the Undiscover'd Country

Customs of the cultural and ethnic groups of New Zealand concerning death and dying

Department of Health
the Undiscover'd Country

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"—death, the undiscover'd country from whose bourn no traveller returns."

Shakespeare
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FOREWORD

In Maori culture, people believe that everyone has a Te Taha Wairua. This is the life force of a person. It is the non-material spiritual part, or the "vital essence".

To Maoris, the Te Taha Wairua determines who you are, and where you come from. Also, it determines where you are going and it gives you a vital link with your ancestors.

Most races and culture groups in the world believe in some sort of spiritual being. This is true even where people within a race hold individual ideas of spirituality. It is hardly surprising then that there are so many different customs associated with the time of death - the period just before a person dies, and the period just after.

When I was working with patients, I got to know some of the different practices associated with death. It was a gradual learning process, over a period of several years. This experience gave me the idea of bringing together material on this subject for the benefit of people working in hospitals.

This is a project that grew from an idea I have had for many years. I am grateful to the Department of Health officers who have brought together contributions from a number of members of the public. I am grateful, too, to the authors. They are busy people who have contributed willingly: I appreciate the time and thought they have given to writing for us, or speaking to us in interviews, about their beliefs and customs.

I hope that this booklet will be distributed widely. I would like it to be available as a reference in all hospital wards. Also, I would like to see it used in training schools, for students in various health sciences.

I trust that our booklet will help people who care for patients, and their relatives, at the time of death. I hope too that it will succeed in helping the people who are coming to the end of their journey, - or perhaps to its beginning.

Dr R A Barker CBE
Director-General
Department of Health

March 1986
INTRODUCTION

Customs relating to death and burial within an ethnic or religious community are often unwritten and can vary between members of that group. This booklet is not therefore a definitive statement of each group's customs. It is intended to be a general guide to the customs of different communities.

Often ethnic minorities do not feel able to practise their customs because they find hospitals intimidating or unfamiliar. Western religious groups generally do not have this difficulty, largely because they can communicate their needs easily in English. The purpose of this booklet is to make hospital staff aware that a dying person and his or her family may require special attention and concessions, or that the dead body should not be treated according to usual hospital procedure.

Some practices are common to many of the communities. A religious minister may be called to a dying person. Death prayers may be offered up to gods or ancestors' spirits. All these communities had some form of funeral ceremony. However, the form of funeral rites varies widely. Some allow cremation, others insist on burial. Polynesian communities include feasting. While food features as a sacrifice to the gods in Asian cultures, western religions do not see food as having any particular significance at death.

An interesting feature of these accounts has been the almost universal opposition to post-mortems outside western religions. Usually post-mortems are objected to on ethical grounds—the body should not be tampered with. This issue has not always been treated well by hospital staff.

The authors of this booklet are respected members of their communities. Many are church leaders. All have had substantial experience with the deaths of members of their community in New Zealand and many have experienced difficulty in meeting religious or ethnic obligations to the dying person while keeping within hospital regulations.

We thank them for their time and effort in providing accounts of their customs. It is hoped that through this booklet a better understanding can develop between these communities and hospital staff over the treatment of dying people.
DEATH, DYING AND GRIEF,
A MAORI PERSPECTIVE

Na Paratene Ngata

INTRODUCTION

Like many other cultural groups, the events surrounding times of serious illness, dying, death and grieving, are among the most sacred and important in Maori life. They are steeped with tapu (sanctity) and kawa (ceremony). The rituals and customary practices are elaborate, the reo (language), karakia (incantations) and waiata (chants and oral literature) are symbolic and poetic, and the responses and reactions by all are concerned, open, and expressive. Moreover, it is essential to recognise and acknowledge at the outset that the Maori response is determined by the customs and traditions of the local tribal, subtribal or family group. While the diversity and richness in different customary practices can be clarified by local tribal leaders and elders, the primary obligations and expectations associated with sickness, dying and grieving are similar throughout Maoridom.

