in the literature review as a profound integration between Louwian and Heideggerian perspectives of anthropology, the study highlighted the significance of an empathetic presence in a pastoral encounter (Nolan 2011). Capretto suggested that “one can speak volumes and empathize little; one can empathize profoundly and offer few words” (2015:349). Particularly in cases of traumatic loss where caregivers often search for the right words, a ministry of silent presence was helpful. Capretto explained:

*The effects of silence begin with the fact that in silently relating to a griever in her or his loss, the caregiver makes the decision to work with the inability of empathic language as opposed to trying ambitiously to overcome or surmount it* (2015:352).

In this regard, a paradigm of comforting presence highlighted significant characteristics of an empathetic presence needed to foster comforting dialogue in bereavement care.

**THE CHARACTERISTICS OF COMFORTING DIALOGUE**

Building upon a Louwian idea of the hermeneutics of care and encounter, the study suggested that bereavement care must not be attached to formalized activities alone (i.e. mere busyness), but included opportunities where bereaved families can have space to engage loss and grow toward maturity. To support the sacredness of this pastoral space where effective dialogue can emerge between caregiver and care

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seekers, the study suggested that caregivers should demonstrate the characteristics of courage, alterity, and embodied listening. To be sure, the interplay of these being functions (i.e. functions beyond words and activities) were essential in paradigm of comforting presence. Louw suggested that being functions (i.e. the telic dimension) are even more fundamental than doing functions (i.e. action) and knowing functions (i.e. the cognitive dimension) (2012:13).

First, the being functions of bereavement care recognized the great hardship placed upon practitioners of pastoral care in the context of acute loss. Compassionate pastoral bereavement care was difficult and demanding work. Doehring explained the compassion required by caregivers as: “the courage to be emotionally and spiritually open to the pain of strangers and enemies who may hold truths and values that seem foreign and even threatening” (2015:xvii). Courage often meant the willingness to sit with the bereaved in silence if necessary, recognizing the caregiver’s empathetic limits. In fostering an atmosphere (i.e. a safe place) where comforting dialogue can emerge, the courage to maintain a pastoral presence and silence provided a medium “for the spiritual and intrapsychic processes of the loss” (Capretto 2015:355). Courage was therefore an important being function in effective bereavement care.

Second, the hermeneutics of comforting dialogue was predicated upon the being function of alterity – the caregiver’s ability to respect the mystery of the other – the care seeker’s encounter with death and uncertainty. Alterity conformed to Louw’s emphasis of bi-polarity as an essential characteristic of effective bereavement caregivers. In this way, alterity was understood as “an evocative term describing each person’s otherness: those aspects of an individual’s religious or spiritual world hidden by what seems similar or familiar” (Doehring 2015:2). Being a caregiver necessitated a learned capacity to respect the mystery and tension involved in ministering to

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159 Doehring’s insightful text however does not fully present the plight of pastoral caregiving among funeral directors in that funeral directors do not have the luxury of vocational pastors in focusing on care within one particular community of faith but must address a plethora of bereaved perspectives within any given community (2015:xxiv).
bereaved individuals and families without the need to prescribe solutions or quick remedies to rid the bereaved of their pain (Osmer 2008).

A third characteristic necessary for effective bereavement care was embodied listening. In order for a meaningful dialogue to emerge in a pastoral exchange, a paradigm of comforting presence encouraged caregivers to understand that communication was more than mere words alone. Effective caregivers exercised great practical wisdom and patience in the disciplined use of space, body language, and physical contact (e.g. hugs or handshakes) as they employed skills of deep listening to understand the particular needs of bereaved families before engaging in helpful funeral rites (Troyer 2014). In a Louwian hermeneutics of care and encounter, caregivers were implored to seek understanding of the particular context and network of relationships that shaped the narratives of the bereaved before constructing caregiving rituals. As such, comforting dialogue was free to emerge organically through careful and focused attention toward embodied listening to how the bereaved shared stories that described the life of the deceased loved one. Doehring explained (2015:71):

As caregivers listen to the stories told by those seeking care and to the stories evoked within themselves, they use their verbal responses and bodies in ways that reflect their deepest beliefs about transcendent realities.

Effective bereavement caregiving in the study was therefore marked by a comforting dialogue with the bereaved as caregivers demonstrated courage to be open to one’s pain, respect for the mystery in how one processes his/her understanding of loss, and ability to engage in embodied listening before constructing meaningful ritual activities.

**Comforting Activity (The Dynamics of the Doing Functions of Care)**

Finally, in a paradigm of comforting presence, bereavement care providers offered comforting activity to bereaved families and individuals in the wake of acute loss. “Comforting activity” described the dynamics of the doing functions of pastoral bereavement care. A credible case for a comforting presence was informed by
examining the full scope of nurturing care. In this way, a comforting presence was represented not only by knowing and being functions, but by significant and recurring “doing” functions within the framework of meaning-reframing in the context of death and loss. The actual practice of bereavement caregiving was delineated by: 1) the proper care and disposition of the deceased, 2) the pastoral care of the surviving family, and 3) the proclamation of human dignity to the world. Bereavement caregiving from a paradigm of a comforting presence was therefore marked by the essential elements of practical (i.e. the dead), pastoral (i.e. the living), and proclamatory (i.e. the world) care that fosters human wholeness and well-being.

In Figure 26 below, caregiving was illustrated by three concentric circles that demonstrated the solidarity of bereavement caregiving in terms of doing functions. The center circle, depicted with a thick line, represented the central task of bereavement caregiving – helping families care for the disposition of their deceased loved one’s physical body. In terms of the practical element of bereavement care, the study identified caregiving at its most basic level as the disposition of a deceased human body.

Consistent with the aims of re-ritualization, even a direct disposition such an immediate burial or a simple cremation without ceremonies was a significant, if not essential, funeral rite. Throughout antiquity, families who experienced a loss have
Chapter 5: Conclusions and Implications

reached out for assistance with their dead – to dispose of a deceased human body with respect and great care (Laqueur 2015). Bereavement caregivers were implored therefore never to minimize the significance of the activity connected to disposing humanely of a deceased human being.\(^{160}\)

The second circle, depicted with a thin line, represented the task of caring for those affected most by the loss of a loved one. In terms of the pastoral element of bereavement care, the study identified the need for a bereaved family to receive adequate nurture and support, often in the terms of meaningful ritualization of loss. A significant undertaking for bereavement caregivers was to give space for people to encounter their loss, by engaging their own suffering, and enabling them to experience movement toward wholeness and well-being. Within a paradigm of a comforting presence, bereavement caregivers were encouraged to facilitate meaningful ritual encounters for families – ritualized events that provided both an accurate reflection and relevancy to one’s life and legacy and supported (rather than treated) those who have experienced the death of a loved one (Bell 2009; Mahon 2009; Hoy 2013).\(^{161}\) Thomas Lynch referred to this as “to get the dead where they need to go and the living where they need to be” (Long and Lynch 2013:xii).

Finally, the third circle, depicted with a dashed line, represented the possibilities inherent in caregiving to proclaim something significant about human dignity and the meaning of life through ceremony and cathartic caregiving rituals.\(^{162}\) In terms of the proclamatory elements of bereavement care, the study identified the need to recognize the arena of community-theater (Long 2009). As bereaved families entrusted caregivers with their sacred stories, caregivers became uniquely positioned

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\(^{160}\) Funeral practitioners should no longer refer to some families as needing “just a cremation.” Instead, they must recognize the significant opportunity they have been given to care for a given family and the dignity of a deceased human body.

\(^{161}\) A comforting presence was connected to the desire as professional caregivers to walk alongside of (i.e. companion) families, as they experienced grief in their own personal ways, and as they expressed their mourning outwardly through meaningful funeral experiences (Wolfelt 2006).

\(^{162}\) Long and Lynch suggested “it’s not a matter of saving our respective institutions. Much more is at stake, namely being human. It is the deepest form of undertaking to help fellow human beings to do this human thing in a humane way” (2013:178).
to facilitate meaningful opportunities that honor personal narratives through shared experiences with family and friends. As such, bereavement caregivers served a strong civic purpose in sharing stories that strengthen community bonds. As the dignity and value of life was celebrated and honored with others, the bereaved stood in solidarity with all humanity.

The study recognized that the practical, pastoral, and proclamatory elements of bereavement caregiving were further informed by a Louwian view of practical theology. To be sure, a paradigm of comforting presence was best represented by a hermeneutical effort representing a pastoral negotiation between caregivers and the bereaved to foster meaning and comfort in the reframing of life. Through a hermeneutical discussion with a bereaved family (i.e. comforting dialogue), caregivers connected their knowledge of bereavement psychology (i.e. comforting information) with their expertise in meaningful rituals of care (i.e. comforting activity). Louwian categories for bereavement care were further exemplified by the categories of 1) a theological anthropology, 2) promissiotherapy), 3) bi-polarity, and 4) the hermeneutics of care and encounter. Specific examples of each element of bereavement caregiving were considered with respect to Louwian categories below.

PRACTICAL

- A Louwian perspective of theological anthropology informed caregivers that a paradigm of comforting presence was not about a sermon to be preached. Care for the deceased represented a ministry of human dignity and reengagement in life for the bereaved.

- A Louwian perspective of the hermeneutics of care and encounter informed caregivers that a paradigm of comforting presence was not attached to public or formalized rituals alone, but included opportunities for the bereaved to have space to engage loss through an unhurried private viewing time spent with the deceased before final disposition.

PASTORAL

- A Louwian perspective of promissiotherapy informed caregivers that a paradigm of comforting presence included developing creative rituals to
express severance and continuation of bonds that fostered peace and trust in God.

- A Louwian perspective of bi-polarity informed caregivers that a paradigm of comforting presence was not about attaining a false sense of closure, but helping the bereaved live through the phenomenological mystery of death.

PROCLAMATIONAL

- A Louwian perspective of theological anthropology informed caregivers that a paradigm of comforting presence evoked a spirit-led movement among the bereaved to strengthen community bonds by inspiring new possibilities of life.
- A Louwian perspective of promissiotherapy informed caregivers that a paradigm of comforting presence included present hope for a better world as a result of the continuing influence and legacy of a life well-lived.

The Practical Theology of a Paradigm of Comforting Presence

Beyond the essential parameters involved in a paradigm of comforting presence, including the knowing, being, and doing functions of bereavement caregiving, the study attended to how the problem of deritualization was shaped by practical theology. In short, a paradigm of comforting presence represented the accumulation of the research toward the development of a practical theology of caregiving within helpful re-ritualized forms for the bereaved. In this way, the proposed paradigm was aimed not at a mere academic theory, but at a practical relevance for bereavement caregiving practitioners, such as funeral directors and vocational pastors. With deference to the practical aspects of the model, a paradigm of comforting presence argued for an informed there-ness that necessitates the orientation of bereavement caregiving to begin and end with an emphasis on the bereaved. To explain, the study determined that deritualization was more than symptomatic of the loss of cultural influence and power among funeral directors and vocational pastors. Broadly understood, deritualization was identified as the cultural ethos that shaped the context of bereavement care in the twenty-first century (Taylor 2011b; Wolfelt 2011b). The current study concluded that perhaps the best course of action for bereavement caregivers was not ambitiously to attempt from a top-down view to save or restructure
the entire funeral industry and all involved in vocational pastoral care of the bereaved, nor to control complex socio-cultural perceptions of what constitutes a phenomenology of bereavement care. Instead, bereavement caregivers were implored to be oriented to a bottom-up grassroots perspective (i.e. a practical theology) to offer a modest comforting presence within local spheres of influence.

Rooted firmly by a Christian perspective of compassionate bereavement care, the paradigm provided space for effective religious coping to occur. A paradigm of comforting presence stood in solidarity with other established research that postulated how attachment to God and meaning were found to have significant direct and indirect effects on grief and mourning processes (Kelley and Chan 2012). In addition, a comforting presence was consistent with a Louwian perspective of theological anthropology in that caregivers responded to God by focusing on their primary responsibility to care for humanity – demonstrating dignity to both the living and the dead amid acute grief. Spheres of influence for bereavement caregivers who modeled a comforting presence aimed at the individual level of persons and families, but also extended to the communal level of neighborhoods and communities, and possibly even the institutional level of organizations operating in cities and states. Nevertheless, the orientation for the paradigm was always toward the practical outworking of an informed there-ness of bereavement caregivers from whom the bereaved called upon for assistance in acute loss.

As a professional bereavement caregiver, being oriented toward a comforting presence was an effective means to bear witness to the value of funeral re-ritualization in order to provide nurturing care among local communities. A comforting presence approach was therefore connected to a practical theology of engagement and re-ritualization, where caregivers exercised their influence to seek human flourishing and the common good among bereaved families and friends – not to resolve or fabricate

163 Kelley and Chan argued that in coping with grief, “people may draw on such religious resources as beliefs about God (e.g. whether God is a source of suffering and / or of solace at a time of loss), religious activities and rituals (e.g. prayer, funeral services), and connection to a faith community” (2012:201-202). As a practical theology of bereavement caregiving, a paradigm of comforting presence was consistent with religious coping that could lead to greater meaning and greater stress-related growth among the bereaved (Kelley and Chan 2012:222).
a panacea for a particular industry’s agenda (Volf 2015; Brueggemann 2010). To be clear, a comforting presence meant that bereavement caregivers, including both funeral directors and vocational pastors, were fully engaged in walking with families and communities through the hard but necessary work of meaning-reframing in a dynamic and fluid process of re-ritualization, rather than attempting to change or fix large cultural forces beyond their control.164

Taylor (2011b) was correct in connecting the problem of deritualization with the funeral industry’s loss of cultural power and influence. The same loss of cultural authority was also identified with the institutional church as well by the start of the twenty-first century (Crouch 2008). Funeral directors and vocational pastors were unable to mitigate cultural change that resulted in a significant loss of cultural authority. The quest for a comforting presence then as caregivers was not aimed necessarily at reversing cultural trends or attempting to regain cultural influence on a macro scale; instead, the study concluded that bereavement caregivers should focus primarily, if not exclusively, on the orienting tasks of daily work to alleviate and assuage human suffering among families who are mourning the loss of a loved one.

The point of a comforting presence paradigm was not to be nostalgic of the past when funeral homes and local churches regularly exercised cultural and religious authority in directing bereaved families through predetermined rituals of care. A paradigm of comforting presence contended that the past cannot be recovered. Perhaps a reasonable conclusion of the study was that funeral directors and vocational pastors cannot return to national prominence and cultural power in the United States. At the same time, the study determined that funeral directors and vocational pastors can focus their daily practices on serving the common good through creative efforts toward re-ritualization – being truly present as individual families and friends reframe their lives after the loss of a dear loved one.

164 Given the fluidity of a paradigm of comforting presence (i.e. knowing, being, and doing functions), further efforts were warranted to articulate and connect universally beneficial elements of care to the bereaved across a dynamic interplay of creative and meaningful ritualization. On Sunday, October 23, 2016, the researcher will join Dr. Jason Troyer at the National Funeral Directors Association International Convention & Expo in a presentation that explores cornerstones of bereavement care.
Chapter 5: Conclusions and Implications

Further, in deference to a practical theology of a comforting presence, the study suggested that bereavement caregivers were embraced as a being a real benefit to those living in a particular city or given town. The study established that by accepting the loss of cultural authority and ongoing challenges to professional identity, funeral directors and vocational pastors maintained a legitimate opportunity to demonstrate a comforting presence within the existential crises of death. This emanating comforting presence was applicable to professional communities of bereavement caregivers (including funeral directors) as well as ecclesial communities of spiritual caregiving (including churches and lay directed programs of support).

Throughout history, people grieved the death of significant others. And when death occurred, the bereaved sought help from others willing to undertake the necessary and pastoral tasks at hand. Despite the cultural challenges that faced the funeral service industry and sectarian religious traditions, bereavement caregivers were encouraged to sustain a paradigm of comforting presence (Kavanaugh 2006). In this way, the study suggested that a paradigm of comforting presence calls out bereavement caregivers to participate in the lives of others who are faced with a significant loss. As a helpful heuristic in practical theology, caregivers who learned how to appropriate a paradigm of comforting presence for post-mortem ritualization could better nurture the bereaved through the existential reframing of life (Klingenberger 2014).

5.5 Obstacles and Inquiries for Future Research

Having discussed the social orthopraxis of a paradigm of comforting presence, Step 7 of the Oxford IDR model suggested that learning be attached not only to practical application, but to an evaluation of learning as well. After considering the application of a paradigm of comforting presence in 5.4 above, the conclusion reflected upon evaluating the impact of the study on the problem of deritualization. An evaluation was made of the subjective experiences of grieving people and their need to move grief into mourning in order to foster hope and well-being. As the bereaved made internal adaptations to reframe their new outer realities, Wolfelt noted that “in recent years, more and more North Americans are questioning the value of planning and
participating in ceremonies that honor the ‘rites of passage’ from life to death” (2011:5; Van Gennep 1960). In fact, Wolfelt maintained:

> A continuing trend is to dispose of the dead and quickly return to normal life. The problem: if we don’t acknowledge the significance of death, we don’t acknowledge the significance of life (Wolfelt 2011a:5).

Though the current study was not designed to provide an exhaustive analysis of why deritualization occurred, it was helpful to consider some ideas of possible contributors to this trend as a means to consider obstacles to orthopraxis and to propose future research initiatives. Wolfelt summarized some of the more common factors that influenced the problem of deritualization (2011a:12-17):

- We live in the world’s first death-free generation.
- We live in a mobile, fast-paced culture.
- We’re disconnected from each other.
- We value self-reliance.
- We eschew spiritualism.
- We don’t understand the role of pain and suffering.
- We have lost the symbolism of death.
- We deny our own mortality.
- We’re devaluing life.
- We’re forgetting our values.

With these factors in mind, the study considered the role that a paradigm of comforting presence has on bereavement caregivers who minister to grieving souls during existential crises of human loss. Building upon what was already known about the problem of deritualization and what was developed within the current study regarding a paradigm of comforting presence, the final evaluation examined potential obstacles as well as proposed new inquiries for further research to aid in caregiving for the bereaved.
Chapter 5: Conclusions and Implications

Obstacles

The conclusions of the study made clear that implementing a paradigm of comforting presence among bereavement caregivers would not be without obstacles. What became evident in the evaluation of applying a paradigm of comforting presence was that significant bereavement caregiving practices needed to change. The current study identified two (2) significant obstacles for consideration. Preliminary evaluations were unable to identify which obstacle contributed the greatest threat to a paradigm shift. The obstacles mentioned below were not given in any particular order, but should be considered in terms of a cumulative impact, rather than a precise order of significance. The two obstacles evaluated in the current study were funeral service sustainability and weak ecclesiology for community engagement. These obstacles were applicable to both caregivers identified in the parameters of the research – funeral directors and vocational pastors.

- Funeral Service Sustainability

One major obstacle that faced funeral service practitioners in implementing a paradigm of comforting presence in the workplace was sustainability as a legal business entity (Wilkerson 2012; Mannix 2014). To address the relationship between a paradigm of comforting presence and funeral service sustainability, attention needed to be drawn to the different operating epistemologies. Applied business fields like the funeral service industry operated with a different epistemology than that of the social sciences and religious/theological fields. The practical significance of a field’s operating epistemology was that language was shaped to meet epistemological goals. A real obstacle in interdisciplinary exchanges was to maintain the integrity of a disciplinary field while integrating across multiple perspectives. For applied business disciplines like funeral service, much of the common language extant in trade journal publications was tied to objectives that helped a business thrive in a competing marketplace.

165 Business sustainability was a driver for mortuary colleges too focusing much of the program of studies on business, accounting, finance, and marketing. Similarly, licensing as a funeral director was based upon state or national board exams that focused funeral arts upon the disciplines of accounting, business law, business management and marketing.
Chapter 5: Conclusions and Implications

Funeral homes were licensed under state laws to operate as for-profit business establishments. For any business, profitability was a key metric of sustainability. Yet, as Long and Lynch maintained, the “comingling of mortality and money, death and dollars, sadness and sales, is a tricky business” (2013:114). To be clear, without a measure of profitability, business entities did not survive, and professional attrition occurred (Penepent 2015).

To help understand the significance of the language of profitability within the disciplinary field of applied business, a comparison was made with regards to non-profit and philanthropic organizations. Though these organizations operated with different goals in mind, they nonetheless were maintained with a comparable degree of solvency. Hoy explained that “non-profit organizations do not report ‘net earnings,’ but their reported ‘change to net assets’ or ‘net surplus’ are two metrics that are comparable to a for-profit organization’s ‘net earnings’ or ‘net profit’” (2013:144). For example, by 2011, funeral service organizations on average reported net profit at 5.9%, comparable to hospice providers at 6.3%, but much less than educational support organizations at 10%, physician offices at 11%, dental offices at 15%, investment firms at 16%, and legal services at 19% (Hoy 2013; Bierman 2011). With respect to these statistics, why was funeral service sustainability necessary for a paradigm of comforting presence?

Many funeral service practitioners, both coming out of mortuary college as well as seasoned professions, embraced the work of funeral directing as a calling – something much more than a mere job to do to receive pay (Turner 2013; Lynch 1997). And yet, many funeral directors found their calling threatened in large measure because the vocation of funeral service often overemphasized an epistemology of business and a language of profitability and market share. The study optimistically suggested that a paradigm of comforting presence was compatible with both a vocational call to bereavement caregiving as funeral service practitioners, as well as an epistemological call to facilitate thriving business organizations. For funeral service organizations, a paradigm of
comforting presence shifted the center of epistemology from the language of business sustainability to a language/grammar that emphasized bereavement caregiving. The main point of a comforting presence paradigm was not to maximize the spending of bereaved families on funeral services and merchandise (i.e. to persuade bereaved families into paying for that which was no longer helpful in terms of coping with acute grief). Instead, funeral directors, as key bereavement caregivers, were implored to maximize the degree of care a funeral home can provide based upon a clearly individualized pastoral diagnosis of bereavement needs. Though the funeral industry was certainly experiencing great changes and challenges to older business models geared toward selling funerary services and merchandise, those firms that embraced a paradigm of comforting presence could enhance their sustainability by securing a place in their communities as irreplaceable caregiving professionals who minister to families in times of loss (Stansbury 2016).

Of course, if a funeral establishment implemented an operating philosophy of comforting presence, the issue of profitability was not eliminated. To be clear, funeral homes changed from being essentially sales-driven (often quantitatively measured in terms of an average revenue price per call) to care-driven (qualitatively and quantitatively measured in terms of comforting care for the greatest number of families), business sustainability was not guaranteed. As such, while the paradigm suggested a needed shift in language (i.e. from sales-driven to care-driven), the paradigm did not reject the ongoing need for sustainability and prudent business practices. In fact, care-driven funeral homes must still sustain a measure of reasonable profitability to be able to secure qualified and experienced funeral caregivers. Stated another way, in a

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166 It may be important to note that in the United States, the Federal Trade Commission’s (FTC) Funeral Rule mandated that funeral establishments enter into a clear and itemized contractual agreement with a client family as described on a Statement of Goods and Services. Statements included an itemization of services, merchandise, cash advances (obituaries, flowers, certified copies of death certificates, etc.), state sales tax, and payment information. However a funeral home chose to engage in bereavement care, FTC rules still applied. See also Kopp and Kemp The death care industry: A review of regulatory and consumer issues (2007).
paradigm of comforting presence, average revenue per call (ARPC) was best understood as the means, not the end of funeral service caregiving.

Regardless of philosophical intent to maximize care for a given bereaved family, caregivers were not expected to work for free (this was true whether working at a funeral home, church, hospital, or counselling center). In a paradigm of comforting care, funeral providers were encouraged to manage prudent business practices that foster adequate (and ethical) profitability in order to sustain the life of the organization. In this way, the study argued that a shift to a paradigm of comforting presence in funeral service must maintain the integrity of the business discipline with its concentration on sustainability, and at the same time, move its epistemological center toward bereavement caregiving. In this regard, funeral service sustainability and a paradigm of comforting presence were compatible, but not inextricably connected.

One current example of how some progressive funeral establishments have utilized the postmodern context of deritualization to foster sustainability was those firms who recognized the role of re-ritualization to restore and perhaps strengthen social integration. Re-ritualization in this way focused on how public grieving was moving to private and virtual settings. Prior research had already established a strong connection between participatory rituals and effective care (Ramshaw 2010; Kelly 2008). In the twenty-first century, this connection emerged in the settings of online and virtual memorialization.167 Specifically, funeral establishments offered the bereaved flexible and private options to participate in healing rituals through forms such as online obituaries and remembrance videos, live streaming of funeral ceremonies, interactive tombstones with GPS coordinates, social media sharing, and even virtual

167 Cann even argued that in the United States, “visiting the actual physical site of the body after the burial is relatively rare, and the virtual memorial may not merely supplement the physical visitation, but supplant it” (2016:111). For example, the Omneo Group at www.omline.com provides a virtual mausoleum experience for families who have loved ones interred or entombed across the globe. By utilizing current NFC technology, a device called the Omneo Tap is placed at each disposition location and then connects all of the memorials together for an on-line virtual experience – a digital legacy preserved for families and friends.
worlds of avatars where the deceased lives on in a new on-line reality (Cann 2016; Geraci 2014). Those funeral service firms astute in understanding the postmodern age, with its rise in the practice of deritualization (i.e. an openness to construct individualized rituals of care or even to choose no post-mortem rituals at all), were perhaps not surprised by the birth of online and virtual memorialization.\(^{168}\) As a supplement to (or and even in lieu of) traditional forms of ritualization, spontaneous memorials provided “a public forum where the bereaved can continue to maintain their identity as grievers and feel that it is acceptable to mourn” (Cann 2016:131). Understood collectively, these relatively recent “technologies” were a creative means for remembering – to give a voice to all mourners, even a democratizing effect for marginalized grievers (Cann 2016:xii, 106, 133).\(^{169}\) Hoy explained:

The continually evolving technologies of digital video recording equipment, computer-based cameras, and mobile telecommunications devices promise to continue reshaping the ability of scattered people to ‘participate’ in funeral rites…What researchers must investigate is how the experience of viewing a funeral on the internet compares in effectiveness to the experience of physically attending the service, but these

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\(^{168}\) One current example of progressive online memorialization was the work from technology company funeralOne (Stacey 2007). Combining innovation and technology, funeralOne updated the concept of an obituary traditionally found in daily newspapers to a model of online tributes which provided bereaved communities with private and virtual online experiences to interact with pictures and video, leave public or private condolences, send flowers and gifts to family members of the deceased, and even share one’s tribute with social media platforms like Facebook, Twitter and Google+.

\(^{169}\) Christensen and Willerslev provided a helpful insight by suggesting that social technology, which perhaps can be connected to the postmodern interest in virtual settings now present in bereavement care (including social media), was inspired by the philosopher Ian Hacking, “who reminded us that technology means ‘practical art’ and pointed out that technology does not primarily concern abstract knowledge, but knowledge about how you ‘do something’” (2013:2). In this way, people apply various technologies, such as funeral rituals, in an effort to grasp time. Christensen and Willerslev explained: “As human beings we have to cope with the fact that we cannot undo or reverse the flow of time. We cope by converting it into social and performative time: forms of subjective and narrative time” (2013:3). Other “technologies” arising in the twenty-first century include natural burials or eco-friendly green options for ritualization (Harris 2007).
technologies promise to continue reshaping ritual involvement in the decades ahead (Hoy 2008:34-135).

Given a postmodern cultural ethos that gave birth to deritualization, a paradigm of comforting presence that employed sustainability measures was well-suited to guide caregivers in meeting the needs of bereaved families with meaningful post-mortem rituals (i.e. re-ritualization) that engendered comfort, wholeness, and hope within the processes of suffering and the adaptation of loss.

- **A Weak Ecclesiology for Community Engagement**

Not only was funeral service sustainability a potential obstacle to the implementation of a paradigm of comforting presence, bereavement professionals also needed to improve a weak ecclesiology for community engagement. While one obstacle to implementing a new paradigm addressed the realm of funeral service, a second major obstacle of the study addressed the realm of the church – in particular the need for a vibrant and integrated ecclesiology of community engagement among bereavement practitioners.

To address the relationship between a paradigm of comforting presence and an ecclesiology of community engagement, the study suggested that integrated faith-based communities were essential for an effective ministry of bereavement care. In this way, an ecclesiology of community engagement recognized the value of a network of caregivers that included vocational pastors (and those in lay leadership), funeral directors, and other grief and bereavement organizations. To be clear, a more proactive effort was needed among bereavement caregivers to develop and work within networks of local faith-based communities. In short, one implication of a paradigm of comforting presence was the need to address a significant barrier in community perceptions of who and where to turn for assistance in navigating through grief and loss. In a postmodern age, where deritualization was an entrenched practice in responding to death, who do families and individuals turn to when faced with the death of a significant other (Doehring 2015)?
Chapter 5: Conclusions and Implications

In the past, the traditional approach to grief and loss presupposed a mutual collaboration among clergy, church communities, and funeral homes. In today’s context of deritualization, the traditional presupposition was no longer valid. For example, when a family experienced the death of a loved one, a presupposition was no longer made that a family would call upon their pastor, a local church, or even a local funeral home for assistance. In this way, a bereaved family could have simply contacted a body disposal organization that specializes in low-cost immediate burials or direct cremations, and therefore not have a plan for bereavement support available to them. In decades prior to the twenty-first century, when a funeral director met with a family to plan funeral events, the director would ask the family of the name of their pastor in order to follow up with the details of the planned services. Today, many families who call upon a funeral home for assistance were without the support of a local church community. In terms of assisting a non-churched family, funeral directors were challenged to appropriate the full benefits a paradigm of comforting presence was designed to offer without the cooperative assistance of vocational pastors. Families without ecclesial support were less inclined to enter into meaningful ritualization without the aid of a pastoral guide (Fowler 2004).

One way forward to address the obstacle of a weak ecclesiology was to take a cue from constructivist psychology and business marketing vernacular in terms of a community “branding” initiative. In branding, the issue was what comes to mind when an individual or family thinks about a given group or organization – not what an organization thinks about itself. For example, when a family entered into grief and loss, what sources of bereavement support come to mind? To this end, what are the faith-based communities in a local town or city doing to communicate the message that compassionate bereavement support services were available – that individual churches were equipped to provide comfort to the bereaved in grief and suffering? Kelly contended that one of the most significant and relevant functions the church should have within twenty-first century Western society was “helping individuals, families, and
communities, both local and global, ritually mark the lives and deaths of significant others” (2008:vii). Similarly, funeral homes needed to combat any negative perceptions of being perceived as merely profit driven organizations by intentionally advancing their establishment as key resource centers of nurturing care within the community (Desmond 2014; Whitaker 2014).

Rebranding perceptions were certainly needed among ecclesial communities to communicate loving concern for the bereaved. The funeral industry was not the only entity that had lost cultural authority by the beginning of the twenty-first century. Churches, who once held significant cultural power and centralized community presence, now faced challenges to foster perceptions of being trusted places for care and relevancy. Certainly a paradigm of comforting presence, with a focus on knowing, being, and doing functions of bereavement care, required churches and pastors to rethink how the unchurched bereaved could be better attended to in times of need. In terms of an effective ecclesiology of bereavement ministry, what local churches were reaching out beyond church walls to offer care for an unchurched family who faced grief – sometimes even without ritual, ceremony, or support?

One option for rebranding was for local churches to move beyond clerical paradigms of ministry that focused too heavily on kerygmatic approaches to care. Instead, local churches were encouraged to develop laity for involvement in bereavement care as well. Lay bereavement programs and support groups were encouraged to identify and equip gifted members for care, as well as to promote the availability of community-wide bereavement care services. In addition, clergy were implored to cooperate with funeral professionals in advancing their learning about grief and bereavement care, and by imagining new possibilities for reaching hurting families in times of need.

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170 One example considered for church use was the Stephens Ministry programs to equip local churches for improved bereavement care (www.stephenministries.org).
For funeral service providers, rebranding was strengthened by an ecclesiology of bereavement ministry by extending intentional effort to connect with other community care providers, including local churches, hospice groups, and grief and bereavement organizations. The implications of rebranding could indeed be costly, as funeral homes needed to create new advertisements and promotional pieces that were not always about sales initiatives and cost savings, but about true grief care (Bouton 2013). Within a paradigm of comforting presence, funeral homes also needed to consider changes to their existing facilities. Outdated chapels, lobby furnishings, arrangement conference rooms, and merchandise selection rooms were needed to be repurposed or altered in many cases in order to communicate a clear and consistent message of comforting care. To be sure, funeral homes and churches were not purported to compete for the care of bereaved families, but to involve all parties in a process of what Kelly referred to as the co-construction of funerals (2008:66).

Finally, as local churches and funeral homes were rebranded as important centers for nurturing bereavement care, caregiving practitioners would need due diligence to care for themselves as well. Unfortunately, many funeral directors and vocational pastors often neglected the need to care for themselves – including sufficient time for rest. In this regard, neglect for caregivers further weakened an ecclesiology of bereavement ministry. Without adequate self-care, bereavement caregivers were not truly present with those in need of caregiving. As a result, caregivers within a community who faced certain frustration and burnout, could not adequately apply “an informed there-ness” in a paradigm of comforting presence. The study therefore recommended

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171 Some rebranding examples using content marketing that were initiated by the researcher in his funeral establishment as an extension of the current research included (1) disseminating grief resource booklets written by a grief psychologist to area churches to address specific bereavement needs (e.g. loss of a parent, loss of a spouse, loss of a child, loss of a pet companion, etc.), (2) training funeral staff in current grief theory, (3) designing a lending library of grief books for the community, (4) providing free grief resources to local libraries and community hospice organizations, (5) writing a grief column for the local newspaper, (6) developing holiday grief programs, and (7) spotlighting quality grief support information on the company’s website (Pulizzi 2016; Handley and Chapman 2012).
to use the efforts that were made to rebrand funeral homes and churches as an opportunity to initiate new programs to care for the caregivers as well. Caring for the caregivers was an important task not only in the rebranding process, but in strengthening an area’s ecclesial footprint toward thriving bereavement care ministries (Wolfelt 2012).

Inquiries for Further Research

Step 7 of the Oxford IDR model also necessitated raising new questions and continuing ongoing learning as a part of evaluating the research. Therefore, the study returned to what was made clear in the literature review (i.e. the hermeneutical component) regarding how the disciplines of funeral service, bereavement psychology, and practical theology converged around the significance of meaning for effective nurturing care. To reiterate the three disciplinary discoveries, funeral service was poised to reengage grieving families with a better focus on meaningful caregiving; bereavement psychology arrived at the need for meaning-reconstruction; and practical theology signified the importance of meaning-reframing in pastoral care. The study preferred to describe this interdisciplinary convergence as a confluency of meaning. The empirical part of the study used findings from semi-structured interviews of a mortuary college and Christian university to propose tentative conclusions that would contribute to a practical theology of compassionate bereavement caregiving. In this regard, the study made a case for a paradigm of comforting presence that emphasized the importance of knowing, being, and doing functions in the pastoral care of the bereaved. Recognizing the impact of deritualization on traditional forms of burials and processes of grief and mourning, these caregiving functions guided caregivers well by providing comforting information, comforting dialogue, and comforting activity (i.e. what was collectively deemed an “informed there-ness”) to the bereaved who needed assistance with post-mortem ritualization. Therefore, to advance the conclusions with further inquiries in the development of a practical theology of bereavement caregiving, it was important to see how the research as a whole was brought together by both the hermeneutical and ethnographical methods utilized in the study. Figure 27 below illustrated the synthesis of how both qualitative research components were brought together for improved praxis.
In considering inquiries for further research, a key question given the synthesis of findings was how did the current study shed new light on what a philosophy of meaning-reframing and a paradigm of comforting presence within a contemporary American context entail? Further research was obviously needed to explore how these critical insights could be embedded in cultural dynamics including the impact on pastoral caregiving among practitioners.

One possible avenue for further discovery that built upon the findings of the current study was a need for a comprehensive organizing model for nurturing care in an increasingly pragmatist and secularized environment. What was needed was further research that employed a meta-theoretical framework in deference to a philosophy of meaning-reframing and a paradigm of comforting presence that recognized the full scope of bereavement caregiving in light of the phenomenon of the deritualization of death. To be clear, a meta-theoretical framework was suggested as a means to improve collaboration among practitioners – not only funeral directors and pastors, but also hospital chaplains, hospice workers, and grief specialists.

A META-THEORETICAL FRAMEWORK FOR AN ECCLESIOLOGY OF EFFECTIVE BEREAVEMENT CARE
Stated from a Christian perspective, what was needed was a comprehensive ecclesiology of community engagement to minister to the bereaved – both those within local church communities as well as the growing number of people without church affiliation and support. More specifically, the research made clear that a meta-theoretical framework included a spectrum of opportunities for creative collaboration, such as before death care (pre-need), at the time of death care (at-need), and after
death care (post-need or simply after-care). In this way, a paradigm of comforting presence served as a hermeneutical spiral in each domain, where caregivers provided guidance to families through an informed there-ness (i.e. knowing, being, and doing functions of pastoral care).

What was important to note was that the Christian perspective taken by the research was consistent with a meta-theoretical framework for bereavement care (Thesnaar 2010). The logic of the model was intentionally designed to correspond well with the long history of funerals and lament as normative Christian practices of care (Edgar 1966). The practical theology that was surfaced in the study suggested that Christianity was not exclusively about a set of religious doctrines alone, but was profoundly expressed in the pattern of practical daily living: “there are Christianly patterns of living, and there are Christianly patterns of dying and caring for the dead” (Long 2009:8). To be sure, Christian practices have long ministered to bereaved families before, during, and after the death of a dearly departed loved one. In this way, the cumulative movement from pre-need to at-need to after-care were not arbitrary markers framed exclusively by funeral industry vernacular. Instead, the movement of a meta-theoretical framework for bereavement care corresponded well with Christian ecclesiology.

Long described the rich heritage of Christian bereavement care as pure community theatre: “The mourners need to be assured, the church needs to remember, the world needs to be told, that death does not speak the final word” (2009:94). As a means of hospitable outreach (not necessarily subsumed by proselytization), an ecclesiology supportive of bereavement care was predicated upon the church serving the world as an extension of the ministry of Christ (Grenz 1994:505-510). Bereavement care was
not therefore ancillary to ecclesiology, but remained at the center of Christian ministry itself. Long explained:

Many of us parsons find ourselves absorbed by the power of funerals because this is often where we find ourselves the most useful. Sunday sermons, baptisms, confirmations, weddings, welcoming new members to the community, watching sadly as others moved or drifted away. This is the stuff of ministry, and ministers soon discover that it’s cumulative, that it builds toward the time when the lives given to us by God are given back. It surprised me, indeed it almost always surprises young pastors, to discover that faith’s message about life is nowhere more clearly brought to completion than at the time of death (Long and Lynch 2013:45-46). 173

Being careful to respect the findings of the current study by not limiting compassionate Christian caregiving to the clergy or kerygmatic proclamation alone (i.e. a funeral sermon), an ecclesiology of care has historically involved a family motif as “brothers and sisters in Christ” join together to support and encourage one another. Just as the Apostle Paul admonished the whole church of the Thessalonians, not just the pastors and teachers: the family of God must “comfort one another” in times of grief and loss (1 Thessalonians 4:18 NASB). Though there were certainly a myriad of denominational affiliations and perspectives that espouse a particular funeral liturgy, bereavement ministry itself was truly foundational in Christian thought and practices. As Jesus stated in the Beatitudes: “Blessed are those who mourn, for they will be comforted” (Matthew 5:4 NRSV).

The study therefore provided theological insights into what a meta-theoretical framework would look like within an ecclesiology of community engagement. A key was to connect both a confluency of meaning (i.e. a philosophy of meaning-reframing)

173 In terms of a Christian who has died, Long connected the dramatic narrative of death to baptism: “A Christian funeral is a continuation and elaboration of the baptismal service. If baptism is a form of worshipful drama performed at the beginning of the Christian life, a funeral is – or should be – an equally dramatic, and symmetrical, performance of worship performed at the end of life” (2009:81).
and a paradigm of comforting presence to a comprehensive narrative approach to bereavement care (see Figure 28 below). Narratives and meaning-reframing appeared to be inextricably connected to bereavement caregiving and pastoral care (Kelley 2010; Neimeyer 1999; Neimeyer 2011; Capps 1990). At whatever entry point a family needed bereavement support, whether it was before a death occurred (i.e. writing one’s story), at the time death occurred (i.e. sharing one’s story), or even months after a death occurred (remembering one’s story), caregiving may be improved by a meaningful pastoral dialogue informed by a practical theology that attended to the significance of one’s personal story. As Stairs asserted: “to be a person is to have a story to tell” (2000:17).

![Figure 28: A Meta-Theoretical Framework for Bereavement Care](image)

Before a death occurred, a family worked together whenever possible in planning to frame a meaningful reality – the story to be told and honored about one’s life and

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174 Drawing on insights from biology, psychology, and neuroscience, Gottschall pointed to the universal story grammar built into the DNA of all human beings, suggesting that people spend half of their waking hours – about one-third of their lives – telling themselves stories through daydreams about the past and future, as well as the mere mundane (approximately 2,000 daydreams per day per person) (2013:11). Gottschall satirically concluded that “the way we experience story will evolve, but as storytelling animals, we will no more give it up than start walking on all fours” (2013:199).
legacy. During the initial days of acute loss, a family who experienced a meaningful, albeit changed reality, sought opportunities to assuage suffering through ceremony, rituals, and events. Following the death and disposition of a loved one, a family reframed a new meaningful reality to integrate the loss into life. In this way, both the framing and reframing of meaning of one’s personal life narrative was brought into sharp focus as a means for pastoral caregivers to demonstrate a comforting presence that would aid in emotional and spiritual well-being amid the existential realities and challenges of life.\textsuperscript{175}

To provide one example of care before a death occurred, bereavement caregivers were implored to offer education on the value of funeral services and rituals that would be meaningful to a particular family at the time of need. Preneed was not merely about selecting and paying for a casket in advance; instead, for families who had the time and opportunity to do so, preneed became a means for a family to think through the care they would need when a loss occurred. Educational courses were not limited to funeral service establishments, but also included local churches who took seriously the ministry of bereavement care. An ecclesiology of bereavement care could presumably ensure that one connected his/her story with God and ultimate meaning (Kelley and Chan 2012). One way to conceptualize the pastoral direction in the preneed process was in terms of writing one’s life story that would be honored and celebrated when death occurred as a means to initialize the reframing of life without a loved one. A significant outcome of the study was that advance planning was no longer thought of in terms of what someone wanted for one’s self after death, but what kind of care and support one wanted his/her family to receive when death occurred. A comforting presence was necessary for caregivers, including funeral directors and vocational pastors, to attend to one’s personal narrative in order to plan effective care (and ecclesial support) before a death occurred.