Te Ao Maori: The Maori Universe

The chain of events and reactions associated with sickness and dying can be more easily understood by having some knowledge of Te Ao Maori and of the cultural fabric through which health, healing, illness, death and grieving centre upon the notions of unity, harmony and balance. This means that a person lives in harmony with the natural, physical and spiritual world, and that this delicate balance is maintained through systems of customary practices and the law of tapu. Transgression of this law invokes the anger and wrath of the Gods (Atua and Tipua), a breakdown of the person's defences and protective barriers (Kaitiaki), thus allowing the intrusion of harmful and evil influences. The outcome may be Mate Wairua (spiritual sickness), which results in sickness and sometimes death.

Individuals are dependent on the whanau (family) group for support and sustenance. Collective strength and kinship ties are of prime importance, each family member contributes to the health and wellbeing of the whanau group. Consequently any illness affecting one member of the group is shared by others, and any loss through sickness or death weakens the family network as a whole. The family is considered only as strong as its weakest member or link; the most vulnerable members, particularly the old and the very young, receive much caring, nurturing and support.
BEFORE DEATH

Te Turoro: The Sick Patient/Te Tangata Taumaha I Te Mate:
The Seriously Ill Patient

When a person is seriously or terminally ill, relatives and friends gather daily at the patient's bedside in the home or in hospital to see the patient, to provide spiritual, emotional, moral and physical support for the patient and her or his family, and to pray for the patient's recovery.

1  He Kanohi Kitea: The Seen Face

Seeing the patient is very important. Maori people believe that it is much better to see a person whilst they are alive. If a relative delays visiting a very sick family member and the patient subsequently dies, the procrastinator can become overwhelmed with feelings of anxiety and guilt. Families are usually very aware of those who have visited and those who have not - the closer the family relationship the greater the obligation to visit.

2  Te Whakawhanaungatanga: Gathering of Family and Friends

The presence of family, relatives and friends is also very important. It is believed that the presence of their wairua (spirit), mauri (life spark and principle) and whakaaro kotahi aroha ranei (collective concern and love in its broadest sense) assists the healing and recovering process. People assemble at the bedside and in adjoining rooms to pray for the spiritual strength and sustenance to assist the patient and family in their time of crisis.

The interests of the patient and family are of prime concern. It may seem that the number and frequency of visitors would embarrass the family or perhaps strain hospital resources. Most visitors however, come with some form of assistance. Food and monetary contributions are shared by everyone. Many hospitals are now providing special facilities to accommodate families of the gravely ill, or of those on special treatment, and many are in the process of altering waiting room facilities to cater for family needs. The patient's favourite food items are often brought to entice eating in the hope that it will encourage a return to good health. Every guest is welcomed by the patient and the immediate family. Guests often express an unconditional guarantee of assistance if and when the need should arise. Everyone is seen to be an asset; each individual and visitor has a contribution to make, no matter how great or small.

3  Te Karakia: Prayers and Incantations

In the Maori world, karakia are an integral part of any sickness, dying, and grieving process.

They acknowledge and reaffirm the spiritual dimension and essence of human kind, strengthening the delicate relationships and links between the living, ancestral and spiritual worlds of the family person.
Karakia ask for peace, mercy, spiritual strength and guidance from the divine creator of all things. Also, they aim to reassure and assist the person who may have violated the law of tapu by invoking the protective and defensive attributes of Kaitiaki.

Karakia may take several forms. They may be recited, chanted or performed and usually incorporate references to the sick patient, immediate family, ancestral spirits of the family or tribal group and those who have gathered to provide care and support. They often combine traditional Maori and modern Christian beliefs in healing practices, and acknowledge the place and role of scientific medicine in taking care of the sick patient. The Tohunga (an expert in the tribal law, customs and healing practices), kaumatua (elders) and members of the clergy are the most important people and practitioners of karakia and spiritual healing.

While in some areas local Tohunga take care of Te Taha Maori (the Maori aspects of an illness), in others Maori clergy, elders and lay readers may fulfil both traditional and modern karakia roles. Water and certain foods also play a significant role in the karakia, both in Maori healing and in sickness management practice, as they are essential elements in many ceremonies or rituals for lifting tapu.

Following the karakia ceremony, expressions of thanks are often made. These tend to be of a general nature wishing the patient a rapid recovery, thanking the Tohunga or clergy for their guidance and spiritual help, and greeting all those present. The patient may respond and raise various important matters with close relatives and friends such as arrangements concerning the tangi or interment in the event of death, the disbursement of personal belongings, and ensuring the completion of any unfinished tasks. In traditional times a patient near death would make a final speech, the ohaki, which contained final instructions or messages relevant to the wellbeing of various individuals in or about the family or tribal group. The obligation and expectation was that those concerned would fulfil the last wishes of the patient.