\textsuperscript{175} One possible mode for further research may be to conduct a quantitative study that measured the impact of employing a paradigm of comforting presence on client-family satisfaction in a pre-test/post-test assessment.
Another example was related to at-need bereavement care. Families experiencing a recent loss of a loved one would be cared for by caregivers, both funeral directors and pastors, who hermeneutically pursued understanding a family’s specific needs in order to provide caregiving opportunities that facilitated the internalization of loss during acute grief.\textsuperscript{176} At-need bereavement care at this level involved the sharing of the deceased’s life story as a means to initiate meaning-reframing – that is, considering what life will look like without the deceased after experiencing a meaningful change in reality. Caregivers needed to demonstrate a comforting presence to provide effective at-need bereavement care that would facilitate the meaning-reframing of life among family members and friends most effected by the loss.

In terms of after-care, bereavement caregivers sought opportunities for continued support of families, at least through the first anniversary of loss. Bereavement care involved caregivers assisting families in remembering one’s story to continue the bonds and integrate the loss into a newly framed life. After-care examples included social support groups for widows and widowers, grief booklets, website materials, memorials, holiday and anniversary support, and networking with community bereavement services to name just a few ideas. Further research was needed to explore after-care opportunities to reach families and individuals suffering in grief without adequate support, especially those most impacted by deritualization. Nevertheless, the interplay between a philosophy of meaning-reframing and a paradigm of comforting presence was essential for caregivers to provide improved bereavement after-care that assisted in meaning-reframing.

\textsuperscript{176} One consideration, in lieu of the outdated hierarchal view of services discussed above, was to present a more balanced approach to care that allowed bereaved families to conceptualize the components of a meaningful service for their loved one based upon their actual needs, rather than any prescribed formulas. One of the researcher’s funeral firms, Smith Funeral & Cremation Service, Inc., collaborated with the company, Visual Voice\textregistered, (both located in Maryville, Tennessee) to develop a graphical wall display utilized in arrangement conference rooms that demonstrated at-need caregiving in terms of the five (5) core services discussed in the research: a private family time, a visitation for family and friends, a ceremony to honor life, a place for final disposition, and a gathering and reception. Intentionality was given to display the components horizontally in order to avoid a misleading hierarchal construct that placed a funeral sermon/ceremony at the apex of bereavement care. In this way, bereaved families may at a glance connect the components of a meaningful service with the importance of sharing one’s life story.
A model of bereavement caregiving that was rooted in a needs-based paradigm of comforting presence with deference to the process of meaning-reframing utilized a narrative approach to pastoral care that met families wherever needs emerged, whether before, during, or after a death of a loved one. Bereavement caregiving was not therefore relegated to a mere few days of post death activities, but included preparing for one’s death as well as follow-up care that respected the ongoing phenomenological dynamics of one’s grief journey. Churches and faith-based organizations were implored to engage in ministries that supported bereaved families before and after the experience of loss. Normative grief care in this way offered both funeral professionals as well as vocational pastors and churches a framework to engage in comprehensive bereavement care.

Though practical theology provided clear direction and encouraging possibilities in terms of improving contemporary bereavement care in the United States, a concern of the research was one of gradual implementation. To be clear, challenges certainly faced an implementation of a practical theology of caregiving for the bereaved. Further research was needed to evaluate how a philosophy of meaning-reframing and a paradigm of comforting presence could be advanced among current practitioners at the grassroots level. Case studies were a possible avenue to assess the effectiveness of a narrative approach to care (Ganzevoort 2011). Further hermeneutics and ethnographic studies with actual bereavement care practitioners were needed to measure in both quantitative and qualitative terms how well a paradigm of comforting presence addressed the obstacles of funeral service firms sustainability and a weak ecclesiology of community engagement after employing meaning-reframing within a paradigm of comforting presence. Also, if case studies at the micro-level demonstrated improved effectiveness among bereavement caregivers, additional research was needed to assess at a macro-level the possibilities and implications that insights from meaning-reframing within a comforting presence paradigm may bring to the higher structural levels of funeral service care, including educators, regulators, non-profit organizations, and sectarian church collaboration.
5.6 Summary

Using the theoretical framework outlined by the Oxford IDR model and the LIM model of practical theology, the current chapter provided a discussion of how the findings of the study applied in real-world social dimensions. After summarizing the research findings from the six (6) research questions, tentative conclusions were provided in terms of the strengths, weaknesses, opportunities, and threats facing funeral directors and vocational pastors. By considering the social orthopraxis of the research in terms of practical, pastoral, and proclamatory care, a case was made for a paradigm of comforting presence informed by a Louwian view of practical theology. In specific terms, the applied research argued for the hermeneutics of a comforting presence to connect comforting information and comforting dialogue with comforting activity in terms of meaningful ritual. In addition, the study evaluated two (2) obstacles to orthopraxis, including funeral service sustainability and a weak ecclesiology of community engagement. The chapter concluded by identifying new inquiries for continued learning by synthesizing how a philosophy of meaning-reframing and a paradigm of comforting presence, both significant findings from the qualitative methods of the study, were connected to an updated comprehensive philosophy of bereavement care. One decisive implication of the study was the proposal of a meta-theoretical framework that utilized a narrative approach to bereavement care among a collaboration of practitioners before, during, and following the death of a loved one. Further studies were recommended to assess quantitative and qualitative evidence for the effectiveness of applying meaning-reframing within a paradigm of comforting presence among bereavement practitioners. In addition, the study suggested that future research and learning was needed to assess the validity of the current research findings applied to the higher structural levels of bereavement care, including educators, regulators, and local church-based collaborative efforts. In summary, the conclusions and implications of the research provided an informed Christian interdisciplinary understanding that contributed toward a practical theology of caregiving for the bereaved.
Appendix A

Departmental Ethics Screening Committee Ethical Clearance

6.1 PhD Ethical Clearance Correspondence

Lynn Gibson

From: Hansen, Dr <ldhansen@sun.ac.za> <ldhansen@sun.ac.za>
To: Lynn@smithlifeandlegacy.com
Subject: PhD ethical clearance
Attachments: DESC Checklist.doc; stellenbosch university informed consent 2009.doc

Dear Lyn

I am on the staff of the Faculty of Theology and am the person responsible for assisting students in obtaining ethical clearance for their empirical work. Professor Louw, your supervisor, has contacted me in this regard. In light of what he has told me about your research, I understand it to be low risk research, so this will only need a shortened process. This entails the following: I need the following documentation from you:

1) Your final research proposal.
2) A completed Departmental Ethics Screening Committee form (DESC form) which I attach here. If there is anything you do not know the answer to or are uncertain about, please contact me or leave it out and I will complete those questions. This form has to be signed by you – electronic signature will be good. All the other signatures (supervisor, head of department etc.) I will get, so do not worry about those.
3) A list of questions that will be put to the participants – Prof Louw showed me the suggested questions (three broad categories), and this will be good. Just send me an electronic version of these.
4) Since you are going to conduct interviews with representatives of two/three colleges, I will need letters of permission from these colleges that you may conduct the interviews with their staff. The letter must be on the official letterhead of the colleges and must refer to your study (its topic) specifically. It may be a scanned hard copy or an e-mail. If you do not have these, then an undertaking by you (given as answer to the question regarding institutional permission on the DESC form) that this will be obtained and forwarded to the DESC will suffice, as long as you obtain this before you start the interviews.
5) I also attach the SU informed consent template here. Please add the details of your project to it and return it to me. This will be the form each individual participant has to sign before the interview starts. The completed forms you will keep on your files. The DESC only needs to see the completed template to make sure everything is covered in it as suggested.

For the DESC process it is not necessary for the application to serve before the central Research Ethics Committee for a full review. One of the members of that committee only has to look at the DESC decision and has to ratify it. It does also mean that you may commence with your empirical work in the meantime pending this ratification.

Hope this is clear. Do contact me you have any other questions and best wishes for what sounds like a very interesting study.

Regards

Len Hansen

Dr LD Hansen

Research Development and support
Navorsingsontwikkeling en -steun

UNIVERSITEIT STELLENBOSCH

Fakulteit Teologie/Faculty of Theology

Dorpsstraat 171 Dorp Street,
Stellenbosch 7600
Tel: +27 21 808 9041
Fax/Telefax: +27 21 808 3051
Sat/Cell: +27 84 310 316
Appendix A: Ethical Clearance Documentation

Lynn Gibson

From: Lynn Smith Life and Legacy <lynn@smithlifeandlegacy.com>
Sent: Thursday, June 19, 2014 2:30 PM
To: idhansen@sun.ac.za
Subject: RE: PhD ethical clearance
Attachments: GIBSON Interview Plan APPROVED.doc; SU Consent Form GIBSON.doc; GIBSON Research Proposal APPROVED.doc; GIBSON DESC Form.pdf

Dr. Hansen,

Attached you should find the documentation you requested.

1. A Final Copy of My Research Proposal
2. Completed Departmental Ethics Screening Committee Form (DESC)
3. Interview Questionnaire
4. I have submitted a request for my first interview participant. I am currently awaiting a letter of permission from Steve Spann of Gupton College.
5. SU Consent template.

Please let me know if I need to make changes to the attachments, or if you need further information from me. I look forward to receiving full ratification from SU for my empirical work.

I greatly appreciate your time and efforts in support of my research.

Kindly,

Lynn

C. Lynn Gibson, DPhil, CFSP
Maryville, Tennessee USA

From: idhansen@sun.ac.za [mailto:idhansen@sun.ac.za]
Sent: Sunday, June 15, 2014 11:23 AM
To: Lynn Smith Life and Legacy
Subject: Re: PhD ethical clearance

Dear Lynn

No problem. Just send on the documentation when you have gotten to it.

Best wishes

Len Hansen

Sent from my BlackBerry 10 smartphone.
Appendix A: Ethical Clearance Documentation

Lynn Gibson

From: Hansen, LD, Dr <ldhansen@sun.ac.za> <ldhansen@sun.ac.za>
Sent: Thursday, July 03, 2014 7:52 AM
To: Lynn Smith Life and Legacy
Subject: RE: Clarification of Requirements for Interviews

Hi Lynn

Perfect. Get the letter (only one per institution regardless how many participants from that interview you will use) and each participant’s signature and (ethically ☑️) you’re set. Best wishes for this part of the research!

Len Hansen

Dr LD Hansen
Research Development and support
Navorstingsontwikkeling en -stuur

From: Lynn Smith Life and Legacy [mailto:lynn@smithlifeandlegacy.com]
Sent: 03 July 2014 06:50
To: Hansen, LD, Dr <ldhansen@sun.ac.za>
Subject: Clarification of Requirements for Interviews

Good Evening Dr. Hansen,

I have secured my first campus interview (time and location) for next week with Steven Spann, the president of a mortuary college in Nashville, Tennessee. I wanted to make sure that I have the required information needed for my ethical clearance. You indicated in a prior email that you would like for me to have the college representative to provide me with a letter of permission for the interviews (on the school letterhead). I will secure this before I start the interview. In addition, I noted that I have a Consent to Participate template for each participant as well. So, to review, I want to make sure that I am getting the required information – which, if I understand this correctly, includes both a Letter of Permission for the interview, as well as a SU Consent Form. Can you confirm this for me?

I really appreciate your assistance, and look forward to making further progress with my research.

Kindly,

Lynn
Appendix A: Ethical Clearance Documentation

Lynn Smith Life and Legacy

From: Hansen, LD, Dr <ldhansen@sun.ac.za> <ldhansen@sun.ac.za>
Sent: Thursday, July 10, 2014 6:36 AM
To: Lynn Smith Life and Legacy
Subject: RE: Permission Letters

Perfect, thanks Lynn. Glad to hear it went well. I will add the letters to my records and keep a set for yours as well.

Best

Len Hansen

From: Lynn Smith Life and Legacy [mailto:lynn@smithlifeandlegacy.com]
Sent: 09 July 2014 16:49
To: Hansen, LD, Dr <ldhansen@sun.ac.za>
Cc: Louw, DANIEL <dlj@sun.ac.za>; Thesnaar, CH, Prof <cht@sun.ac.za>
Subject: Permission Letters

Dear Dr. Hansen,

Attached you will find a signed Letter of Permission and a signed Participant Form for my pilot study. The interview went very well. I still need to transcribe the interview recording and process my findings, but the initial interview was well-received, and provided me with great information. I believe the day was very successful. Thank you for your assistance in helping me progress with my research.

Kindly,

Lynn

Lynn Gibson, DPhil, CFSP
Maryville, Tennessee, USA
The integrity and confidentiality of this email is governed by these terms / Hierdie terme bepaal die integriteit en vertroulikheid van hierdie e-pos. http://www.sun.ac.za/emailldisclaimer
6.2 **Signed Letters of Permission and Participant Forms**

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**John A. Gupton College**

1616 Church Street • Nashville • Tennessee 37203 • (615)327-3927 • Fax (615)321-4518

www.guptoncollege.edu

July 8, 2014

Dear Dr. Gibson,

This letter is to confirm that John A. Gupton College, in Nashville, Tennessee, is willing to participate in a pilot study in support of your research at Stellenbosch University. I acknowledge that the topic of the study is: The De-ritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved.

We will be delighted to participate in a study that will benefit professional funeral service practitioners. Please just let me know how you would like to proceed with the study.

Sincerely,

B. Steven Spann
President
Appendix A: Ethical Clearance Documentation

Title of Study:
The Deritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved

Research Population / Participants:
- John A. Gupton College
  1616 Church Street, Nashville, Tennessee 37203
  President, B. Steven Spann; Telephone: 1-615-327-3927
  Website: http://www.guptoncollege.edu/

You are asked to participate in a research study conducted by C. Lynn Gibson, DPhil, CFSP, from the Department of Theology at Stellenbosch University. The results and findings of the study will be contributed to a doctoral dissertation. You were selected as a possible participant in this study because of your school’s reputation and the valued insight you can provide to this important study.

1. PURPOSE OF THE STUDY

The purpose of the study is to research the current cultural shift toward deritualizing death. The study suggests that deritualization is a multifaceted concern that may inhibit grief adaptation among the bereaved. In deference to the problem of deritualization, the research question is: What is the possible impact of deritualization on the interplay between loss, bereavement and the spiritual realm of coping mechanisms, i.e. the challenge to meaning-reframing and the internalization of loss within the existential realities of life? The research is designed to elucidate a deeper understanding of the complexities of the problem of deritualization in order to better address the needs of those who have experienced death without funeral services and ceremony.

2. PROCEDURES

If you volunteer to participate in this study, we would ask you to do the following things:

1. Consent in writing (on your school’s letterhead) to participate in a face-to-face interview.
2. As a convenience, the interview will occur at the participant’s office or location of choice.
3. The length of time for the entire interview will be no more than one and a half hours (i.e. a maximum of 90 minutes).
Appendix A: Ethical Clearance Documentation

3. POTENTIAL RISKS AND DISCOMFORTS

In this particular study, there are no foreseeable risks, discomforts, or inconveniences that are reasonably expected. However, if the participant needs to reschedule the interview for a later date than has been agreed upon, for whatever unforeseen reason, he/she may do so.

4. POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY

The research has potential benefits for bereavement caregivers in the applied disciplines, the social sciences, and the humanities. By approaching the research from an interdisciplinary perspective, research findings will make a significant contribution to the fields of funeral service, the psychology of grief and bereavement, and practical theology.

In terms of funeral service, the research will provide guidance for the industry that will address the paucity of best practices regarding aftercare services for families facing the realities of death, particular those who have chosen minimal or no funeral ceremonies. Mortuary colleges will also benefit from the research by understanding how best practices may be updated and incorporated into the formal programs of study.

The research will also contribute to the field of grief and bereavement psychology by providing grief and bereavement professionals with a thicker description of families who, after being affected by deritualization, will need professional assistance to process the losses absent of normative transitional rituals.

The field of practical theology will also benefit from the research as it offers a cultural portrait of an emerging context in need of pastoral care. As the church is continually faced with ministering to a host of both old and new needs of both their own members, as well as those outside of their local fellowships, Christian leaders are implored to face their respective ministries with an intelligent and empowering praxis. The research into the problem of the deritualization of death proposes a trajectory for effective praxis within the church as pastors are better prepared to aid in the support and care of the bereaved.

5. PAYMENT FOR PARTICIPATION

There will be no payment for participation in this research.

6. CONFIDENTIALITY

Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law. Confidentiality will be maintained by means of encrypted password-protected data files in the sole possession of the researcher, including interview recordings, transcribed notes, and further documentation.

The participants of this study are permitted to review and edit any audio recordings used in the interview process.

The findings of the study will eventually be published in a doctoral dissertation. Possible journal articles and/or full-length texts could emerge from the research findings as well.

Participants are fully welcome to keep their anonymity throughout this study if they so choose.
7. PARTICIPATION AND WITHDRAWAL

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don’t want to answer and still remain in the study. The investigator may withdraw you from this research if circumstances arise which warrant doing so.

8. IDENTIFICATION OF INVESTIGATORS

If you have any questions or concerns about the research, please feel free to contact C. Lynn Gibson at 865-414-5070, or email to lynn@smithlifeandlegacy.com. The researcher can also be reached by mail at: 1141 Heathmoor Ct, Maryville, TN 37803.

9. RIGHTS OF RESEARCH SUBJECTS

You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as a research subject, contact Ms Meléne Fouche [mfouche@sun.ac.za; 021 808 4622] at the Division for Research Development.
Appendix A: Ethical Clearance Documentation

SIGNATURE OF RESEARCH SUBJECT OR LEGAL REPRESENTATIVE

The information above was described to me by C. Lynn Gibson in English and I am in command of this language or it was satisfactorily translated to me. I was given the opportunity to ask questions and these questions were answered to my complete satisfaction.

I hereby consent voluntarily to participate in this study. I have been given a copy of this form.

Steve Spann
Name of Subject/Participant

Name of Legal Representative (if applicable)

Signature of Subject/Participant or Legal Representative

Date

SIGNATURE OF INVESTIGATOR

I declare that I explained the information given in this document to Steve Spann and/or his representative NA. He was encouraged and given ample time to ask any questions. This conversation was conducted in English no translator was used.

C. Lynn Gibson
Signature of Investigator

Date
October 20, 2014

Dear Dr. Gibson,

This letter is to confirm that the Cincinnati College of Mortuary Science, in Cincinnati, Ohio, is willing to participate in a study to support your research at Stellenbosch University. I acknowledge that the topic of the study is: The De-ritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved.

I look forward to our interview together in the near future. I will be delighted to participate in the study that will benefit professional funeral service practitioners.

Sincerely,

Teresa Dutko, M.A., FT
Faculty, CCMS
Fellow in Thanatology
Appendix A: Ethical Clearance Documentation

Title of Study:
The Deritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved

Research Population / Participants:
- Cincinnati College of Mortuary Science
  645 West North Bend Road, Cincinnati, Ohio 45224
  Faculty, Teresa Dutko; Telephone: 1-888-377-8433
  Website: http://www.cccs.edu/

You are asked to participate in a research study conducted by C. Lynn Gibson, DPhil, CFSP, from the Department of Theology at Stellenbosch University. The results and findings of the study will be contributed to a doctoral dissertation. You were selected as a possible participant in this study because of your school's reputation and the valued insight you can provide to this important study.

1. PURPOSE OF THE STUDY

The purpose of the study is to research the current cultural shift toward deritualizing death. The study suggests that deritualization is a multifaceted concern that may inhibit grief adaptation among the bereaved. In deference to the problem of deritualization, the research question is: What is the possible impact of deritualization on the interplay between loss, bereavement and the spiritual realm of coping mechanisms, i.e. the challenge to meaning-reframing and the internalization of loss within the existential realities of life? The research is designed to elucidate a deeper understanding of the complexities of the problem of deritualization in order to better address the needs of those who have experienced death without funeral services and ceremony.

2. PROCEDURES

If you volunteer to participate in this study, we would ask you to do the following things:

1. Consent in writing (on your school's letterhead) to participate in a face-to-face interview.
2. As a convenience, the interview will occur at the participant's office or location of choice.
3. The length of time for the entire interview will be no more than one and a half hours (i.e. a maximum of 90 minutes).
3. POTENTIAL RISKS AND DISCOMFORTS

In this particular study, there are no foreseeable risks, discomforts, or inconveniences that are reasonably expected. However, if the participant needs to reschedule the interview for a later date than has been agreed upon, for whatever unforeseen reason, he/she may do so.

4. POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY

The research has potential benefits for bereavement caregivers in the applied disciplines, the social sciences, and the humanities. By approaching the research from an interdisciplinary perspective, research findings will make a significant contribution to the fields of funeral service, the psychology of grief and bereavement, and practical theology.

In terms of funeral service, the research will provide guidance for the industry that will address the paucity of best practices regarding aftercare services for families facing the realities of death, particular those who have chosen minimal or no funeral ceremonies. Mortuary colleges will also benefit from the research by understanding how best practices may be updated and incorporated into the formal programs of study.

The research will also contribute to the field of grief and bereavement psychology by providing grief and bereavement professionals with a thicker description of families who, after being affected by deritualization, will need professional assistance to process the losses absent of normative transitional rituals.

The field of practical theology will also benefit from the research as it offers a cultural portrait of an emerging context in need of pastoral care. As the church is continually faced with ministering to a host of both old and new needs of both their own members, as well as those outside of their local fellowships, Christian leaders are implored to face their respective ministries with an intelligent and empowering praxis. The research into the problem of the deritualization of death proposes a trajectory for effective praxis within the church as pastors are better prepared to aid in the support and care of the bereaved.

5. PAYMENT FOR PARTICIPATION

There will be no payment for participation in this research.

6. CONFIDENTIALITY

Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law. Confidentiality will be maintained by means of encrypted password-protected data files in the sole possession of the researcher, including interview recordings, transcribed notes, and further documentation.

The participants of this study are permitted to review and edit any audio recordings used in the interview process.

The findings of the study will eventually be published in a doctoral dissertation. Possible journal articles and/or full-length texts could emerge from the research findings as well.

Participants are fully welcome to keep their anonymity throughout this study if they so choose.
Appendix A: Ethical Clearance Documentation

7. PARTICIPATION AND WITHDRAWAL

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don’t want to answer and still remain in the study. The investigator may withdraw you from this research if circumstances arise which warrant doing so.

8. IDENTIFICATION OF INVESTIGATORS

If you have any questions or concerns about the research, please feel free to contact C. Lynn Gibson at 665-414-5070, or email to Lynn@SmithLifeandLegacy.com. The researcher can also be reached by mail at: 1141 Heathmoor Ct, Maryville, TN 37803.

9. RIGHTS OF RESEARCH SUBJECTS

You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as a research subject, contact Ms Maléne Fouché [mfouche@sun.ac.za; 021 808 4622] at the Division for Research Development.
Appendix A: Ethical Clearance Documentation

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**SIGNATURE OF RESEARCH SUBJECT OR LEGAL REPRESENTATIVE**

The information above was described to me by C. Lynn Gibson in English and I am in command of this language or it was satisfactorily translated to me. I was given the opportunity to ask questions and these questions were answered to my complete satisfaction.

I hereby consent voluntarily to participate in this study. I have been given a copy of this form.

**TELESA L DUKE**

Name of Subject/Participant

**Name of Legal Representative (if applicable)**

**Signature of Subject/Participant or Legal Representative**

Date

**Name of Subject/Participant**

**Name of Legal Representative (if applicable)**

**Signature of Subject/Participant or Legal Representative**

Date

---

**SIGNATURE OF INVESTIGATOR**

I declare that I explained the information given in this document to Teresa Dutko. She was encouraged and given ample time to ask me any questions. This conversation was conducted in English; no translator was used.

**C. Lynn Gibson**

Signature of Investigator

Date

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November 6, 2014

Dear Dr. Gibson,

This letter is to confirm that Johnson University in Knoxville, Tennessee is willing to participate in a study in support of your research at Stellenbosch University. I acknowledge that the topic of the study is “The De-ritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved.”

I am delighted to participate in a study that will benefit bereavement professionals and improve pastoral care. Thank you for including me and Johnson University as part of your important study.

Sincerely,

David Wheeler
Associate Professor
Johnson University
Appendix A: Ethical Clearance Documentation

STELLENBOSCH UNIVERSITY
CONSENT TO PARTICIPATE IN RESEARCH

Title of Study:
The Deritualization of Death: Toward a Practical Theology of Caregiving for the Bereaved

Research Population / Participants:
- Johnson University
  7900 Johnson Drive, Knoxville, Tennessee 37998
  Associate Professor, David Wheeler; Telephone: 1-865-573-4517
  Website: http://www.johnsonu.edu/

You are asked to participate in a research study conducted by C. Lynn Gibson, DPhil, CFSP, from the Department of Theology at Stellenbosch University. The results and findings of the study will be contributed to a doctoral dissertation. You were selected as a possible participant in this study because of your school’s reputation and the valued insight you can provide to this important study.

1. PURPOSE OF THE STUDY

The purpose of the study is to research the current cultural shift toward deritualizing death. The study suggests that deritualization is a multifaceted concern that may inhibit grief adaptation among the bereaved. In deference to the problem of deritualization, the research question is: What is the possible impact of deritualization on the interplay between loss, bereavement and the spiritual realm of coping mechanisms, i.e. the challenge to meaning-reframing and the internalization of loss within the existential realities of life? The research is designed to elucidate a deeper understanding of the complexities of the problem of deritualization in order to better address the needs of those who have experienced death without funeral services and ceremony.

2. PROCEDURES

If you volunteer to participate in this study, we would ask you to do the following things:

1. Consent in writing (on your school’s letterhead) to participate in a face-to-face interview.
2. As a convenience, the interview will occur at the participant’s office or location of choice.
3. The length of time for the entire interview will be no more than one and a half hours (i.e. a maximum of 90 minutes).
Appendix A: Ethical Clearance Documentation

3. POTENTIAL RISKS AND DISCOMFORTS

In this particular study, there are no foreseeable risks, discomforts, or inconveniences that are reasonably expected. However, if the participant needs to reschedule the interview for a later date than has been agreed upon, for whatever unforeseen reason, he/she may do so.

4. POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY

The research has potential benefits for bereavement caregivers in the applied disciplines, the social sciences, and the humanities. By approaching the research from an interdisciplinary perspective, research findings will make a significant contribution to the fields of funeral service, the psychology of grief and bereavement, and practical theology.

In terms of funeral service, the research will provide guidance for the industry that will address the paucity of best practices regarding aftercare services for families facing the realities of death, particular those who have chosen minimal or no funeral ceremonies. Mortuary colleges will also benefit from the research by understanding how best practices may be updated and incorporated into the formal programs of study.

The research will also contribute to the field of grief and bereavement psychology by providing grief and bereavement professionals with a thicker description of families who, after being affected by deritualization, will need professional assistance to process the losses absent of normative transitional rituals.

The field of practical theology will also benefit from the research as it offers a cultural portrait of an emerging context in need of pastoral care. As the church is continually faced with ministering to a host of both old and new needs of both their own members, as well as those outside of their local fellowships, Christian leaders are implored to face their respective ministries with an intelligent and empowering praxis. The research into the problem of the deritualization of death proposes a trajectory for effective praxis within the church as pastors are better prepared to aid in the support and care of the bereaved.

5. PAYMENT FOR PARTICIPATION

There will be no payment for participation in this research.

6. CONFIDENTIALITY

Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law. Confidentiality will be maintained by means of encrypted password-protected data files in the sole possession of the researcher, including interview recordings, transcribed notes, and further documentation.

The participants of this study are permitted to review and edit any audio recordings used in the interview process.

The findings of the study will eventually be published in a doctoral dissertation. Possible journal articles and/or full-length texts could emerge from the research findings as well.

Participants are fully welcome to keep their anonymity throughout this study if they so choose.
7. PARTICIPATION AND WITHDRAWAL

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don’t want to answer and still remain in the study. The investigator may withdraw you from this research if circumstances arise which warrant doing so.

8. IDENTIFICATION OF INVESTIGATORS

If you have any questions or concerns about the research, please feel free to contact C. Lynn Gibson at 865-414-5070, or email to Lynn@SmithLifeandLegacy.com. The researcher can also be reached by mail at: 1141 Heathmoor Ct, Maryville, TN 37803.

9. RIGHTS OF RESEARCH SUBJECTS

You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as a research subject, contact Ms Maléne Fouché [mfouche@sun.ac.za; 021 808 4622] at the Division for Research Development.
Appendix A: Ethical Clearance Documentation

SIGNATURE OF RESEARCH SUBJECT OR LEGAL REPRESENTATIVE

The information above was described to me by C. Lynn Gibson in English and I am in command of this language or it was satisfactorily translated to me. I was given the opportunity to ask questions and those questions were answered to my complete satisfaction.

I hereby consent voluntarily to participate in this study. I have been given a copy of this form.

[Signature]
Name of Subject/Participant

[Signature]
Name of Legal Representative (if applicable)

[Signature] 11/6/14
Signature of Subject/Participant or Legal Representative Date

SIGNATURE OF INVESTIGATOR

I declare that I explained the information given in this document to David Wheeler. He was encouraged and given ample time to ask me any questions. This conversation was conducted in English; no translator was used.

[Signature] 11-6-14
Signature of Investigator Date
Appendix B

Interview Transcripts and Documentation

7.1 Pilot Study Interview

Transcribed Notes from Interview with Steve Spann, President, John A. Gupton College, Tuesday, July 8, 2014, 1PM EST

L: Interviewer, Lynn Gibson; S: Interviewee, Steve Spann

Background and Demographics of the School

L: OK – we are recording now. Let’s jump into this questionnaire. I have looked into the demographics of the school and accreditation. I think I have all of that information from the website. I think I am good on all of that. So, just a few preliminary questions: Do you know the approximate size of the student body?

S: In the fall it is about 140. The small semester is the summer – I’ll have anywhere from 105 to 110.

L: OK – what is the average age of the students?

S: Yes, the average age is about 25; we have quite a few students in the 30 range. And we do have several that are right out of high school.

L: In terms of gender, do you have about half male and half female students?

S: No, we have about 60% female; that just happened about 5-6 years ago.

L: I pulled down from the website the pass/fail rates on the National Board. So, in the comprehensive exam, you have the arts and the sciences sections. I’ve noticed several mortuary colleges have similar patterns that surprised me a bit. Do you have any idea why students score higher in sciences section than in the arts section? I would have thought just the opposite – that grades would have been higher in the arts.

S: When I came here 20 years ago it was different. If you failed something, it would have been the science portion, not the arts. About 6 to 8 years ago, it began to change when they revamped the national exam. I think I know what the reason is. Science is science. I mean, a bone is a bone. The parts of a bone are the parts of the bone, and you can’t change that. Over the years, they have decreased the amount of science on the exam, and increased the amount of tangible things that are more funeral service related. Now, on funeral service, funerals that are held at your place are different than funerals that are held at...
my place. They are different here than they are in California. They are different for blacks and whites. Even families that you meet with are different. Whether families are experiencing this kind of grief or that kind of grief, or whether they are a nuclear family or a whatever. In this case it’s this and in that case it is something else. So what’s the right answer on the test? A bone is a bone…and it don’t change. Does that make sense?

L: Yes it does.

S: So if one of my student fails the test today, I can almost guarantee you that it will be the arts. Now, what else I’ve found is that I have started a few years ago, the funeral director only program. Most of those people are already working in a funeral home. Guess who is scoring higher on the arts side? Those who are in the funeral director only, or those who are in the traditional (associate of arts) program?

L: The funeral director only?

S: Yes! Because they are already working in a funeral home. They are seeing the day in and day out stuff. A good portion of my traditional students are not working in a funeral home. They are going to school full-time. So they are not seeing the day in and day out of the funeral home. You may not think that there would be that much different in the scores on the test…but there is…or there appears to be.

L: It appears that your school’s scores (on the national board exam) are very high.

S: Well, you see, if I don’t keep at least 60% passing over time, I lose my accreditation. I have been doing this for 20 years. And until about 5 years ago, I never saw a school lose their accreditation. Now I sit on the Committee on Accreditation. I am the Chairman of the Committee for the American Board. We’ve taken at least 6 schools in the past 5 years off the list.

L: The students are just not ready to enter the field?

S: Well, they are not passing the exam. Now, they are blaming it on the exam. But in every case, there were issues at the school. The exam is what brought the issues to light. Does that make sense?

L: It does.

S: If you have a large percentage of your students that are consistently failing the exam, there are internal problems in the system somewhere. You know what I’m saying? Someone is asleep at the wheel, or someone is not attending
to things that need tending to. Knock on wood. I’m saying that I don’t ever want that to happen to me. I go off the chair soon, but in my 6 years, in every case, those that lost accreditation, there were other issues.

L: You might be able to even suggest another mortuary college that I could interview. My professors have asked me to secure another school to talk to after we finish this pilot study and learn how I need to adjust some of my questions.

S: Yes! Dennis Smith at Jefferson State in Birmingham would help you. Or, Mike Landon in Fayetteville, North Carolina. Mike Landon was the head of the program there forever. He got me on the board as the chairman after he did it. He would be glad to help you and he would be great.

General Questions of the Educational Program

L: Excellent, thank you! I looked at the course offerings of the school – 62 hours for the Associate of Arts degree, and 30 hours for the Funeral Director Certificate.

S: Yes. The national standard is 60. Ours is 62.

L: Have you changed that in the last 10 years or so?

S: Yes. It has changed considerably. At one time we were about 65 to 68 credit hours. And, you know, they just keep adding things.

L: But it looks like you have actually decreased the hours. What courses have you added or deleted in recent years?

S: We did away with the physical education course. We did away with the art appreciation course. We have been able to put more time into something else. We’ve upped some of our funeral service hours. And, with the addition of what we’ve had to add for cremation and direct burial and that type of stuff. That put us up to the 62 hours. Donna is in the process now of answering a survey from CANA (the Cremation Association of North America). It ticks me off that people look at funeral service curriculum, not ours in particular, and say that they don’t teach anything about cremation. Because they look at the subjects and say that there is not a course on cremation. Well, 60% of the people in the United States are buried. There is not a course on interment either! But…you focus on what you are looking for, not on what’s there. Ya know, funeral director, funeral management, funeral marketing, all of those have cremation in it. Embalming has cremation in it. You still have to pick up the body and disinfect it; you’ve got to dress and got to container – that’s in embalming.
L: Are you saying that a recent survey suggests that mortuary colleges are not even teaching about cremation?

S: Yes, that’s what I fear they will say. She (Donna) is finishing up our survey because CANA wants to know where we are teaching cremation. Now, let me tell you where I think we are lacking. I require every student to complete 25 embalming cases. Duh? How many funerals do I require them to complete? Duh? How many cremations do I require them to complete? Why? I don’t know. That’s the way it has always been. But it is changing. We are now starting in the fall – gonna require every student that comes out of here to be crematory certified and complete 5 cremations before they leave.

L: That’s terrific Steve!

S: The students are getting the funeral experience. We have just not required them to turn it in. Because when they do the practicum, they will work funerals. We just haven’t been requiring them to turn those in as an assignment. Sometimes, your eyes open up, and you wonder why I didn’t I have them do that.

Part I: The Philosophy of Education for Funeral Service

L: OK – we are ready to jump into the key questions. There are about 24 of them. Some of them we may be able to zip through. Others we may want to spend a little more time on. I want you know that there are no right or wrong answers. The first group of them have to do with the philosophy of education. Then we’ll look at understanding bereaved families, caring for bereaved families, and what it means to encounter bereavement. The focus of the study is the pastoral care of families – that is, in broad terms of focusing on the well-being of others who have experienced the death of a loved one. You’ll see what I mean.

L: First question: what do you see as the chief aim or main objective of funeral service? I am talking about the whole profession – not just the mortuary schools. This is what we as funeral directors are attempting to accomplish.

S: The school’s chief aim?

L: Not the school’s, but as actual practicing funeral directors. After the students pass the program and go into the profession.

S: Let me think about how I would state it from that perspective. It is our intention to produce…to provide students that are well-rounded in all aspects of funeral service. Meaning…not just funeral directing; not just embalming; not
just knowing how to communicate and deal with families...somebody that is well-rounded in all of it. Whether they see a family that is black; whether they see a family that is white; whether they see a family that is cremation; whether they see a family that is Church of Christ, or Baptist or whatever. Someone who is well-rounded in having the general aspects of all avenues of funeral service. Because, very few funeral homes only do one aspect of funeral service. They do all aspects of it. And, to make sure the students realize that it is not all suits and Cadillacs. It also includes mowing the yard and cleaning the toilet.

L: Washing the cars?

S: Yes, all of those things. You hope that you produce a student that realizes this. Hearing it is one thing, but realizing it another. And until you go to work at a funeral home, it doesn’t really set in. I can tell you that forever, but until you experiencing it, you won’t realize it. And, to go back to your question – that is what a well-rounded entry-level funeral service person should know.

L: Give me an example.

S: I was up until about 1:30 this morning, putting a man’s head back together. Do my entry level students know how to do that? No. I had one standing with me. He said that you talked about that last semester, but I didn’t realize this was for real. You know what I’m saying? They have to come out of here with an entry-level knowledge, not an “I’m professional at this (attitude).”

L: Ok – the next question. What do you feel should be the minimum educational standard for licensure that adequately prepares a student to enter the field of funeral service?

S: You are asking my opinion?

L: Yes. No right or wrong answer here.

S: Don’t be offended, but in my opinion, no one should be in funeral service without having both licenses.

L: Can you tell me more about that?

S: Yes. I’d love to see us to get to a Bachelor’s Degree. Some day. That would cause us some problems here because we’d have to figure out how to get to a Bachelor’s Degree. But that’s way down the road. The minimum now is the funeral directors certificate.

L: Expand on this a bit.
Appendix B: Interview Documentation

S: Well, here is why I say this. So many people are cremating now and direct disposal now. We don't need the embalmers that we used to need. I agree that we don't down the road. Embalming. But – if there is not a dead body, there is no reason to call you. So somebody has to deal with the dead body. So, in my opinion, everybody should know all of that and then practice what you want to practice as if it is only funeral directing – or if it is only embalming.

L: Is there anything else I should know?

S: Well, for example, that dead body I did last night – someone has got to go to the house and get him off the floor and put him in a body bag and bring him to the funeral home and then…even if he was going to be cremated or direct disposal, which he is not – somebody has to deal with that somewhere to get him in the ground. Ok – that’s more than funeral directing. There are blood-borne pathogens, and things you have to deal with. If there is, that’s more than just funeral directing. So, you asked me my opinion. I don’t want to hurt any feelings, but that’s how I feel. Now, I have a buddy who is an eye surgeon. He didn’t go straight to eye surgery school. He learned to do a lot of things to get to where he wanted to be. Now when he got to where he wanted to be, he specialized. That’s the way I think funeral service ought to be. Learn it all and then choose. I have a lot of students now that say the prep room is where they want to be. There’s my long answer to your short question.

L: Thank you. It sounds like you are saying that you are for more education rather than less.

S: Only because that increases what I’m worth. It does. It increases what you are worth. It increases what we do is worth. The negative side of that is finding somebody who is going to pay for that. But, it took a while…the school didn’t go to an Associate of Arts degree until 1970. The national standard didn’t go to an Associate’s degree until 2001 I think. If it took that many years to get to the Associates degree, you will not be able to jump to the Bachelor’s degree anytime soon.

S: Then you have schools like Jefferson State in Birmingham that if they go to a Bachelor’s Degree, what are they going to do? They are a community college. Community colleges don’t offer Bachelor’s degrees. How are we going to retool to fix this? With me, I’m not sure what we would do. I’d probably go with a 2 plus 2 with Belmont (college) or somewhere. You’d do 2 years here and 2 years somewhere else.

L: Are there any successful bachelors programs out there now?
S: Michigan requires a Bachelor’s degree. Ohio requires a Bachelor’s degree. Wayne State in Michigan. There are several states that require it. Now, here’s the problem the way I see it: with both Michigan and Ohio, I could have a Bachelor’s degree in basket-weaving and an Associate’s degree in funeral service and that meets their requirement. Cincinnati and Wayne State both offer the Bachelors program. So here is what I’m suggesting: Go get a Bachelor’s degree in psychology first – or business, or accounting, and then an Associates in funeral service. Then if you leave funeral service, you have something to fall back on. If you get a Bachelor’s degree in funeral service and then leave, you may get stuck.

L: OK- next question. What do you see as the most worrisome short-falls or weaknesses in the educational program of your school as you think about the interplay between funeral ritual and bereavement?

S: Since 2001, when it changed to a 60 hour minimum, we have added a whole lot to FTC and OSHA laws. We’ve added a whole lot (of information) about cremation and direct disposal. We are still sitting at 60 semester hours. So the short-fall is that if you add something, you have to eliminate something. Right?

L: Yes, it sounds like you are hemmed in a bit.

S: Now – have you been crematory certified yourself?

L: I have not.

S: You know what it entails?

L: No, I do not.

S: It requires a one day seminar. You never even see in the inside of a crematory. The NFDA offered it here last September – it was their pilot program. In fact, I am going to use their text book. It is all done in the classroom. Now, who made them (NFDA) certified? Nobody. Who made CANA certified? Nobody. They just said that they are certified. Know what I’m saying?

L: Yes. The question is never if you are accredited; it is who accredits your accreditor.

L: Next question: what do you see as any key advantages or distinctives to your school’s program within the realm of ritual and bereavement?