Waiata (chants, songs and dance) are another important component of Karakia. They openly voice inner feelings, thoughts and emotions, and provide an appropriate vehicle through which concern, love and compassion can be expressed as a shared experience. Tears of both joy and sorrow are often dealt with at the same time.

IMMEDIATELY AFTER DEATH

Te Mate: Death

Te Tuku i te Wairua: Uplifting the Spirit

When a patient dies, the ceremony of tuku is carried out. Traditionally this was a karakia to free the spirit from the body and assist it on its way to the spirit world, ensuring
that the spirit did not remain in the world of the living. The ceremony purifies and cleanses the spirit of the deceased prior to joining the spirits of ancestors and gods.

Before and during the performance of tuku, mourning commences. Immediately, the whole scene becomes tapu; the kawa of the tangihanga ceremony takes over and the various functions and roles of all concerned become clearly defined. Amid the wailing and weeping of family, relatives and friends, the body of the deceased is carefully prepared. The poroporoaki and tangi whakahuahua (farewell speeches, tears and mourning laments) begin. The body of the deceased becomes the most treasured and sacred taonga (gift) and the immediate family becomes enshrined in a blanket of tapu and grief.

Te Tupapaku: The Deceased

If the patient dies at home, the local hapu approaches the family formally to ask whether they can take the deceased to the marae. It can be a time of confusion, conflict and anguish, particularly if no specific instructions about the marae and place of interment have been issued. A Maori person may belong to several subtribal and family groups, each of which has an equal claim both in life and in death. Once a decision has been made, other members of the hapu are informed and preparations at the marae may begin. Compromises are often made: for example the deceased may stay a night at one marae, and another at the marae closest to where the burial will occur. It is also common practice to allow the funeral procession to spend some time en route at a certain marae so that a particular hapu or family group may grieve and farewell the deceased.

Dying in hospital raises a number of important issues. Distress caused by insensitive attitudes on the part of some hospitals continues to be expressed on many marae, particularly in the event of unexpected deaths and accidents which require a coroner's inquest. While in many instances this is done as sensitively and expeditiously as is possible, the whole legal process of enquiry, delays and post mortems is abhorred by Maori people. The physical coldness and isolation of the hospital mortuary is contrary to the Maori view that the body and soul of the deceased must be kept continually warm and comfortable by the presence of kinfolk in order to appease the spirit and to assist it on its journey to the Spirit World. Delays overnight or during the weekend impair the opportunity to carry out the customary grieving practices. The deceased is a link between the living and the dead; people also grieve for those who have already passed on. The tangi and poroporoaki (farewell greetings) are given in the belief that the recently deceased would, in fact, communicate these greetings to others in the spirit world. Death is a part of life and of living. Although it is the end of a physical link with a genealogically defined tribal member, the spiritual link goes on forever.

The people who elected to remain at the bedside of the patient now become the tangata whenua to ensure that the appropriate kawa is carried out. The home or the hospital waiting room
temporarily becomes the marae. A karanga and powhiri is extended to people coming to grieve. After the tangi one or two elders who stayed with the family respond with the whaikorero. They speak on behalf of the family and inform people of the arrangements agreed to by the family. Every visitor becomes manuhiri if he or she arrives after death. Once the formalities of karanga, tangi, whaikorero and hongi are completed they become tangata whenua. Those that came to the hospital or house form the ope (party, group) which accompanies the deceased to the undertaker and then to the marae.

Those who accompany the deceased to the funeral parlour or undertaker wait until the appropriate preparations and legal processes have been completed. During this time preparations at the marae are completed to await the arrival of the deceased. Relatives from far and near may join the funeral cortège along the route to the marae. Just as the deceased is tapu so are those who accompany it.

THE FUNERAL CEREMONY

As the funeral cortège approaches the marae, the formal tangihanga kawa begins. Again, it is important to recognise that the kawa is determined by local tribal traditions which vary from one tribal group to another.