S: Well, we do offer the two programs. But prior to that, there were no educational requirements. You work at a funeral home for two years and take a test and get your license. Then the state (of Tennessee) changed the law
saying that it takes at least 30 semester hours to get a funeral directors license. So, therefore, somebody in the state has got to put in a program. I'm the only one in the state right now. So we had to create a program. One advantage is that we created it on-line with the assumption that there are folks in Memphis and as far as Bristol that are working in funeral home full-time. Let’s create this in a way that they can get it. They do it totally on-line. They come here and register and do an orientation. Then everything is on-line until the final exam. You have to come back here to take the final exam. Then they do another semester and come back to take the final exam. Uncle Sam says I've got to make sure that the person getting the grade is the person who is registered for the course.

L: Tell me more about this program. Have you been running it long enough to tell how effective it is?

S: Yes, the (on-line) students are passing at a higher rate than the traditional on-campus students. Of course, they are only taking the arts side of the program. But they do perform at a higher rate than my others. I have been very pleased with it.

L: So what has the feedback been from the students doing this shorter program? Given that they are probably adult learners and in full-time employment, how have they managed doing everything? Are they saying this is doable?

S: Yeah! They are only taking 3 to 4 classes at a time. And a lot of it is mainly reading. You get the same notes that you would get here (on campus) in lecture. I equate it to if you could be a good insurance salesmen, you can do this on-line. If you can make yourself get up every morning and beat on doors and then be able to find you something to eat...but if you are not self-motivated, it would be hard for you to do. Now, the next question for me is when do I do an on-line funeral director and embalmer program? And I don’t know. There are some out there that have been pretty successful. But I am SACS accredited. SACS tells me that if I offer an anatomy class, it has to be taught by someone who has a PhD in anatomy. Gupton-Jones in Atlanta offers an anatomy class – as long as you have a Masters in anatomy it is ok to teach it. That doesn’t work for SACS. Lab classes can be done on-line, but we just don’t have the ability to do it right now.

L: OK – I want to focus now on more issues related to bereavement. The next question is what is the possible connection between loss and people’s quest for meaning in the suffering of processes of grief and bereavement?
Appendix B: Interview Documentation

[Long pause]

L: Let me state it another way: Do you think families who experience a loss today still have a need to search for meaning through funeral services and rituals?

S: Well, there is certainly a difference between your daddy’s day and mine and yours day. Because, the majority of people in Maryville and Dixon in your daddy’s day, was born and raised in Maryville or Dixon. And mom and daddy was down the street. Now, mom and daddy live in Florida and I live in Washington. And I may see them a couple or three times a year. Know what I’m saying? That doesn’t mean that I love them less. But it may lessen the importance of having a ceremony for all the family and friends and neighbors. Know what I’m saying?

L: Yes. Tell me more.

S: Well if momma and daddy live in the same house since I was ten, it might be different. It is the changing dynamic of families – it is definitely a changing situation of what it used to be. You know, we went through a period of time where everybody died in a facility – nursing home, hospital, or something. It is my prediction, I think, that this will come back around somewhat. If I take care of momma and daddy in my home for the next 6 months to a year, I’ll probably care a little more about what happens to momma and daddy. If momma and daddy are in a nursing home, and I only go see them once or twice every few weeks, it is not as important to me as it is if I’m right there taking care of them day in and day out. Hopefully Hospice won’t encourage families to just get rid of them without having something.

S: Now, something I meant to say before when we were talking about the education part. This is Steve Spann’s opinion. Some may think that I think this way because I’m president of the college. I think this way even before being president of the college. If I never worked here, I’d still feel the same way. I just think that everyone should have a minimum education (in funeral service and embalming) to cover whatever comes along. What I’d like to see would be a boost for the college.

L: Do states regulate this, or is this a national issue?

S: No, the states declare what has to be done. Georgia is like this now. You can be a funeral director separate from being an embalmer. But you’ve got to be an embalmer to get it. You’ve got to have separate licenses, but you have to have the level of education of an embalmer first.
Part II: The Hermeneutics of Bereaved Families

L: OK – we are doing very well on these questions. Let’s move now to understanding bereaved families. Tell me about how your school helps students develop their abilities to understand the acute needs of a bereaved family in order to suggest meaningful rituals that will aid in grief adaptation.

S: We cover that in general psychology as well as grief psychology. We have a class in the psychological aspects of death and dying and it covers the different types of families funeral directors will work with. This type of family vs that type of family and how each one handles their grief differently. Such as some folks who come into the funeral home angry and then there are those who look outside the window and don’t respond to anything.

L: What specific courses in your program help students understand the impact of acute loss on family interaction and identity?

S: The (main) courses are general psychology and grief psychology – which is actually considered a sociology course.

L: Are these courses taught by the same person?

S: Not always, but currently they are.

L: Do you have to have a PhD in psychology and sociology to teach these courses?

S: No. You do have to have a Masters in Psychology to teach psychology and a Masters in Sociology to teach sociology. My normal professors – one has a PhD and one has a Masters. Now – the grief course is a funeral service course. So I can teach it. It is not a general education course. Having a Master’s degree in something could technically teach it. However, in my general education course, you have to have a Master’s degree in that particular field. So the general psychology course has to be taught by someone who has a Master's degree in psychology. For years, we had Dr. Stafford teaching the funeral service grief course and he had a PhD in pastoral care and ministry. He also had a local counseling service here in town.

L: Next question: Does your school give any attention to the realm of spiritual healing in caregiving? I’m thinking this may or may not involve churches.

S: Yes. One of the key funeral directing courses is in directing funeral ceremonies. The course is funeral directing, but part of the subject matter deals with ceremonies. It also looks at things like liturgical and non-liturgical
responses. It touches on a number of areas of spiritual expression like Protestant, Catholic, Mormon, etc.

L: What effort is made if any to discuss the church-based contribution to bereavement care in the program, both prior to and after a funeral.

S: Well, prior to a funeral I used to teach the students that they should always ask who the minister was going to be. Now, I don’t ever ask that question. It’s not about who’s going to be the minister. The question is who is going to speak at the service.

L: Why is that?

S: Because, if I don’t go to church and you ask me who the minister is going to be, you have just embarrassed me. Now I have to tell you that I never go to church. You know what I’m saying? Now I’ve got to tell you that I don’t know a minister. Do you have someone you want to speak at the service? Now. If you are a church person, you are proud to tell me who it is going to be. Then I’ve not offended you. But if you don’t go to church and may even don’t know a preacher, then it really opens it up and could cause offense. It hit me that that was an awkward question to ask the families. I did it for years.

L: Tell me more about church-based contributions to bereavement in your experience.

S: Well, we’ve got some ministers in my area that never even mention the deceased in the service. But if that is who the family chose, then how are you going to stop that? But, I will say that those ministers that do that, I will never assign them to a family who asks for a minister, but doesn’t have one. Instead, I’m going to get one that talks about the person that’s dead.

L: Next question: How does your school educate students about cultural diversity and its influence on bereavement?

S: Cultural diversity is something important that is taught here (at John A. Gupton) – it’s in a funeral directing class. We don’t just discuss the different religious traditions. We also look at the differences say in a black vs a white service. A black family vs a white family is like the difference between daylight and dark often times.

L: Let me ask you this: explain how students learn interpersonal skills that are necessary to care for a bereaved family. Do any classes touch on that?

S: No. We do have an ethics class that goes through the whole funeral service process, from answering the phone to whatever must be done. We discuss the
ethical ways to do each and every step. In terms of interpersonal relationships, I don’t really have a class that specifically centers on that.

L: Do you think that interpersonal skills are something that can be learned?

S: Well, that’s part of the problem we have here. We’ll have some students who don’t talk very much but just sort of look at the floor a lot. They will be great in the prep room, but it would be difficult for them to meet families and work funerals. I think you’ve got to have some kind of external personality to be good at this.

Part III: The Care of Bereaved Families

L: Tell me how your school educates students specifically about grief and bereavement and its connection to the spiritual realm of healing and wholeness in a holistic approach?

S: We’ve kind of already answered that I suppose, with regards to the general psychology and grief psychology courses.

L: Yes, I believe we have.

L: Do you feel that your school adequately addresses these topics?

S: Well, generally yes. If it wasn’t, we’d have 64 credit hours or 65. We’ve been at 65 before. But you have to balance that it is a school, but it is a business also. If I offer a 70 hour or 80 hour Associate’s degree, I can go over here and get it for 60. If it is going to cost this here and this over here… I’ve got to stay within the market. If I can get it in 16 months at Gupton and its 24 months at wherever, that is what students look at. They want to know how much it costs and how quick can I finish the program. That is why when I am talking to a student, I tell them that they can finish this program in a year and 4 months. I don’t tell them it takes 16 months – that sounds like a longer time. But a year and 4 months – that’s not very long.
L: What are the key textbooks that are used?

S: I can get you a list. The national board exam is taken from a grouping of textbooks in every subject area: embalming, restorative art, psychology, sociology, funeral directing, etc. Now, does every mortuary teach from the same textbooks? No. But you are pretty stupid if you don't. If I'm teaching a psychology course, I may only use 1 text book. But the national exam could use questions from all the texts. I can get you a full list of texts. We get a textbook survey about every 2 years of so, that ask what are the textbooks being used, so that the national board makes sure they are taking questions from books that are being used.

L: What is your opinion about the role of after-care as part of professional funeral service?

S: I think after-care is something we should do more of. The bigger funeral homes seem to do a better job of doing that because they have the volume of calls where they can afford to have a grief support person or grief support program. Most smaller funeral homes find it difficult to do. When you spend 8 or 9 thousand dollars, you should have some after-care support. Now, many people don’t need it. But for the third that does, that’s valuable. We actually did a grief support group a number of times at Dixon Funeral Home. We didn’t have anyone to do it, so we just asked for a volunteer to lead the group. You really have to have someone who is interested in it as a ministry, and will keep prodding and pushing. Because, if you just leave it up to them, the group will fizzle out after a while.

L: Do you have any examples to share about good after-care programs?

S: Yes. Have you looked at Funeral One’s websites?

L: I’m unsure. Maybe.

S: Well, they have a program called 365 Days of Grief. If you use them for building your website they will give you this program. Then, if you are helping a family and feel like they need additional support, you email them to start the program. Then, they will get 365 days of grief support emailed to them. Some lady actually does the program and she is a psychologist I think. Dr. John Canine was going to do it. He wrote one of the key texts that a lot of mortuary colleges use. I can’t think of what her name is though.
Appendix B: Interview Documentation

L: So families in this after-care program get an email from her?

S: Not exactly. They open an email and get to see her sometimes in a video. Go to Funeral One’s website or you can even check out my website. She is on there as well.

L: Is there still room for the church or clergy to work with professional funeral practitioners to care for bereaved families?

S: What do you mean exactly?

L: Ok – how do you see the relationship between clergy and funeral directors changing in the future in terms of their roles to offer bereavement care services to families? It appears that the roles of funeral directors may be changing a bit. Do you agree?

S: I agree 100%. That is why having some grief support services is so important. Or at least to the extent that you say, look, I see that you are really having trouble. Here are some avenues that may help. You might need to go see someone. Where ministers used to do that kind of stuff, they don’t.

L: Can you explain more?

S: Well, to a certain extent it is listening. People want to talk. They want to talk about daddy, or my husband, or whatever. Good listening to me is 2/3 of the therapy. The folks that have worked with me that have been pretty good at preneed, listening is the biggest part of that too. That age group (Baby Boomers) just wants to talk. If you are a good listener, and you are not in a hurry to get a sale and get out, you’ve got a friend. And they may not prearrange then. But then they are going to. And they are going to call you because you were willing to listen to them.

Part IV: The Encounter of Bereaved Families

L: Ok – this is our last set of questions and then we will be done. Again, I really appreciate your time and candor today Steve. Here’s the question: Would you share your opinion of what explains the changing public attitudes toward traditional funeral ritual and pastoral care?

S: Well, I think the majority of it was us (funeral directors). When it started off, people were ashamed to be cremated (in the South). Then when more Northerners moved in, where it wasn’t embarrassing up there, they were used to cremation. Their buddies were cremated, so they wanted to be cremated too. Then, they would call the funeral home and say that they wanted to be cremated. We (as funeral directors) would say, that is a direct cremation,
assuming no services. How many times do people call and tell us that they wanted momma to be buried and then we say “that’s a direct burial.” No. We never told them that it was a direct burial (without services). We never say that if a family is a burial family that it is a direct burial. Instead, we take them in and show them the options and then let them choose what they want to do. That is the way cremation should be, but we (the funeral directors) created it. And I don’t know how we un-create it, other than continuing to show the options and explaining to families the benefits of services.

L: What could we do better?

S: Well, what I try to do at my funeral home, and I’m not sure I do a good job with it, is that even if a family comes in and tells me they want a direct cremation, I try to explain to them the benefits of a funeral. I’ll tell them that “please, don’t think I’m trying to talk you into something. But there are 2 things that I think are very important. One is that you finalize the fact that your momma is dead. Now, if you saw her at home and you were with her, then you have done that. What about the other family members and friends? You might think about that. The other thing that is very important is that there should be some memorialization. Now, I’m not trying to talk you into money. I don’t care if you do it with me, or do it at home for yourself. It is very important that something be done to remember her life – a life that was lived. Now, how you do that is up to you.” Now, not many who want a direct cremation is going to listen to me. But I feel like I’ve done what I need to do.

L: How well is your school adapting to the changing attitudes about funerals rituals and ceremonies?

S: I think we are doing well. We are doing a lot more now in teaching about cremation than in the past.

L: Which courses in your educational program are designed to discuss the role of rituals in funeral service?

S: That is what all of our funeral service courses are all about (over 20 credit hour’s worth). There is one whole summer semester where that is what it is all about – rituals.
L: Has your school’s philosophy on the importance of bereaved families encountering the deceased body of their loved one before final disposition changed?

S: No. It is still very important. It goes back to when daddy went off to war and never came back. Or, daddy left in an ambulance, and I never saw him again. They told me he was dead, but I never saw him. And I tell my students, even if they don’t want him embalmed, if the family can just touch a hand, they can say, “that’s daddy’s hand. That is not someone else’s hand. That is my daddy’s.” “That is my daddy; that is my daughter; that is my son.” “I know now that he is dead. He didn’t go off to California. He didn’t go to war and not come back. He is dead. It is history. And now I can move on.” But without viewing the body, how do you do it?”

S: And to get back to the question about changing rituals toward direct cremation – do you know another thing that drove it?

L: No, what?

S: If my momma is going to look as bad as you made my daddy look, I'll just cremate her too. A lot of funeral homes they could care less. It's about how much I can sell and how much can I make off of it. They don’t worry about how the body looks. But this is what we should be doing. If there is no body, there is no reason to call you. So you better make him look as good as you can. Think about it. Go around and look at some funeral homes. You’ll say, if that was my momma, I'll cremate my daddy. To me, that is the biggest key that we have – a body that is looking good. All this other BS is table dressing. The body is it! If they ain’t no body, they ain’t no it. But if I know when I come to your place that momma is going to look better than she has looked in years – that is a reason for going.

L: What are your thoughts about the use of celebrants in lieu of or in addition to clergy in funeral rituals?

S: Celebrants are a good idea. The reason celebrants are a good idea is because we don’t know ministry any more. If you have a close personal relationship with your minister, what do you need a celebrant for? I think a family would be offended if I have a close personal relationship with a minister, I’d be offended by a celebrant. My minister has seen us through all of this. But, I do wish more ministers were celebrants. That gets back to telling the story and talking about his life, rather than being preachy. But for those folks who don’t have any of that, I think a celebrant is fantastic. To have somebody who can get up there and don’t even know the deceased, but can sit with the family
and learn about the life of the deceased, and then put together something that is meaningful is a great thing. Then the folks that leave the service, the 150 or so, they are all glad they came.

L: Does your school prepare students to think of their roles and responsibilities toward bereaved families as one that should extend beyond final disposition?

S: It would be very difficult within the time constraints we have now on the number of hours. It could open up a can of worms that can go extremely long.

L: OK- one last question: Have I missed something that would assist bereavement caregivers in their work that you would like to share?

S: I can't think of anything. I appreciate you asking me to do this interview. And if you want to talk with Mike Landon, let me know.

Total interview time: 1 hour and 7 minutes, plus an additional fifteen (15) minutes of conversation following the interview.
7.2 Cincinnati College of Mortuary Science Interview

Transcribed Notes from Interview with Teresa Dutko, Senior Faculty, Cincinnati College of Mortuary Science, Monday, October 20, 2014, 10AM EST

L: Interviewer, Lynn Gibson; T: Interviewee, Teresa Dutko

Part I: The Philosophy of Education for Funeral Service

L: Professor Dutko, thank you kindly for your willingness to participate in this study. I have already reviewed and documented the demographics section of the interview with the school’s president. Now we are ready to jump into the main body of questions. The first set of questions deal with the philosophy of education. I would like to start with this question: From a big picture or bird’s eye view perspective, what do you see as the chief aim or main objective of the funeral service profession today?

T: Yes, I would say that the chief aim for funeral directors is to serve in the role of bereavement caregivers – to help families cope with their grief.

L: Excellent. That is a very focused response. What do you feel should be the minimum educational standard for licensure that adequately prepares a student to enter the field of funeral service?

T: There should be higher standards. I believe that a bachelor’s degree should be the minimum requirement – but, sadly, I don’t think that will ever happen at a national level. Our school went this way in the 1980’s, but others have not followed.

L: Does dual licensure (funeral director license and/or embalming license) provide advantages to students in terms of being prepared to address the needs of bereaved families?

T: Certainly there is a benefit to having more hours dedicated to preparation and learning in our field, including the sciences and the arts. Dual licensure provides a longer timeframe to accomplish educational requirements. We can do so much more with the extra time. For example, embalmers can learn how important or effective it is for a family to view their deceased to acknowledge the reality of death.
L: As you think about funeral ritual and bereavement, what are the most worrisome short-falls (or weaknesses) in the educational program of your school if any?

T: Programs are heavily focused on the sciences. At the national accrediting body level, there is still an uneven distribution of course content. That is not something we (CCMS) can overhaul on our own, because we have to comply with those national requirements. I think our school has shifted, as we have had room to, to add more hours to the social science area. But I think there is still additional room for improvement.

L: Has this shift toward social science in the core content at CCMS happened recently, or more over time?

T: Right, right. This has been a more recent shift.

L: What would you say are any key advantages or distinctives to your school's program within the realm of ritual and bereavement?

T: I believe that having someone like me, not necessarily me, but someone like me teaching in a program is beneficial. I know that when the president who hired me, he was specifically looking for a non-funeral director.

L: Yes. Can you tell me more?

T: Sure. He was looking for someone with a broader social science background. There might be some limitations to having a funeral director only teach in this area of social science because his or her tendency would be to talk about his or her own way of doing things, and maybe not provide that broader perspective.

L: And I noticed that you have the FT designation in your title. So you have a background in thanatology and the certification. Is that certification with Association of Death Education and Counseling?

T: It is. They have a certificate in thanatology, which is the lesser credential – which I had initially. And then they added the Fellow in thanatology and then I pursued that as soon as it was available.

L: Well, I can see that as a key advantage for students to have you as their instructor so you can bring a wealth of knowledge to the field. We will get into some of the specific topics in a minute.
L: OK, here’s a question. Given the religious and cultural diversity that exists in our society, do you think families who experience a loss today still have a need to search for meaning through funeral services and rituals?

T: Absolutely! I think that all people regardless of faith or spiritual beliefs or not benefit from being a part of a community of support.

L: Sure. So even if great faith or religious diversity exists within the family who has lost a loved one, you still think there is value in that family coming together.

T: I do. And not just immediate family, but their extended family and friends. I absolutely do. We are communal creatures – we are social creatures. And so it is hard to imagine anyone coping with a loss no matter what their culture background is in isolation.

L: Of course that is the fear that is at the heart of this research – the idea that what happens if we remove ritual from the experience of death. I had a conversation with a biology professor asking him how far do you have to go in human history to find no evidence of ceremonies and rituals with the dead. At our lunch meeting, he said you can’t. There is no time in human history where there hasn’t been some evidence of ceremony or ritual in the burial of our dead….which is fascinating to me. And then I ask, what happens to us if we don’t do that anymore?

T: It appears it is in our nature to do that. I often share a Margaret Mead quote – famed anthropologist – where she had never encountered a society that did not surround death with ritual. So, she spoke of what your colleague found. It isn’t there.

L: So that’s the concern: if we step away from that – something that appears to be in the very fabric of our humanity – there is some fear that something important is being lost.

L: Ok – this interview is really excellent. I’m ready to move on to the next part to talk about understanding bereaved families.

T: OK – sure.

Part II: The Hermeneutics of Bereaved Families

L: Tell me about how your school defines the acute needs of a bereaved family. If you were going to teach a class and explain to students that when a family loses a loved one, what do they go through? Can you unpack that for me?
T: Sure. And that answer probably happens over time. It is introduced in the first term course the social aspects of death and dying. It is also discussed in the psychology of grief course. It is not something that happens at one time or at one moment or at one unit. It is an ongoing dialogue. And we refer back to those discussions over time.

L: What is it that is taught over time?

T: You are looking at specific needs, like the need to have support from other people. That certainly is one. The need to have a safe time and place when emotions can be expressed without fear or embarrassment. The need to remember to reflect to reminisce to share memories and tell stories. The need to say goodbye. The need to shift one’s identity to the extent that a closer [?] identity is changed. So, I was his wife, now I am his widow. And my life is going to be very different as a result.

L: Very good. Is there more?

T: Well, I don’t use the word closure. I think when people hear closure they think unfortunately, the end of grief. So, if I talk about closure around the funeral ceremony, I am very clear to say that closure is on this delimited period. Grief is only beginning. It is not ending. But, closure on this finite experience occurring in the immediate aftermath of death. So with students, I have the luxury of being able to explain what that does and doesn’t mean.

L: I have learned a lot about this term as a practitioner. The term just doesn’t work. It doesn’t fit the experiences I see. In the practical, day to day, of what I see families experience, there is no closure.

L: I recall one pastor who lost his wife, but wondered what was wrong with himself, because, though he believed he would see her again and he was relieved that she was in no more pain, was wholly discontented.

T: Yes, he was probably experiencing the tension between faith and grief. You will even hear lay people say, “well, why isn’t my faith stronger, because if it was, I would be happy for where she is now – and I will join her.” And they don’t realize that you can have very strong faith and be comforted in knowing that she is in a better place, but you are grieving because she isn’t here with you. And I cringe when I hear clergy preach that during a funeral, as though if your faith is strong enough, it shouldn’t hurt so much, or be so difficult. Well, these are two different things.
L: Yes, and I wonder what roles do clergy have in perhaps devaluing ritual – however unwittingly?

T: Yes, sermon 3 out of the file, insert name, and enter the celebrant movement.

L: Thank you. We are going to discuss celebrants in a moment. Does your school give any attention to the realm of spiritual healing and wholeness in caregiving?

T: The students – or the families they are serving?

L: I am more referring to how students understand the spiritual realm of coping to help families.

T: We certainly talk about grief impacts all around a person. So, the physical body, the emotions, the cognitions, the thought processes, the social behavioral ways people copy and also their spirituality. So we sort of talk about the whole person and how people think grief are emotions that ripples out and effects all of who we are.

L: Let me move the question a bit in terms of how family units are often diverse. What specific courses in your program help students understand family dynamics – specifically in terms of how different generations interact with one another to cope with the impact of acute loss?

T: You know, yes. Not a course, but again the death and dying and the psych courses, both flow one into the other. We talk about family types, and the shift from primarily living and extended families, to now more nuclear ones. Beyond that, single parent, blended. In psychology, we get into more of the grief dynamics that ripple from that. But also in our funeral directing course, we talk about generational characteristics and funeral planning. So, for example, the World War II generation vs the Baby Boomers.

L: Incidentally, just recently, at the National Funeral Directors Association annual convention, a lady from Aurora Casket Company…

T: Lacy?

L: Yes, Lacy! She did a great talk on the differences in the generations of people in the West. It was a very informative discussion.

L: This is excellent and encouraging to hear how you all are connecting the dots like this for the students to understand different types of family arrangements. In my new funeral home that primarily focuses on cremation, that is one of the things that I am beginning to understand and learn from those families. It is not like they are
necessarily irreligious or something like that. Sometimes it is a matter of simple
geography. One family recently called me about her situation where she literally had
siblings all over the planet. Several here in different states and one even in Japan.
She asked me, where do we have the funeral? So that is a legitimate question. They
want to do something, but just don't know what and how because of the complicated
logistics. These are questions I don't think we dealt with as much 50 years ago.

T: Oh, certainly not. People say we want to have a memorial service, but not
now. A lot of the grandkids are in college. We need to wait until summer break
when people can coincide travel with vacation.

L: What do you think about that?

T: My concern is that a lot of people who can say “we’ll do it later” never do it.
So do, but a lot don’t. And I don’t think it is ever quite as beneficial as when it
happens at the time of death. And then you have all of the interpersonal
dynamics. The classic example of some of adult children do not live where Mom
and Dad live. And they have been part of the caregiving during that parent's
dying years. One sibling on the west coast. You can ask any funeral director
who in that family is going to be the most difficult to deal with. And he will say
that the one who has to fly in who is not in the same place. That person has not
been able to prepare for the death. It’s too remote. Not seeing the death, not
witnessing it. So, it isn’t happening in their mind. That person is often perceived
as difficult – wanting to come in and control everything or direct decisions when
it really is just that person’s way of trying to deal with what is being experienced
very differently.

L: I imagine this is something that is different in mortuary college education than it was
decades ago.

T: It is. And students have more examples now to share. I mean, they connect
with that reality very quickly. It comes up when we talk about family viewing
time, and how all people don’t share the same needs relevant to that. But when
there’s an interpersonal conflict perhaps, maybe one person needs time alone.
We seem to think all or none. You’ll all come in together or none. And so, just
being aware when you hear families express concerns about someone or that
person expresses concern on her own behalf – “I wasn’t here” or “I didn’t get
to spend time” or “I didn’t get to say what I needed to say.” And so sometimes
what we need to do – we need privacy to do. We do not need to do it with our
whole family present.
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L: In terms of the program of studies here at CCMS, what effort is made to discuss church-based contribution to bereavement care in the program, both prior to and after a funeral?

T: Right. You know, it gets mentioned during the core associates degree program and I teach it in an after-care or continuous care course. And so that starts with the importance of connecting with churches and other resources because your knowing what’s out there is a part of following up with your families.

L: Does the program encourage working collaboratively with other organizations as well?

T: It’s not that a funeral home has to deliver all sorts of services or grief support. You are often just connecting people to what currently exists. But when you contact churches and mental health agencies and hospices and different folks about what they’re doing, you are also able to share your interest in or commitment to supporting bereaved families. So you sort of become a part of that network.

L: You mentioned that you get into this during the fourth semester, so does that mean that the Bachelor’s program is more conducive for teaching collaboration and after-care?

T: You are right. In the Associate’s degree program we are compelled to teach all that national board content. So we are somewhat restricted. In the psychology of grief, the course ends with one or two session introduction to after-care or continuous care. Those who stay for the BMS get a one credit hour course that is very nuts and bolts about how you might design a program appropriate for your funeral home.

L: Excellent. That is very good. How does your school educate students about cultural diversity and its influence on bereavement?

T: Well, I think I could do a better job. You know, in grief discussions, I’ll introduce this or that cultural difference. But it doesn’t receive thorough coverage. But again, there isn’t really time. So I’ll refer to how this cultural group is more open to wailing or keening that you’ll experience, but this is not a course topic or unit per say. Certainly in the directing course we talk about conducting rituals for the main church groups. And then, there are certain ones we have to cover for American Board requirements. I think we go beyond their requirements.
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L: Explain how students learn interpersonal skills that are necessary to care for a bereaved family.

T: For question 13, I use for the second term course Professional Relationships in Funeral Service, there is an interpersonal skills section. I use Alan Wolfelt’s book *Interpersonal Skills Training*.

L: Yes, I think I have that book. It is a good one.

T: Where you are looking at clarifying, paraphrasing, and those skills.

L: He is a master teacher, isn't he? He does well at large presentation settings, but some of my best experiences with him have been in smaller more intimate group formats he offers in Colorado. He teaches on a different level.

T: He does. Earlier in his career, he was willing to do his three or five day training remotely. This was before he had a family. So I brought him to Cincinnati twice, for the first two. One was bereavement skills training basic course, and then the helping children course. So he was here in like 90 or 92 – something like that – for those two multi-day small group sessions. And then he was back here again in the later 90s for a big presentation in our auditorium.

**Part III: The Care of Bereaved Families**

L: Ok – we are moving right along here. We are now ready for part III. What are the key textbooks related to grief and bereavement that are used?

T: Well, like I said, I use the Interpersonal Skills Training by Wolfelt and then the grief text I use is Worden [4 tasks of mourning].

L: Which courses in your educational program are designed to discuss the role of rituals in funeral service?

T: Multiple courses build upon this. I think we do a pretty good job at building. Aspects of Death and Dying introduces just general types of ceremonies. Contemporary Funeral Practices in second semester is now called Historical to Contemporary. But that’s where they learn to conduct Roman Catholic Mass, Jewish Rites, LDS, Liturgical, Protestant, all of that. When we were on the quarter system, we had a historical course and a contemporary course. So to create a full semester course, we merged the two.
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L: I like that organization. So, how well does your school explain how meaningful rituals aid in grief adaptation?

T: I do feel like we are quite effective. I could teach that second course on how to conduct funeral rituals, but then I'm teaching the other courses, so I can make sure that there is a continuous thread throughout the program.

L: Very good. Ok, next question. Do you feel that your school gives adequate time to developing student knowledge of how spirituality can help families cope with loss? Why or why not?

T: We should probably do more of that. I'm not sure we are doing that as much as it might be important to do.

L: You may find this to be an interesting question. How do you see the relationship between pastors/clergy and funeral directors changing in the future in terms of their roles to offer bereavement care services to families?

T: Well, I've already seen it change a lot. And I have used those changes to affirm the role of the funeral director, because historically, the funeral director could sort of know the clergy was going to support that family in the bereavement period. So, I might share statistics about the decline in church membership and then along with that, among those who are officially members those who actually practice their faith or regularly attend. And beyond all of that, is the issue of geographic mobility. So either the families of faith who practice their faith in a church might be new to your community and that church. So it hasn't been a long standing church home. And therefore they might not have that really close connection to their clergy person.

L: For so long, and I'm guessing this would be fairly common, at least in the United States, this in funeral service was like a lay-up. Years ago every family had their pastor.

T: You are right in the middle of the Bible Belt.

L: Yes. And it is very different now.

T: Yes.
L: So families today are embarrassed that they do not have a church connection and then again, some are not at all. So, when we ask them who they would like for us to contact to officiate the service, many are like, we have no idea. Do you have a suggestion or recommendation?

T: Yes, most Americans now say they are spiritual, but not religious. They make that delineation. We believe in God, and we still have faith in a better life after. I see this as a part of the deritualization piece. They go hand in hand. Something as simple as families eating a meal together, I believe is a manifestation, of overall deritualization. So I don’t think it is just around death and grief.

L: So could you explain that a little further? Are you saying that the lack of families who eat dinner together is symptomatic of these same deritualization trends we see in funeral service today?

T: Overall, I think our society is being deritualized. You can think about big deals, like family gatherings around the holidays or special occasions. Those have lessened. Not a big surprise that funeral rituals have lessened or become shorter. But then, I would offer as an example with students, their daily rituals families used to honor. Like no matter what else we are doing during the day, there is going to be time at dinner for all of us to sit and talk together. Well, a lot of our students didn’t grow up with that family tradition. I wish I had a copy of a study. I tried to…it was referenced in a Reader. It has been many years ago…and I tried to write the editor to get the original research, but didn’t have any success in that. But someone did a study that looked at National Merit Scholars coming out of high school, trying to figure out what their commonalities were. And so they looked at the usual things like parents level of education, or parent’s income, or socioeconomic status of the family. They were not getting anywhere. The variable they found most common among the National Merit Scholars they studied was that it was routine for families to share dinner. I thought that was so amazing. I tried hard to get my hands on that research. So, if you come up with it, let me know.

L: If I find it, I’ll send you a copy. The notion of that research, if it is truly valid, is fascinating.

T: I thought it was too.

L: In working with our families in Tennessee, it is not entirely uncommon today that even among a single family unit, there could be multiple religious perspectives. And so I’m thinking about mortuary college students coming into this world in contrast to
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those practitioners who have been doing this for a long time. What we are seeing is a
different complexity in family dynamics that we have not had to work with in the past.
And yet, the bereavement needs are still there.

T: Funeral directors historically could just assume that the clergy would handle
that. But if you look at training in seminaries, it is woeful. I tell our students, for
many years, decades now, funeral directors have had better training in
bereavement than the clergy you assume. And we have had clergy on faculty.
Dave Tackett, who taught here for 18 years, was a Methodist minister, and still
filled in for people who took vacation and that sort of thing. And he would say
outright that I went to seminary in the 80s, my instruction on handling funerals
and grief, happened in a class period. It wasn’t a course; it wasn’t even a unit
in a course. It was a class session.

L: Well that is most illuminating. Thank you. So you don’t just teach Kübler-Ross here?

T: Oh no! We tell students that this is a historical discussion that was ground
breaking work. We are going to clearly identify the many contributions she
made, but you will never hear me use the words “stages” again…unless I’m
talking about her, or a contemporary of hers who had a similar model.

L: I am learning from my research and working with my professors in South Africa to
be a little more critical of this mechanical idea of ministry and care. Today I see too
many clergy who believe that the best source of support they have is to climb into the
pulpit and proclaim some texts from the Bible. And while that brings comfort to some,
for many, I watch this kerymatic approach fall on deaf ears. Sometimes the most
helpful form is no words at all, in terms of comfort and healing.

T: These tangents are so helpful.

L: Yes, but we will get back to our interview questionnaire. The next question deals
with the issue of after-care – or continuous care – like you mentioned earlier. What is
your opinion about the role of after-care as part of professional funeral service?

T: I think it should be a part. I think a funeral home’s care to a family and for a
family should be continuous. Funeral directors generally embrace the pre-need
and at-need, but are a little more reluctant in the post-need realm. I think their
reluctance is based on some things we’ve shared (in this interview), like
assuming that is the role of the clergy, assuming they are not qualified,
recognizing that you don’t just do things you are not qualified to do. And much
of this is, particularly when you are in an urban area connection people to what
exists (out there for them). I have a binder of greater Cincinnati bereavement
resources, from support groups to literature to private counselors. Funeral
homes don’t need to do all of that. But they need to be able to connect people who will come to them. Because hopefully they have a rapport with their funeral director and it will be safe to say – you know – I need some help.

L: If I may go a little further here. So you see it that funeral directors have the responsibility in their profession to see who is providing these kinds of services well in their community?

T: Absolutely! At a minimum. Every funeral director should be doing that. So yes, whether a funeral home says they are doing after-care or not, even if you are not, you need to know where to direct people when their requests come. One thing that makes me crazy is for this resource manual to be updated annually. We have a local grief network of bereavement professionals who meet monthly – and maybe someone does a program of not. But it is all about supporting one another and sharing resources. Once you get on that list, you would get this updated information annually. But I will have Directors call – say about a suicide group – and I’ll say that I can do that, but wouldn’t you like to have all of the groups. So the next time someone asks, you are not calling me again. But they don’t think in those terms.

L: Just to go a little further with this here – I have been a bit discouraged at times by those in our field that say that we should not be about after-care at all. And it gets back to our first question about identity – the identity of today’s funeral director and what roles will he/she play? And even with those who embrace after-care, it saddens me to see that many do so as a means to generate pre-need leads. It seems to me that we are missing out on some crucial opportunities to care.

T: Yes, a list of groups would certainly be helpful. If you are looking for a place to start, a local hospice group it a good place to start, because to be certified as hospice, you have to have a bereavement program that supports families for up to a year after the patient dies. So they are definitely a good source for information. And I say to students that you are the one person they are going to deal with in the face of death. We have already established that they are not necessarily going to work with a clergy person. So when they have questions and concerns about death, funerals, or grief, you are the logical go-to person – unless of course they have a relationship with a hospice.
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L: It seems to me that we operate with faulty assumptions as funeral practitioners at times, assuming that families are getting all the care they need.

T: Yes, and I think there can be sort of a full circle benefit here, going back to your original concern regarding deritualization. Because, funeral homes in Ohio who have more formalized after-care programs that began when the trend got started in the late 80s, they will describe that there has been a shift in their community whereby the funeral home is now being seen as a death education, or grief support center. So, people are used to this notion that we don’t just go there when someone has just died. We can go there to pick up a brochure on grief, or to borrow a book, or to get information about a support group. So, this changes the whole feel and sense about a funeral home. And I think it makes it seem safer and more comfortable to plan ceremonies and rituals at the time of death.

L: Very good remarks. So how far should a funeral home go? How long should they stay with after-care services for a given family?

T: When we talk about it in class, I say that most typically your services should be available for up to a year, but I think that if funeral homes create this shift in perception who they are and what they do, you should be receptive to inquiries and opportunities to help over time.

L: So do you think that it is appropriate for funeral directors to reach out to families even weeks after the funeral events?

T: I do unless the family says thanks but no thanks. And then, you absolutely respect that. But beyond a year, I don’t think it is important that you do the reaching out, but hopefully you have created this perception that it is ok if you need to reconnect with us.

L: Excellent. Well, we are ready for our last section of questions now. Are you still doing ok on time?

T: I am. I am.

Part IV: The Encounter of Bereaved Families

L: That’s great. Would you share your opinion of what explains the changing public attitudes toward traditional funeral ritual and pastoral care?

T: Yes, not a simple question. But simple in terms of the economy. I think that before we saw as much deritualization as you and I have been discussing, but perhaps the professionalization of funeral service was part of its own demise. I
have probably heard Alan Wolfelt say something like people have gone from being active participants in funeral rituals to being passive recipients. So, I thought about that when you discussed proclaimed words. So at some point, funeral directors decided that they could be most helpful if they do everything for us. So people are no longer doing what generations of people you talk about anthropologists tell us – getting up and putting what you feel into motion. I always share with my student the root of the word emotion – a Latin root that means to move around or stir up. So, using the classic fight or flight response as a model, we are not meant to just be still when we are experiencing high levels of or intense emotion. We are meant to move…and to move that through our bodies. But over time, people became so passive. So, we start our death and dying course with this look at the sociological changes over the last hundred years – the 1900s to the present. And how a lot of what has happened, that we call progress, has huge implications for our familiarity with and comfort around death. So things that we didn’t choose, but perceive to be good, like advancement of medical care, or healthcare…so no longer are families caring for their dying at home. We actually now talk about should children visit grandma who is dying, when 100 years ago, they lived in the same house, and it was just a natural part of their life. And then, when death occurred, the same. So, the family washed and dressed her, and laid her out in the parlor in a coffin they built – all very physical activities that move what they are feeling through their bodies.

L: There is something about the participatory element of ritual that brings it all about. Don’t you think?

T: I really think so. In funeral service, we’ll say that since you are going through a difficult time, let us handle it for you. But we have taken the things out of their hands that allowed them to have catharsis for healing in their experience.

L: So this obviously contributed to deritualization.

T: Yes. I think it happened before death, when care of the dying transitioned from family care to medical profession care, and then post-death transitioned from family care to death-care professionals.

L: Do you have a key text that you use in that course on the social aspects of death and dying with students?

T: You know, I do. I use a core text called Life and Living: Dying and Death. Which I like, because it is very life-cycled approached. It’s like birth begins life and death ends life. This is a very natural part of the cycle.
L: The next question we may have already covered. How well is your school adapting to the changing attitudes about funeral rituals and ceremonies? It sounds like very well.

T: I really hope so. Just to share an example, I have these first term students journal. And it was amazing when I collected journals a few weeks ago how many wrote a piece on how they had not realized how in just over a hundred years how people die has changed so much. And the implications for comfort level around death. So you can talk about the rise in life expectancy and drop in mortality rates and how we just experience so less often. And then when we do, it isn’t so intimate or personal. It is institutional based, not home based. And people are not participating. The students said that they kind of knew this but that discussion was really helpful. And then we link that to how people feel when they come to a visitation and why they are so anxious or stand-off-ish. You know, they have been so removed from death over time that when it does happen it is a new scary experience.

L: Well, this really goes right into our next question, especially as I think about walking around your campus this morning and appreciating the artwork of your students. Has your school’s philosophy on the importance of bereaved families encountering the deceased body of their loved one before final disposition changed? Should families still view their death?

T: Absolutely. I do make it very clear that people’s needs are different. Research is limited. It seems to suggest that when people communicate a need to see, and are prepared for that experience, then it is generally healthy.

L: I’ve yet to read definitive research about this.

T: Well, some theorists have spoken about it – Worden, Wolfelt, Rando, Grollman, Neimeyer – all the biggies. But specific research is fairly limited. I can send you a pdf of a study that came out of Canada two years ago – very interesting. It was all with families of sudden violent death – suicide, car crash. And it looked at viewing in the healthcare setting like the ER or the morgue, and also viewing at the funeral home. Some did one or another, others did both. And so the people that did both could talk about the shift. Like some people said that the viewing in the ER or the morgue was I have to see to know if this is real. And then the funeral home viewing took things beyond that and brought me comfort because the initial viewing included the trauma and the aftermath of the death, but then the funeral home was able to shift that perspective. I’ll send that one to you.
L: Thank you very much. I look forward to reading that one for sure. What are your thoughts about the use of celebrants in lieu of or in addition to clergy in funeral ritual? Mr. Kramer indicated that students who leave the school now have some training in this area.

T: I have been a celebrant for more than 10 years and so has a colleague with our full-time year-round positions here; we do not have a lot of room [in the program] to practice. I do 2 to 4 per year maybe. Doug Manning and Glenda Stansbury did celebrant training here in Cincinnati. My colleague and I became the first two mortuary faculties to be qualified to offer that training. So they came to train the trainers. And that was part of their original concept, hoping that it would grow as a concept and that they would not be able to train all those interested. And so a logical starting point was with mortuary school faculty who were already celebrants. So they offered the first train the trainers in Minneapolis in the spring – no faculty participated. But then when they offered it here, she and I were able to take that opportunity. We thought more faculty would come from elsewhere but we were it.