1  Te Karanga: The call of welcome

The karanga is usually performed by the women of the marae and includes sentiments and words that welcome the body and spirit of the deceased on to the marae, and acknowledge that the deceased has gone to his or her ancestors. The words are a statement of farewell to ancestors of the deceased and others who have passed on, and refer to the family and to descendants of the deceased.

Members of the manuhiri group respond with similar sentiments, acknowledging the calls of welcome while expressing sadness and pain at the loss of the family, subtribal or tribal member.

2  Te Tangi: The expression of grief and sorrow

Tears, wailing and emotional pain are openly expressed and shared as the deceased is carried from the hearse onto the marae courtyard and taken into the whare mate (special house for the dead), the meeting house or perhaps onto the verandah of the meeting house. After it is placed on a special mattress or mat, the casket is opened. Photographs of recent and past relatives that have passed on are placed around it. Wailing and crying by the immediate family reaches a climax while other relatives and friends stand, embrace each other or grieve aloud or silently. The local tribal elders on the paepae (the speakers platform) usually sit down first, followed by the visiting elders and speakers who take the front seats on the opposite side of the marae. All the other manuhiri take the other seats.
3 Te Whaikorero: The speech making

While the wailing and crying continues as before, the speech making begins. The whaikorero usually opens with a tauparapara or whakatau (proverbial statement of classical Maori oral literature), then addresses the deceased directly in poetic and symbolic language which tells of its sacredness and special status and encourages the spirit on its sojourn to the spirit world. It acknowledges those who have recently died, referring to genealogical kinship ties and links, and expresses sadness and pain at the loss of the person. Greetings and thanks to those gathered are extended. The whaikorero concludes with a waiata (a chant, song or dance) that includes feelings of sadness and despondency at the loss of a loved one referring to the loss of past ancestors.

The visiting speakers respond in a similar way, and if they are from a different subtribal or tribal group, a mau-a-ringa or koha (monetary gift to assist the marae and family with catering and funeral arrangements) is given to the marae. Reciprocity is paramount - times of grief are an opportunity to return and support the family's emotional, spiritual and financial burden.

4 Te Hongi: The pressing of noses

Having completed the whaikorero, the manuhiri move over to hongi (press noses), ruru (shake hands) and tangi (share tears) with the tangata whenua, commencing with the principal speakers and elders on the paepae. The hongi combines pressing of noses and foreheads, symbolically representing a meeting and sharing of personal mana, mauri and tapu. In doing so manuhiri and tangata whenua are made common and normal. Tapu has been removed by the kawa. The final symbolic action is the horoi ringa (washing of hands). However, the immediate family remain tapu until the deceased has been interred. They do not speak or reply to speeches throughout the tangi. They are referred to as 'te pae mate', te whare mate' or 'te kiri mate'.

Whakakotahi whakaaro: Unity of effort and support

Tangata whenua and manuhiri now become one, and each tribal, subtribal or family member retires to carry out their particular role and function. The 'ringa wera' or 'hapai ki muri' light the fires and prepare the food, the 'tu marae' or 'amorangi ki mua' prepare to welcome manuhiri, the elected women to karanga and others to assist with waiata. Younger tribal members are allocated various responsibilities depending on their interest and many learn by observing or by sitting and listening to tribal elders on the marae. All of this ensures continuity of kawa and of skilled people to carry out the various tasks.

The immediate family sit with the deceased throughout. He or she must never be left unattended. If the family leave for a meal other womenfolk sit with the deceased until they return. Over the following two or three days manuhiri come to pay their respects, giving speeches that cover a whole range of
issues. Debates concerning the burial of the deceased continue as each hapu makes its claim to their taonga. At this point light hearted laughter and good humour may begin. Although this is a time of sadness, it is believed that it is also appropriate to face the world of living again. The immediate family, the local hapu, and manuhiri stay overnight with the deceased. After the evening meal all those present gather in the meeting house for karakia. Speeches of farewell and thanks continue after the karakia service, and in many areas it is a time of re-kindling old friendships, story telling, singing and an occasion to recall recent events. References are also made to the deceased, and women are allowed to speak. The po whakamutunga (the last night before interment) is a special one in some areas. The reconciliation of the family with the real world is a positive process. Entertainment, singing and telling stories is a significant part of this.