L: Is this something that you think funeral directors should embrace more?

T: Absolutely. Can I take a short restroom break?

L: Yes, of course. We are just about done with the interview.

[SHORT 5 MINUTE BREAK]

T: Jumping backing into our discussion, the social context of when a family says to find us a minister or show us one – the sort of rent-a-preacher concept. I think Doug Manning, who is a clergy person himself, saw how that wasn’t working because that person just pulls a message or sermon from a pile and didn’t take time to work with the family. So, families are starting to figure out, well if we do not have a clergy person, we don’t have to get one from our funeral director. There are other options. So enter the role of celebrants. And sometimes, people who use celebrants are fairly religious.

L: Can you explain what you mean by religious.

T: I have never had a celebrant family say, no religion at all. I almost always pray at some point. I incorporate Scripture for Christian families. It’s never that they don’t want any of that. It’s just...the way I say it is, people figure out that we don’t just have funerals because someone died; we also have them because someone lived. And they got tired of that life, not being a part of it. Now, my concern, as I know you have probably heard from Alan Wolfelt is the
opposite swing. That people have taken the celebration of life so far that they want to ignore the death.

L: Yes. Celebration of Life services can be fun, but they are not a party.

T: I sometimes worry that what the family plans does not give folks permission to grieve. So all of my celebrant services open with comments about why we gather. And I always include references to remembering and I always include references to honoring or celebrating the life, but also acknowledging and grieving the death. Hopefully the people hear that all of those things we can do together.

L Does your school prepare students to think of their roles and responsibilities toward bereaved families as one that should extend beyond final disposition?

T: Yes, we do.

L: Before I hit the last question, do you have thoughts you could share with me on the concept of resilience in terms of grief and bereavement?

T: The idea is that people have the inherent ability to bounce back. I think that is true for a lot of people, but historically, having a ritual is part of what helped them bounce back.

L: Have I missed something that would assist bereavement caregivers in their work that you would like to share?

T: I don’t know. We have certainly covered a lot of ground. I think in follow up, you will think of things, or I will think of things.

L: So you would be willing to have another exchange if needed?

T: Absolutely! I’d enjoy that. This is important work. You know, in looking at 2015, our BMS students will come out of this program with Celebrant certifications. Many may aspire to do this, but it is hard to get time away if you are already a funeral director, and it can be expensive. So this is just one more credential we arm them with.

L: I know as a funeral home owner, that credential would weigh heavily in my decision to hire new talent.

T: I guess something I would add is, I don’t want them to say that I’d never do that or I’m not comfortable public speaking or that’s not my thing. Because I think shy of clergy service, and a celebrant service, most services are in between that are roughly a hybrid.
L: Can you give me an example?

T: Yes, one that I use with them is a family who wants their minister or whomever to share words of faith and comfort, but they also want a secular song or a poem or a reading – my concern is that often doesn't happen well because no one frames that secular stuff. So the funeral director thinks the clergy will, and then he stands up and does his thing and sits back down. He doesn't introduce that classic rock song or introduce that friend who wants to share a poem or reading. But funeral directors have too long stayed in the back. And those other pieces that are new to people happen better when they are put into a context. So if you just flip on that classic rock song, the older folks in the crowd are going to be put off. But if someone says that we are sharing this song because he always said that if anything happens to me you better this song at my funeral, or because it was his favorite. Grandma may not decide she likes it, but at least she understands how it represents her grandson. So, if the clergy isn’t doing that, and the family isn’t willing to do that, then the funeral director needs to be comfortable in being sort of a master of ceremony.

L: Doug is a pioneer in celebrant training, right?

T: Yes, he and his daughter Glenda. They do it together. We went through the celebrant training 10 years or so ago. But this last time, we did with the instruction manual. So, we were learning how to do what they do. BMS students get the actual training. Associate students are exposed to the concept, and they get to do a limited amount of being creative in a funeral ceremony, but they do not get the full blown how do you do an entire celebrant service.

L: Well, that is all. This has truly been very enlightening and informative for my research.

T: You are very welcome.

Total interview time: 1 hour and 9 minutes, plus an initial thirty (30) minutes in discussion with the college president, Mr. Gene Kramer, regarding school demographics before the interview started.
7.3 Johnson University Interview

Transcribed Notes from Interview with David Wheeler, Associate Professor, Johnson University, Thursday, November 6, 2014, 2PM EST

L: Interviewer, Lynn Gibson; D: Interviewee, David Wheeler

Part I: The Philosophy of Education for Pastoral Care Ministry

L: Thank you David. Now that we have discussed the demographics of the school, we are ready to jump into the main section of this interview. I have 25 questions that we'll discuss that forms the core of my study. We are going to tunnel in toward the core questions I have about pastoral care as it relates to bereavement. So let’s get to it.

L: This first question is a good one. From a big picture (bird’s eye view) perspective, what do you see as the chief aim or main objective of pastoral care today? What is it all about?

D: It is the care of souls. That’s primarily it. The word pastoral has an image of shepherding. Caring for the sheep. That means that you have to get to know the sheep – to find out what their needs are. How well fed they have been. If not, how do we improve the diet of what they are receiving spiritually? The care of souls mean that we have got to get to know these souls. And, you better be taking care of yourself. I heard a quote last year that says, “hungry shepherds end up eating the sheep.” [laughs]

L: Can you elaborate more on this for me David?

D: Johnson University is doing more now with an emphasis on spiritual formation. When I first came here forty-five years ago in 1969, there were two huge assumptions. The first was that everyone who came here was a Christian. And number two, everyone has a pretty good idea of what their calling is. Those were probably wrong assumptions back then, but they are sure wrong assumptions today. There is no way that everyone who comes here for orientation is a committed Christian. They are all over the charts. There is no way to assume that everyone here is a Christian, and there is no way we should assume that they are clear on their call from God. Over the last five, six, or seven years, we have made major moves toward spiritual formation. No one ever did anything like this years ago. It was just assumed that everyone read their Bible and prayed. We have realized that physicians heal thyself. But if you are going to be about the care of souls, your soul better be pretty healthy.
L: Yes, I remember Dallas Theological Seminary going to a spiritual formation requirement as well. When Swindoll returned as president there, I think their administration realized that seminary can be dark days for some students.

D: Well, the Bible becomes a textbook. Chapel becomes a requirement. All the things that should be a joy are overshadowed, because you have to read five chapters of Romans tonight. I mean, what are we doing to these people? So that’s my broad umbrella perspective. Is that helpful?

L: Yes, very helpful. Thank you. The second question deals with more of the education end of things. What do you feel should be the minimum educational standard that adequately prepares a student to enter the field of pastoral care ministry?

D: Yes, probably if for no other reason to make sure they have some self-discipline. When I was up in Indiana – Chrysler – when they were hiring, you had an edge if you had a college degree. And they didn’t care what the college degree was. The fact that you had been to college and disciplined yourself to complete the course of study and jump through all the hoops to complete the program says that you are a disciplined person. Education itself says – alright, if this is what they say to do, you know how to do it. So we should require some kind of educational standard if for no other reason than to determine, look, will you even do the work that is necessary? If you are a lazy bum, then don’t even go into this. Because the care of souls requires great self-sacrifice, and discipline, and time management – all the things you learn in an educational environment.

D: Besides that, hopefully you’ll get the scriptural undergirding and then there’s the theological as well. Someone is requiring you to think about thinks that perhaps you haven’t had to do before. Some people come in with a fantasy here. I tell my students that 90% of the time, people in your church don’t know 90% of what you do. People may look at you and say, “wow, what a cake job. He gets paid $38,000 a year and what does he do? Does he just sit in his office and pray, and then writes a 30 minute speech?” They don’t have a clue. And then I think some people are attracted to it thinking, wow, that’s an easy job. As so, coming into a formal course of study, and internship, they realize that this is real work. A part of what the education does is that it destroys your fantasies and brings you into the reality of what this is really going to be like.
L: If I was a 17 or 18 year old man, and I was really feeling God’s call on my life to preach or pastor a church, and I came to you to ask you what would get me going in this. If I take an Associate’s Degree is that enough? Or, do you recommend for me to go on and do the whole bachelor’s program? Do you have a strong opinion on that?

D: It would depend. If I meet with you and I realize that holy cow, this guy is awesome, I would say let’s not waste too many years of your life, assuming he was 38 or 42 or something like that. If God had given him the whole package, he has the voice and he’s smart, I’d say let’s get you the foundation in the Associate’s program and get you out of here and get you going. But, no one is going to hire someone if they are just 18. You have to do something for four years to grow up. But I really think it is a case to case basis.

L: Ok – so let’s assume that I did stick around through the Bachelor’s program. Would there be some advantages of me staying for the Master’s program? The specific question is how do advanced graduate studies provide advantages to students in terms of being prepared to address needs of bereaved families?

D: [Long pause]. I don’t know. I have two Master degrees. I do not have a doctorate. I remember reading a whole list of “ministry is…getting your Master’s degree in Augustine theology.” Only you realize that when you go to a church people respond to things like a bumper sticker that says “honk if you love Jesus.” When you get down to real pastoral care…I mean, if you are going on to do scholarly studies, or to be a professor, I would suggest a Masters. But if you are going straight into pastoral care, I don’t know if a Master’s is what you need. If you come to college for a Bachelor’s degree in a good well-rounded program that will teach you hermeneutics and how to study and how to communicate it and how to have a heart for the people, we should be able to do that in four years…if you love God and love others, He is going to bless you and show you how to do it. Now – after I complete my bachelors in youth ministry and worked in it for ten years, making all kinds of mistakes, I realized then that a Master’s degree could be helpful. Then, you recognize how much it is that you do not know. Many younger people go to school just to go to school, but a Master’s degree, if you wait a while, you go to learn something…Being in higher education, I have a hard time answering that question. When I did my Master’s degree, I did not fully know how God would use it. But, one day as a youth minister, I was asked to step into being a senior pastor of my church, due to the fact that our pastor was involved in an affair, and it was like God saying, “See, I have been preparing you for this.”
L: I really appreciate your honesty about that, and how you seem to be saying that higher education beyond a bachelor’s degree really depends on a number of things, such as maturity level, experience, and a love for learning.

L: Ok – next question. As you think about funeral ritual and bereavement, what are the most worrisome short-falls (or weaknesses) in the educational program of your school if any?

D: Yes, good question. When we moved from a college to a university, it really opened up the number of courses and specialties we could offer. Up until then, it would have been only 21 hours in your specialty – youth ministry, preaching, whatever. Now, we are up to 39 hours. So this was something that I used to be frustrated about. But not now. The primo professor who taught the core of our ministry program – he was one of the most intelligent guys I’ve known with 1 or 2 PhDs – he said our ministry training was above anyone else that he knew of…and I know he was being recruited heavily by other schools. He did a lot of comparisons with other schools and thought our original 21 hours was very strong for ministry training – this does not include normal courses in Bible and theology either. And now we have 39 hours dedicated to training in ministry. So yes, for an undergraduate school who teaches a lot of different classes, I do not have a lot of frustrations about our program at this point.

L: Well it sounds like you have a lot of advantages here at Johnson now in terms of general ministry training, but I want to get into some of the more specific ideas of training as it relates to grief and bereavement. Given the religious and cultural diversity that exists in our society, do you think families who experience a loss today still have a need to search for meaning through funeral services and rituals?

D: I think they need it – though I don’t think they always feel it. Culturally for people who are from around here, when people die, they want that ritual. We know what we are supposed to do. In the town I pastored, we had one little funeral home – just a little house – but maybe the best funeral director I ever worked with in my life. At every level, he was great. But he could not survive in a town of 900 – just not enough people. He finally had to move to Pensacola Florida and bought another funeral home. He became very frustrated. In his original funeral home, he did what he was great at, and everyone really appreciated him. He loved to work with people. But now, he told me, “Dave – when an old widow dies here [in Florida], his kid out in Texas says just burn him and ship the ashes out our way.” And he says, I’m doing everything on email or phones, and he says that he gets the body and takes it to the crematory – this is not what I want to do.
L: Can you expand on this some more?

D: Yes, in some areas, I think the issue is more geographic. They don’t feel the need for rituals or ceremony. I think they need it. I don’t like the word “closure” but you need that time of grieving to be with people who love you – they don’t know what else to do except come to the funeral home and hug you. They want to see you – to hug you – to stand in line and support you – to give to your church or heart association or whatever. So I think people need that, but apparently in some quadrants they are not sensing that they need it. Just burn dad and ship him to me and we’ll put him on the mantle or something like that.

L: The term that I am keying on in this research is what you are eluding to – it is called deritualization. You know, anthropologists even tell us today that you cannot go back to a period of time in human history when dealt with our dead without any ritual. One question I’m considering is what happens to our society - to us – as a result of deritualization. Now, you mentioned a word a minute ago that is surely something I am considering in this research – you said something about closure. Do you care to elaborate a little more on this for me?

D: The term gets thrown around a lot. Someone told my dad when my mom died that the first year is the hardest – the first holiday, the first Christmas, the first Valentine’s Day, whatever, the first anniversary – and my dad said that is a bunch of crap. Every anniversary is hard – every Christmas is hard. It’s not like once you get through the first year it is all over. What then in the world is closure? If they find the dead body of my grandchild, does that mean I have closure now? Of course not.

Part II: The Hermeneutics of Bereaved Families

L: Ok – next section. You were talking earlier about a shepherd and his sheep, and understanding the needs that the sheep have. Tell me what your school teaches with regards to the acute needs of a bereaved family.

D: To get them thinking about it, I give my final exam at the start of the semester. I want them to know what they are going to have to do. So they really must get into the text books that they just bought. I give them a case study and do interviews. I also give them this article from the Metro Pulse that took place in Vermont in the winter. A snowmobile fell through the ice on a lake. Which means that there was a woman back on shore who just lost her husband, her daughter and granddaughter all at the same time. This is part of my final exam. If you are the preacher at their church, and get called over to their house, I give them a few questions. First of all, write down the first words you would say to
Mrs. Miller. What would you literally say at the moment? Some want to cop out and say just be silent – but that doesn’t always work for the preacher – people want to hear something from them. Then, I ask them to write out in manuscript form, the first five minutes of their funeral sermon. And then the third thing is, what would you do to follow up with Mrs. Miller over the next six months? It gets them thinking for my 2 or 3 class sessions on grieving and funerals and hospital visits – all that stuff. They tell me “holy cow – you mean I have to walk into these rooms and people are going to expect me to say stuff?”

L: So what are the right answers?

D: Well, again, if you really love the people - anything you say will probably be forgotten within a few minutes. You still have to say something. Yet, there is a ministry of presence – like when the big ol’ biker dude comes to the funeral and sits next to you with tears in his eyes and just pats you on the leg and doesn’t say a word. That is the guy you may remember 10 years later. There is a ministry of presence. But at some point, you’ve got to be the shepherd. You’ve got to be there and say something. Eugene Peterson, the guy that translated the Message, I’ve been reading his biography, called the Pastor. It’s magnificent. He was talking about a guy he’d been doing accountability with – so they went into this restaurant and were having coffee – and then they were done and were getting ready to walk across the street to this guy’s church – and Eugene said he has to go to the bathroom. And so he does and this guy is just standing at the counter talking to this waitress. He’s apparently in this real deep conversation with her and ends up praying with her before he leaves. So as they leave, Eugene says to the man, “boy you were really having a good conversation with that waitress.” He said, yes, I wish I could do that all the time – connect with people. Eugene says, “why don’t you?” The man’s answer was, “cause I gotta run this damn church!” Isn’t that just great?

L: Yes – what a story!

D: So I tell my students to not get so caught up in running the damn church you don’t have time for the sheep. The sheep then become almost an irritation, rather than the main function.
L: I like that when you talk about pastoral care, you called it the care of the soul. Does your school only focus on the realm of spiritual healing and wholeness in caregiving?

D: Well, I think it is both. Willow Creek, the megachurch, did that Reveal study years ago – I don’t know if you ever saw what they came out with. The largest church in American at the time – and they realized they had made a mistake. Their mission statement is to turn irreligious people into fully developed disciples of Jesus. And they are doing a magnificent job of winning irreligious people to Christ. So then they made the assumption that if they come to our building we will win them to Christ. We have seeker-oriented services. Then, if they keep coming to our building, they will emerge as fully developed disciples. But – that wasn’t happening. We were not teaching them to become self-feeders. We were teaching them that if you come here, we will keep feeding you. But at some point, you’ve got to learn to be a self-feeder. So, they are revamping everything. So, I see part of the role of pastoral care is teaching people to be self-feeders. And yet, there will always be that element – Mom dies, so call the pastor – see if he can come over. That is when the repair – the healing – whatever you want to call it – of wounded or damaged souls comes in. So there is the element of teaching people to be healthy, but even if they do everything right – they don’t ever smoke, but they can still get cancer. So at that point, you come in as more of a physician – rather than a feeder.

L: Perhaps in contrast to Willow Creek, if you are thinking about a healthy faith community, does the church itself, beyond the pastor, have a role in helping families through their grief? What effort is made to discuss a congregation’s involvement to bereavement care in the program, both prior to and after a funeral?

D: Oh yes. They have to all get involved. It says in Ephesians that it is the role of the leaders to quip God’s people for works of service – not to do all the works of service. In essence, that means that you are never working yourself out of a job. There are always new people to equip. And there are always people who say that you are getting paid to be here. But you have to train – there is no way 1 or 2 people or 3 or 4 staff people can do all of the pastoral care in a church. A good example of this is the Stephen’s ministry.

L: Yes, what do you think about that?

D: Well, I have a guy here, who is a part of that ministry. I have him to come to do a 15-20 minute blurb about it in my pastoral ministry course every spring. And from what I’ve seen of it, it is very good. I use it my church I pastor now in north Knoxville.
Appendix B: Interview Documentation

L: This does lead into another question. Does your program encourage working collaboratively with other organizations or professionals to provide pastoral care to a family following a loss? You may have already answered this a bit with the Stephen’s ministry example.

D: Gosh no! Why reinvent the wheel? I tell my students that they need to recognize that there are others that have been doing this for thirty years. We could try to do some of these things ourselves for free, or I’d rather cough up a few bucks and work with folks that are doing something so well. So no problem with collaboration at all.

L: What specific courses in your program help students understand family dynamics—specifically in terms of how different generations interact with one another to cope with the impact of acute loss?

D: I’m not sure how to teach this. I try to model it, but how do you teach it? One of the assignments in our pastoral ministry class is to go to lunch with me. I pick out the place and I buy. I ask them to bring 3 questions to lunch that is part of this class. But a part of this is that they see relational skills demonstrated. How I make people feel comfortable when they get into the car. What we talk about in terms of small talk. So I try to model it. Also, when I have students over at my house all the time. We do retreats and everything else. These are vital skills—learning how to deal with people. You need to know how to be around the banker who invites you to the country club and how to act when he introduces you to all of his friends who are judges. At the same time, know how to relate to simple country folks. Paul says be all things to all people. I just don’t know how to do that.

L: Specifically, how does your school educate students about cultural diversity and its influence on bereavement? Do you have specific course about this?

D: Yes, we do. In the pastoral ministry classes—which is supposed to be about the day in and day out activities of a pastor. Some students call it the “marry them and bury them classes.” But was also talk about worship—a major component of your weekly service. If you are going to do that, then we must talk about this millennial divide. There are at least four distinct cultures—you have your dad’s generation where the church should look and smell like this, with suits and ties, no ladies passing the offering plate—then you got the baby boomer generation, where we are a little looser, but we have memories of church in the 50s—then we have my daughter’s generation, those in their 30s—then you have the millennials with the shirttail out and sandals and everything
else. And our students have to be aware of that. Even planning a worship service.

L: Is there more to say about how we understand our diversity?

D: Yes. Gordon McDonald, who has a book called *the Resilient Life*, has a chapter we use that talks about the primary questions you need to ask at every decade of your life. I heard him actually go over this at the Billy Graham center at the Cove. For example, in my 20s, we ask, who am I? In my 30s, we may ask, why am I not progressing more quickly? This goes all the way up to the 70s and 80s. You are asking questions like, is there anyone still around who remembers who I used to be? Why do I feel ignored by most of the culture? Who is going to be around when I die? I go through these decades with students to help them understand. This is to help them in pastoral care and in planning worship services. Is there anything you are going to do that blesses this 80 year old? No one remembers who she was, or what she used to be, or how important she was to the life of this church. I tell my students, are you doing anything to ministry to her – or are you just looking at doing whatever is hip or postmodern? Yes, we do address this kind of stuff. We could spend whole semesters about it. I’m not sure how much time you need to analyze it, other than making them aware.

L: Remind me again what is the name of course that discusses interpersonal skills needed for ministry to the bereaved? Is it simply pastoral ministry?

D: Yes.

**Part III: The Care for Bereaved Families**

L: Ok. Now in your pastoral ministry course that deals with grief and bereavement, what textbooks do you recommend or require to read, besides Scripture of course?

D: Well, we are changing it this year in fact. Let me refresh myself. The one I dropped was *15 Characteristics an Effective Pastor*. Last year the textbooks were: *15 Characteristics of an Effective Pastor*, and then *Jesus the Pastor* by Fry, I’m keeping that, and *On Being a Pastor*. Would you like for me to print that out for you?