Te Ra Nehu: The Day of Interment

The day of the funeral service and burial is called Te Ra Tapuke or Te Ra Nehu. The grave is usually dug early - its location having been decided by the family, hapu or tribal elders. The casket is closed before the sun rises, after a short church service with all members of the immediate family present. Manuhiri again start to arrive at sun rise while the tangata whenua prepare for the funeral service and the hakari (main feast).

The format of the funeral service may be a uni-, multi- or interdenominational one and may be changed or modified as the family wishes. During the service a eulogy is customarily given during the kauhau (sermon) by someone who has known the deceased very well, and reassurances that support and help are readily available are made to the family. The first part of the service is carried out at the marae or church (if one is available) and the second part is performed at the graveside. Again farewell speeches may accompany the process, and this part of the ceremony is concluded by the horoi ringa (washing of hands) as mourners leave the cemetery.

During the second part of the service, some of the local people remain at the marae to dismantle the scene and to remove the tapu where the deceased lay in state. When the group returns from the cemetery they are welcomed back onto the marae and partake in the hakari (funeral feast). Again this may be a time for light-hearted speech making and entertainment to help the family overcome their sorrow and grief.

The Takahi Whare: Tramping of the House

After the hakari - either on the day of the funeral or the day after, the takahi whare (literally tramping of the house) is carried out. Although the deceased has been buried, the tapu and spirit still prevail at home and must be freed, uplifted and encouraged to set out upon their journey. Prior to the arrival of the family group, a person who is familiar with karakia - a Tohunga, an elder or a member of the clergy -
would go to the house to carry out this process. It involves incantations, water or the use of special food to ensure the spirit of the person does not remain to harm anyone. When the family group arrives the karanga and powhiri are performed and the service inside the house begins, going from one room into the next. Following the service, speeches of thanks are expressed to all those who have helped the family through the grieving process. Warmth and ordinary family living are brought back into the house. Whakangahau (entertainment) and singing follow to assist the family and to make the house habitable again. Everyone participates - the old, young, tu marae and ringawera.

The following day most people take their leave. But the family is never left completely alone. Close kin stay on for some time. It may be a week or longer until the family has learnt to cope and adjust to the loss of one of their members. It is inevitable that others who have suffered a recent bereavement will be particularly reminded of their recent experience, and will often stay a while longer to help - so perpetuating the cycle of kin support. Every subsequent opportunity is taken to visit the grave in order to grieve in silence.

Te Kawe mate: Taking the spirit of the Deceased

Traditionally the "Kawe mate" (taking the spirit of the deceased) is a custom whereby the spirit of the deceased is taken by the family from marae to marae, so that people from areas where the deceased had strong whakapapa (genealogical kinship) ties can mourn for him or her. In the past this often took many days to accomplish; nowadays only one or two marae are visited. It may take place several months later, or even a year - the person's spirit lives on forever. The kawa or protocol is much the same as the tangihanga ceremony.

Te Hurahanga Pohatu: Unveiling of the Memorial Stone

The final event in the grieving process is the Hurahanga Pohatu (unveiling of the memorial stone). This takes place some time after the deceased has been buried - usually one to five years later.

TE AO HURIHURI: THE CHANGING WORLD

Changes in socio-economic circumstances, population and family structure, and modern living have had a profound effect upon the traditional grieving and mourning practices of Maori people. From a strong land-based whanau network and support system has evolved a predominantly young, landless, urban population. Many of the young do not have the language, knowledge, whanau or cultural foundation necessary to fulfil many customary obligations and practices. Fragmentation and the wide dispersal of the whanau support unit, the pursuit of many other modern lifestyle goals as well as the increasing social and economic costs in maintaining traditional ties, have eroded the fabric through which grieving, death and dying practices are interwoven. Many changes in grieving and
mourning practices are taking place. Families are unable to return their dead to their traditional marae and urupa (burial grounds). They are being interred in city cemeteries because it is often too expensive to take the deceased home. They are nearer to relatives who live in town, and the city cemeteries are kept neat and tidy. As a result people may have lost or severed their links with their traditional marae. Tangihanga ceremonies are now held in private homes while urban marae are being developed because many families from tribal groups outside of city areas are still reluctant to ask and use urban marae and other local facilities. The invitation and prerogative to do so must come from the marae owners or tangata whenua. The undertaker's chapel has shortcomings in its lack of catering or accommodation facilities. Homes are too small to accommodate the many visitors that come from far and near and neighbours have to be considered. Because of this the free and open expression of grief tends to be restricted and restrained.

Changes in kawa have inevitably followed. Because the deceased would be inside the house, the tangihanga kawa, once performed outside on the marae atea (forecourt in front of the main meeting house) is now inside. As a result of the long distances that now separate many family members from the place of the funeral as well as job and family commitments, visitors often arrive and are welcomed late at night, upsetting traditional law and procedures. In some cases the deceased may be moved inside from the verandah of the meeting house in the winter to preserve the health and comfort of the elderly mourners. Sometimes too, the hakari may be held before the funeral service as a matter of convenience for many visitors or occasionally, tangata whenua. Among the choices for burial is the plot provided by the Returned Servicemen's Association for returned servicemen, with the protocol of a military burial.

One of the main difficulties in allowing the free, open and shared expression of grief and sorrow, has been a lack of knowledge, understanding and cultural insensitivity on the part of some people, employers, and modern institutions.

The organisational rigidity and 'red tape' of some modern institutions and health services has also caused many problems and distress amongst those who adhere to traditional Maori practices. However, recent developments in many community health and sickness based services such as the holistic approach of the hospice in the care of the terminally ill and the provision of family care and support facilities in paediatric, oncology and intensive care departments, are positive signs of flexibility and change. It is essential to formally acknowledge and legitimate the contribution of traditional healers and Tohunga in the care of Maori patients. Psycho-spiritual and family needs must be recognised in a way that considers the whole person. It is also important to ensure that health professionals, administrators and managers recognise and acknowledge the richness and benefits in different ways of expressing and sharing grief and loss.
There is an increasing body of clinical and statistical evidence to suggest that there are significant benefits in maintaining and encouraging alternative sickness, dying, death and grieving practices. While it is becoming more difficult to maintain the sanctuary and sanctity of traditional tribal customs and practices, their value and benefits must be promoted.

Though the marae and tangihanga ceremony are two Maori institutions that have survived the impact of western civilisation, flexibility in the way things are done and adaptation to changing environmental circumstances have ensured the survival of many other Maori customs, beliefs and practices. Compromises have and will continue to be made, although Maori people are becoming much more assertive in defining their own needs, and in expressing a wish to control their own lives and determine their own future. There will be an increasing demand on medical, nursing and clinical practitioners and health care institutions to recognise the place and traditional practices of the tangata whenua. They need to develop the sensitivity and skills that will assure the inclusion of these concerns in the delivery of modern health care.

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COOK ISLAND CUSTOM RELATING TO DYING AND DEATH

Reverend Kiriau

INTRODUCTION

Since Cook Islanders migrated to New Zealand 30 to 40 years ago, they also brought with them their customs in the hope that they would be able to practise what they used to do in this new environment. Until then, part of it has been retained, while the rest has been put aside because of the new society, environment and the law.

In this chapter, I shall try to limit my argument to the New Zealand situation rather than the things that are done at home in the Cook Islands. In this way, I may be able to convey to the reader an understanding of Cook Island custom.

Cook Islanders who take time off from work have been regarded by their employers as only making excuses to get time away from work. The burial customs are considered a waste of time and money, as well as of food. Certainly, Cook Islanders in New Zealand have developed a family unit. To attend to a bereaved person or family and then be at the funeral service is very important indeed. It is a time of sharing one's loss; to let the family know that you really care; to offer support to the family. It is also a time to prepare yourself for when your turn comes. Because people are Cook Islanders, whether they are related or not, a UNITY has been established. A tribute is paid to the deceased not because they are family or friends, but because Cook Islanders like to help each other in this foreign land.

BEFORE DEATH

A sick person, whether she or he is at home or in hospital, is the concern of the family. Once that happens, after consulting the family doctor, the family would contact their Minister. The Minister visits the patient to offer prayer and to help the family in other respects. The families would like to show their love towards the patient by providing food, especially the best or the patient's favourite. But in the case of the patient being hospitalised, they are reluctant to do so because of hospital regulations.