L: That would be terrific. Thank you.

D: I’ll give you a copy of last year’s syllabus. But this year I’m adding some. There are so many. Good night! I could add twenty books. So I’ll give you a copy of the syllabus I’m working on this year.
Appendix B: Interview Documentation

L: Ok – let me ask you this: how are the students introduced to the specific topic of grief?

D: Well, when you teach a topic as broad as pastoral ministries, talking about marrying, burying, hospital visitations, and even candidating for a church position, you only have 30 90-minute sessions, all you can do is just scratch the service of every one of those. But every handout they get when they come in, has got a list of resources.

L: How much do you actually talk specifically about grieving?

D: We are going to talk specifically about it one day. But when you get out there are realize that you should have paid a lot more attention, here is a list on your handout of 15 books, websites, seminars, to figure out how to do this better.

L: Do you already have a handout like that for grief?

D: Yes, in fact, I can give you that too. I have a handout with resources specifically about grieving. Some of these resources are websites. So this is giving students tools they can use or books they can buy. So, once you get out there as a pastor, and you realize that you blew this class off, and then a kid in your church dies, then suddenly you are interested in following up on some of these. Where is that book about the hard sermons to preach and can I get it with overnight shipping?

L: Very good then. Next question. Which courses in your educational program are designed to discuss the role of rituals in funeral service?

D: It’s the pastoral ministry course. We don’t go into a great amount of detail on the rituals, because that varies so much from culture to culture. I’m surprised for example of how different funerals are in Tennessee than they were up in Indiana. Then in recent years, we’ve seen a shift to just 2 hours of visitation and then the funeral at 7pm. It was always 4 or 5 hours of visitation and the funeral the next morning. That was the model for decades.

L: How many sessions do you dedicate to funeral ritual?

D: There are two sessions. I may even call you for one of them, but your funeral home may be too far to drive. What we normally do in one of our sessions, is go over to Atchley Funeral Home in Seymour – it is like an 8 minute drive from campus. Again, we don’t have a lot of time. But we do get 60 minutes in that building – the funeral home. But I tell the guys and we’ve been doing it for years. Basically, we have the funeral director tell the students what preachers do at
funerals that are not very good. They have lots of stories to share. Then we do a Q&A where the students can ask the funeral director’s any questions. Of course, some kids want to go see “the room.” So we plan on doing a tour of the whole facility. They see the preparation room, the chapel, which usually has a dead body in a casket. They get to see the selection room of where families choose their caskets. Sometimes they freak out. I tell them, you can't be freaked out by this, you are going to be the preacher. It is a fast moving hour. But I tell them wherever they go when they do their first funeral, just listen to their funeral director. He’ll tell you where to stand and what to do if you need help. We have too much to cover in this one course to teach them all of the details, so many times young pastors have to just depend upon the funeral director for guidance. Rather than take class time, I tell them that the funeral director knows what to do. And he'll tell you every minute detail.

L: How well does your school explain how meaningful rituals aid in grief adaptation?

D: We are very challenged with time. We have one session on grief which typically follows a lecture on hospitals. Then we talk about a session on funerals and a visit to the funeral home. That’s four sessions out of thirty – that’s a nice chunk – but it is not enough. It is just not enough.

L: Do you feel that your school gives adequate time to developing student knowledge of how individual/personal spirituality can help families cope with loss? Why or why not?

D: Well, our whole program has a solid core of classes that deals with that.

L: It sounds like it deals with spirituality, but not necessarily spirituality in deference to grief per say.

D: One of the latest census discusses the issue here. The fastest growing religious category was the none. N-O-N-E.

L: For me, one of my chief concerns speaks to this very idea. For the nones, who provides the pastor care when they experience a significant personal loss? And so, that is why one of my questions is how do you see the relationship between pastors/clergy and funeral directors changing in the future in terms of their roles to offer bereavement care services to families?

D: You know this varies from town to town. In my hometown, I was the town chaplain, whether they went to my church or not. It was a real ministry for me. D: I went the house to meet the family and attended the visitation. I like to make it personal and share real stories.
L: Well since you mentioned it, I do have many pastors that, without any particular malice, they just do not mention the deceased in their funeral sermons. It is all about heaven and hell and finding Christ.

D: I do understand their mindset – their method is certainly without malice, but the whole reason we got here is because this guy died. Why are we sitting here anyway? If he is a Christian, I can talk about him and talk about Jesus. Because God gave us Frank and He gave us Jesus – those two gifts are going to continue on. There is hope. But even if he never met Jesus, we are still here because this guy died. I may not be able to talk a lot about his eternal future, but I can talk about his past – about how much he meant to you all. You all loved grandpa – he taught you how to fish. We still celebrate a life. I still make the transition at the end. I say, look, I didn’t know Frank – but I've loved your stories about him. It has been fun celebrating his life. Let me tell you about somebody I do know though. And that is Jesus. I’m really glad that I met him. If you are going to give me this audience, I’m going to at least make a blurb for Christ. But I sure don’t understand not mentioning the deceased. This guy lived to be 87 and we are not even talking about that stuff.

L: What is your opinion about funeral homes offering after-care as part of professional funeral service?

[LONG PAUSE]

D: I have mixed feelings about it. Obviously, you guys have services that we need to take advantage of – we cannot go out and embalm our own person. When my dad died recently, the funeral home provided some grief literature for us. But I don’t know – maybe it doesn’t mean any more to families to receive that than getting a birthday card from my insurance guy. It is nice – I get it. I know families appreciate your personal touches, but I still think that they see you as a business and a provider of services – more than someone we are expecting to minister to us.

L: The funeral industry has been around for a while. But now the industry is rethinking its importance. Is there something that we can do that is more than a sympathy card…particularly as the number of families without church support grows?

D: I see what you are thinking. I can see people at church saying – hey, I don’t need you for that – I have people at my church talking with me and inviting me out to lunch.

L: But what about those without traditional support? Is it the funeral home’s place to step in and help?
Appendix B: Interview Documentation

D: It reminds me of the Dollywood Imagination Library – could funeral homes send us home with something about grief? And then 3 months later, you get this little booklet, or even a book. With the Dollywood Foundation, my grandkids get a new book every month. Then again in a few months. I don’t know – maybe Elizabeth Kübler Ross’ stuff. It is almost irrelevant to me what it is, it is just that we [the funeral home] realize that you are going through this. And then at 6 months or a year, a card that says we’re remembering Frank with you guys today. Three or four touches would be deeply appreciated. You may never hear back from them about it though. I use this little CD for friends of mine who are going through grief. I’ve got people who get this CD, and a little booklet. It is by Dr. Tim Clinton. You can buy it on-line on Christian Books or Amazon for 2 bucks. This is for the dark nights, you know, when nobody is around. Let me play you a clip.

[Plays a clip from the CD – introduces a four people who lost their loved ones – tells their stories with soft pleasant music playing in the background.]

D: This is what I call “hands-off” after-care. You don’t know if it is effective. I’ve mailed out 40 or 50 of these CDs over the years, and probably have had 5 or 6 mention it to me. People who do say something about it do so with great emotion. Man, I’ve listened to that CD 100 times.

**Part IV: The Encounter of Bereaved Families**

L: Would you share your opinion of what explains the changing public attitudes toward traditional funeral ritual and pastoral care?

[LONG PAUSE]

D: I don’t know, but I have thought about it. Death was always one of those taboos – like how much do you make? Maybe we are just trying to gloss over the reality of what has just happened here. And in the process of that, if there is not much eternal reality for them, if you don’t have any concept of that, if you have already given in to this concept that we come from nothing and go to nothing, you get 70, 80, maybe 90 years, and that’s it. Then, what is there left to do except celebrate the 70, 80, 90 years? There is nothing else to celebrate. And so we just party and sedate ourselves. It may be that we are responding to this reality. We have moved to a self-indulgent, narcissistic culture and the end result is let’s throw a party. We don’t know what else to do. The funeral becomes more about the people that is there. For the most part, we can’t do what Jesus does – we don’t cry. The problem is that as soon as you start crying, we stop thinking about Frank and Jesus, we are thinking about ourselves.
L: How well is your school adapting to the changing attitudes about funeral rituals and ceremonies?

D: Through our work with Atchley Funeral Home, we do get to hear about what people are wanting in terms of funerals today.

L: Well, going back to Frank, should his family view his deceased body again before final disposition? This goes with my question: has your school’s philosophy on the importance of bereaved families encountering the deceased body of their loved one before final disposition changed?

D: I think Frank’s family should see him again. They need to let the reality of death soak in. Ok – they are really gone. People may never really accept it. They are not going to come walking back in that door. It gives you an opportunity to properly grieve and cry with the support all around you. And I think the ritual of coming back to the church and eat is magnificent. When you come back, then you loosen your tie, and have a sense that life is going to go on. It is a vital ritual. There is great benefit to seeing the deceased body, as long as it is not disfigured.

L: Ok – just a few more questions. What are your thoughts about the use of celebrants in lieu of or in addition to clergy/pastors in funeral ritual? Celebrants learn about Frank and steps in and shares his stories with others. Your thoughts?

D: This is news to me! I’d really have to process that. Huh! You have to leave that one blank.

L: After Frank’s burial, is the church done with its ministry to Frank’s family? That is, does your school prepare students to think of their roles and responsibilities toward bereaved families as one that should extend beyond final burial/disposition?

D: I once was developing a mentoring program for premarital counseling. I wasn’t following up like I should because I simply didn’t have the time. I couldn’t meet with all the couples for weeks on end. So we held a retreat. The last session of the retreat, I got 5 older couples to meet with the young couples. I introduced them and told them that they would meet every two months. They will take you out to eat – and they will go over 2 books with you to discuss all types of marital issues – money, and sex, and whatever.
Appendix B: Interview Documentation

L: Are you saying that this would be a good idea for funerals – after families go through a loss?

D: I think so. A preacher of 80 is different than a church of 800. Use Stephen Ministry or something else. Mentors would be helpful – somebody to walk with them who has gone through this. There is a mentoring program like this for marriage, but I’m not aware of one like that for funerals. Maybe even try to match. If a couple has lost a child, then find another couple who has lost a child as well. Can I meet with you to give you some training so that you can help other couples?

L: Now the last question – and I really appreciate your willingness to share openly and candidly with me today. Has the interviewer missed something that would assist bereavement caregivers in their work that you would like to share?

D: You know, nothing jumps off the top of my head. You have been very thorough. This has all been very good. Can you leave me a card in case I think of something else?

L: Absolutely. Thank you again David, and thank you to your school, Johnson University for allowing me to have some time with you today.

Total interview time: 1 hour and 27 minutes.
### 7.4 Textbooks Suggested from a Mortuary College

#### Funeral Arts

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<td>RL Klicker</td>
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<td>Mortuary Law</td>
<td>TS Gilligan and TF Stueve</td>
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<td>Types of Funeral Service and Ceremonies</td>
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<td>Mortuary Administration and Funeral Management</td>
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<td>Discovering Computers</td>
<td>GB Shelley and ME Vermaat</td>
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<td>Complying with the Funeral Rule</td>
<td>Federal Trade Commission</td>
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<td>Psychosocial Aspects of Death and Dying</td>
<td>J Canine</td>
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<td>Grief counseling &amp; Grief Therapy</td>
<td>JW Worden</td>
<td>2008</td>
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<td>Discovering Psychology</td>
<td>D Hockenbury and SE Hockenbury</td>
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<td>History of American Funeral Directing</td>
<td>RW Habenstein and WM Lamers</td>
<td>2010</td>
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<td>Oral Communication: Speaking Across Cultures</td>
<td>LA Samovar</td>
<td>2000</td>
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<td>Interpersonal Skills</td>
<td>AD Wolfelt</td>
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<td>Law for Business</td>
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<td>BA Garner</td>
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#### Funeral Sciences

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<tr>
<td>Principles of Anatomy &amp; Physiology</td>
<td>GJ Tortora and SR Grabowski</td>
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<td>Gray’s Anatomy</td>
<td>R Drake and AW Vogl</td>
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<td>Thanatochemistry</td>
<td>JM Dorn and BM Hopkins</td>
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<td>Alcamo’s Fundamentals of Microbiology</td>
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<td>Microbiology: An Introduction</td>
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<td>ML Mulvihill and M Zelman</td>
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<td>Embalming: History, Theory, and Practice</td>
<td>RG Mayer</td>
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### 7.5 Textbooks Suggested from a Christian University

#### General Pastoral Care

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<td>On Being a Pastor: Understanding our Calling and Work</td>
<td>DJ Prime and A Begg</td>
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<td>15 Characteristics of Effective Pastors</td>
<td>KW Mannola and L Walkemeyer</td>
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<td>Jesus the Pastor</td>
<td>JW Frye and EH Peterson</td>
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<td>The Pastor: A Memoir</td>
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#### Pastoral Care: Ministry to the Grieving

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<td>Seven Choices: Taking the steps to new life after loss shatters your world</td>
<td>EH Neeld</td>
<td>1997</td>
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<td>The Winds that Destroys and Heals: Trusting the God of Sorrow and Joy</td>
<td>SE Broyles</td>
<td>2003</td>
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<td>A Sacred Sorrow: Reaching Out to God is the Lost Language of Lament</td>
<td>M Card</td>
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<td>The Hardest Sermons You’ll Ever Have to Preach</td>
<td>B Chapell</td>
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<td>Speaking of Dying: Recovering the Church’s Voice in the Face of Death</td>
<td>F Craddock, D Goldsmith, and JV Goldsmith</td>
<td>2012</td>
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<tr>
<td>The Good Funeral: Death, Grief, and the Community of Care</td>
<td>T Long and T Lynch</td>
<td>2013</td>
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<td>Grieving a Suicide: A Loved One’s Search for Comfort, Answers &amp; Hope</td>
<td>AY Hsu</td>
<td>2002</td>
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Glossary of Key Terms

Bereaved

A person or persons to whom the experience of loss has affected.

Bereavement

The existential experience of being “torn apart” or “having special needs” (Wolfelt 2013:1; Wolfelt 2006:29).

Caregiving

Describes the activity of nurturing care before, during, and after the experience of a loss of a significant other to death. Caregiving seeks to establish an “inclusive public space for doing pastoral care” framed in terms of relational and inter-relational networking (Louw 2014:24).

Chaosmos

An insightful term for pastoral care to describe how ordinary life in the world is not simply constructed by order and design, but partly by disorder and chaos as well (Louw 2015:163). In this way, bereavement caregivers traffic in the chaosmos that often exists at the margins of life and death.

Deritualization

Broadly denotes the growing trend in the United States of a public openness to revise, replace, minimize the significance of, and even eliminate/avoid long-held traditional funerary rituals to assist in the adaptation of loss. Deritualization describes a breakdown, disruption, or loss of ritualized activities in daily life, but does not necessitate a total collapse of all ritualized forms (Sarabia and Knottnerus 2009; Thornburg et al. 2007). The Latin prefix de does not require negation, but points to a removal, separation, or privation (i.e. lacking usual comforts or necessities). The term deritualization does not suggest the loss of a particular prescribed ritual form, but is useful to describe current cultural shifts.
affecting the context of bereavement care. The deritualization of traditional forms does not preclude a re-ritualization of new and creative symbolic forms (Cann 2016).

**Ethnography**

A process of attentive study of, and learning from, people – their words, practices, traditions, experiences, memories, insights – in particular times and places in order to understand how they make meaning (cultural, religious, ethical) and what they can teach us about reality, truth, beauty, moral responsibility, relationships and the divine (Scharen and Vigen 2011:16).

**Grief**

Defined as the ubiquitous human “experience of one who has lost a loved one to death” (Troyer 2014:40).

**Interdisciplinary Research (IDR)**

Interdisciplinary studies is a process of answering a question, solving a problem, or addressing a topic that is too broad or complex to be dealt with adequately by a single discipline and draws on disciplinary perspectives and integrates their insights to produce a more comprehensive understanding or cognitive advancement.

**Paradigm of Comforting Presence**

A paradigm of comforting presence described a posture for twenty-first century bereavement caregivers in terms of an “informed there-ness” involving knowing, being, and doing functions among those facing loss and reframing life. The paradigm provides a helpful description of how caregivers move care seekers toward re-ritualization, with an intentionality of restoring and reengaging in creative and meaningful ritual forms. The paradigm was developed in terms of comforting information (i.e. knowing functions: an advanced understanding to anchor the bereaved against the forces of grief); comforting dialogue (i.e. being functions: the courage to be open to the pain of others, alterity to respect the mystery of death, and embodied listening toward shared stories); and comforting activity (i.e. doing functions: ritualization within practical, pastoral, and proclamatory elements of bereavement care). An “informed there-ness” depicts bereavement caregiving as a dynamic movement characterized by knowledge, hermeneutics, and method.

**Pastoral**

Reflects a broad intercultural framework for faith-based caregivers who are guided by Christian compassion. The term “pastoral” is not used in a formal clerical sense that limits pastoral care exclusively to ordained clergy, preachers, or other formalized sectarian ministries (Farley 1983). The study
operationalizes the term “pastoral” not to refer to a person of a religious order necessarily, but to a motivation or attitude characterizing caregiving ministry.

**Pastoral Care**

Pastoral care is more broadly understood as “a mode of hospitable outreach to all human beings irrespective of race, gender, and cultural diversity” (Louw 2014:24).

**Practical Theology**

The study where religious belief, tradition and practice meets contemporary experiences, questions and actions and conducts a dialogue that is mutually enriching, intellectually critical, and practically transforming (Woodward and Pattison 2000:7).

**Promissiotherapy**

As an academic term defined simply as hope care (Capps 1995; Capps 2001), promissiotherapy is the healing and empowering effect of God’s fulfilled promises in the present (Louw 2014:501). As a distinctive feature of pastoral care, promissiotherapy recognizes the art of being present to those within the realm of existential suffering and woundedness in an effort to provide new energy and imagination in order to affirm life. Hope care is not limited to an eschatological future event alone that may bring comfort to bereaved people of faith, but extends to a holistic perspective applicable to personal and social spheres of everyday life within a postmodern context.

**Psychology**

Defined generally as “the scientific study of behavior, thought, and experience” (Krause and Corts 2012:3).

**Qualitative Research**

A research community “of globally dispersed persons who are attempting to implement a critical interpretative approach that will help them (and others) make sense of the terrifying conditions that define daily life” (Denzin and Lincoln 2011:xiii).

**Reframing**

Reframing as a key term utilized in the study was “to change the conceptual and/or emotional setting or viewpoint in relation to which a situation is experienced and to place it in another frame which fits the ‘facts’ of the same concrete situation equally well or even better, and thereby changes its entire meaning” (Capps 1990:17).
Re-Ritualization

An intentional act of restoring and reengaging in creative and meaningful ritual forms that give symbolic expression to significant thoughts and feelings of the bereaved within a social ethos that is no longer committed to a conventional or fixed approach to ritualization. Components of ritualization are no longer fixed or predefined, as in traditional approaches, but represent various modes that provide a means by which families can meaningfully share the story of one’s life across a spectrum of pastoral care initiatives.

Spirituality of Death and Dying

A ubiquitous human need for comfort, wholeness, and hope within the processes of suffering and the adaptation of loss. ‘Spiritual’ in this sense is connected to the idea of a transcendent source or means not confined by the mundane. In other words, a ‘spirituality of death and dying’ relates to the internalization of loss within the existential realities of life.

Thanatology

The scientific study of death, dying, and bereavement.
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Doctor of Philosophy (DPhil) 2004
Oxford Graduate School; Dayton, TN
Field of Study: Sociological Integration of Religion & Society
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Professional Affiliations:
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Research Associate; Finance Manager
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Professional Publications & Presentations


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Educational Seminar: Good to Go: What to expect when you’re expiring. First Baptist Church, Maryville, TN. Presented by C. Lynn Gibson, DPhil, CFSP, and Chris LaRue, June 13, 2010.

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March 24, 2011. Web Seminar: If you’re not the death care expert in your community – you should be! Presented by the National Funeral Directors Association and Dr. John Canine, Maximum Living Consultant, Clarkston, MI.

March 7-10, 2011. Comprehensive Bereavement Skills Training. The Center for Loss and Life Transition and Colorado State University, Fort Collins, CO. Presented by Dr. Alan Wolfelt, Director.


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June 17, 2009. The Art of Companioning the Mourner. Heritage Family Funeral Services & Washington County Memory Gardens. Presented by: Dr. Alan Wolfelt, Johnson City, TN


August 14-15, 2006. Family Business Conference. National Funeral Directors Association, Cleveland, OH. Presented by Ernesto J. Poza, Professor of Weatherhead School of Management, Case Western Reserve University, Cleveland, OH.

September 7-9, 2004. Exceptional Events: A New Frontier for Funeral Service. The Independent Funeral Group, Inc. Fall Conference, Gatlinburg, TN. Presented by Richard Aaron, CMP, CSEP, President of BizBash Media, Associate Professor for Event Management, New York University, NY.

February 15-17, 1995. Improving Managerial Skills of the New or Prospective Manager. American Management Association, Dallas, TX. Presented by Jack Pratt, President and CEO of Summit Asset Advisors.