Just before death, when the medical staff are certain that there is no more hope, is an important time for the family in particular. In the case of the old people, it is a time when they expect to see and perhaps to make a last will to the family. Hospital staff should be sensitive of this very important and precious time.

During the bedridden time preceding death, a group of people may be seen in the ward. That group could be representing a particular group, such as a church group or an association to
which the patient belongs. In that respect, the visiting regulations may be bent by Cook Islanders. Hospital staff may not accept this, but Cook Islanders must be there for it is important to the patient and the patient's relations.

Clothing

Cook Islanders believe that what you wear in this world, you will also be able to wear in the after world. Therefore, the corpse must be dressed in his or her Sunday best or favourite dress. Some Cook Islanders would love to wash and dress the deceased before he or she is finally laid in the coffin, but again they do not insist upon doing so. If it is acceptable to those who are responsible, then the task can be performed without hassle.

Drugs and Treatment

Cook Islanders have their own medicine in their own country, whether it is done by a Taonga, (native doctor) or by a member of the family. The latter is sometimes important. Treatment can be performed by a member of the family only for their own family. Otherwise, no person can treat another person unless she or he has been authorised to do so. In New Zealand, it is not acceptable for a family member to treat a patient because of hospital regulations, but Cook Islanders still seek this kind of help while the patient is in hospital. The medical staff should be aware of this. A consultation between the staff and the family should be arranged. In this way a better understanding of traditional and conventional medical treatment would be established between the two sides.

IMMEDIATELY AFTER DEATH

As soon as a patient dies the family should be advised. Then either the family or the medical staff will relate the news to the Minister, or vice versa. Modern communications are acceptable to Cook Islanders in notifying people of the death.

Post Mortem

Cook Islanders reluctantly accept post mortems. They believe that when a person dies, it is God's will. The corpse should not be interfered with. They also say that when a person dies, they take everything with them into the grave. However, if the cause of death is serious or unknown or there is a need to perform a post mortem for health reasons it is allowed. Otherwise, it is only by consultation and explicit explanation that Cook Islanders would be likely to allow a post mortem to be performed.

The Corpse with the Family

Cook Islanders regard their Minister as the head of the family in New Zealand. Therefore, they always wish the Minister to be present in the family discussion of burial arrangements. Indeed, when the Minister handles the affairs of the family, he makes sure that everything begins and ends perfectly, according to the family's wish.
THE BURIAL CEREMONIES

The Family Service

Cook Islanders always regard the family service as important. First, it is a time when members of the Cook Islands community come to share and pay their last respects to the deceased person, as well as showing their support to the family. Secondly, by attending the service, it does not matter that he or she is unable to take time off work during the funeral day, since they have made the effort the day before, when there was no difficulty taking time off work.

The family service is called the "Apare". It takes one of two forms.

The first type of service is a normal service conducted by the Minister, with members of the family and parish sharing in it. The service's message is presented in two directions; to the dead and to the family, with hymns, scriptures and prayers.

Otherwise, the service is conducted by an elder of the parish. Hymns are sung and answers are given in the form of comparing the life of the deceased to the scripture.

In this service, anyone can get up and say whatever he or she would like. Often different attitudes and atmospheres are seen at this time. Some may try to say something to encourage the living family or make them laugh so they can forget the sorrow and look to the future. Often the family at this particular point is well surrounded and comforted by the numbers attending the service and the message they convey.

The Funeral Service

At the family service, Cook Islanders would like to have the corpse present. If the corpse is to be taken home to the deceased's home, this is a final time for the whole family and friends to view the deceased. The body can be kept there until half an hour before the funeral service then, it is brought directly to the church.

The funeral service is conducted by the Minister of the parish or by another Minister nominated by the family, with the agreement of the parish Minister. It involves singing, reading of the scriptures and prayers. A message is delivered by the Minister, which lasts from half to three quarters of an hour.

This is followed by a short service at the graveside, which includes singing short passages from the scripture and a prayer. Today, Cook Islanders would like to cover the grave themselves rather than leaving it to those who are responsible.
Cremation

Cook Islanders do not accept this form of burial, but recently some went through it with great pain because of the need to send the body in some way to the family in the Cook Islands. Today many of the Cook Islanders' corpses have been sent home and they are very thankful to those who make it possible.

The Eva

Finally, there is an Eva to the church. Eva is a final gift made to the church, or other organisation whom the deceased had been associated with. An Eva is practised in two ways.

It may be a gift on behalf of the deceased's family which is presented to the church as a last thanksgiving to the church. Another gift could be shared amongst other organisations within the church.

The second practice involves the whole immediate family being dressed in black. In that case, it is up to the family to decide how long the Eva will be. The family remain in black until that Eva is lifted and then they go back to their normal day to day wear. Traditionally, the Eva would last for a month.

Today, the period of Eva is beginning to diminish, perhaps because of the change in environment. Cook Islanders would bring the Eva to the church and at the same time or day, they would lift it. However, an older member of the family may remain in black dress for some time.

Traditionally at the end of this service, another important feast is provided by the family. But in recent years, Cook Islanders have considered the feast during the family and funeral service enough for their friends and relatives. It is more important during the Eva period for the whole family to come to the memorial service to give thanks to God, rather than stay home to prepare food.

Crying

Cook Islanders would like to cry aloud over their dead if possible. To outsiders, crying would be embarrassing. But this is one time where Cook Islanders let out their grief and sorrow. They say that if you do not cry at this time, the worst will come at a later time. Therefore, it is better to cry while the deceased is present than to leave it until later. This helps the family to get over their sorrow quickly as well as making the work of those attending to the family's welfare easy.

Anyone can attend a family or funeral service. An outsider may think, "Well I have nothing to present to the family so I am not attending". A gift is important to the immediate family, but a person's presence is also a valuable gift to the family, because the person has made the effort to be there.
FEASTING (UMUKAI)

To Cook Islanders, it is proper to have a feast at the end of an occasion. Therefore, at the end of each family and funeral service, friends will be invited to share a feast. No one returns home hungry. Recently, feasts after the Eva have been stopped.

When a feast is prepared, Cook Islanders get together to contribute money and whatever they can afford, to help the deceased's family. In this way, the burden on that particular family is not so great. If the deceased was a person well known to others during his or her life time, the family reaps his or her love for others during this time.

To finalise everything concerning the deceased there is the day of 'stone unveiling'. This is an important day to Cook Islanders. Again, families and friends are invited. A service is held at the grave side. Everyone present is invited to return to the deceased's family home for another huge feast. Again the Minister is important to Cook Islanders, to share and to give spiritual and social help and comfort during this service.

SUMMARY

Unity amongst Cook Islanders is important in a new environment and society. Without this sense of feeling and unity, it would be a sad state of affairs for those concerned with death. The expenses of a funeral is a major problem. But the affected family is swamped with gifts of money as well as food during the time from the death until the funeral. The contributions from the friends is so tremendous that the family is able to cover its expenses incurred by the death.

Also, by coming together, the burden that the family is carrying is lifted. This is done not necessarily by action, but rather, by being there and showing personal support to the family.
INTRODUCTION

Funerals in Fijian society are times for reaffirming kinship ties. These ties may be consanguinal (blood relative) or affinal (relative through marriage). This is a time when relatives - young and old, educated and uneducated, employed and unemployed, rich and poor - meet on similar ground. They have only one thing on their minds: the death or loss of a relative.

In the eyes of an outsider, a Fijian funeral may be time-consuming, too expensive, and an unnecessary waste of food, energy, time and money. To a Fijian, his or her presence at the funeral means more than any job opportunity, or promotion, or a final examination or whatever; paying his or her last tribute to the dead takes first place on the list of priorities.

BEFORE DEATH

When a person is sick, he or she will be taken either to the hospital or to be looked after at home. The news of the sickness travels; then more and more people come to show their concern and love, and their desire to share with the sick person and family. Root crops, fish and pigs are the common gifts taken to the sick person.

The sick person's family presents a bowl of kava. This is a token of thanks. They make sure the visitors are fed before they leave.

If people know the sick person is in hospital, the number of visitors increases. Consequently the elder relatives are given first priority to visit. Older people going to pay a visit take a younger person as an interpreter and guide. This is important. Visitors to the hospital mainly take fruit, fruit juice, and toiletries.

The second group to visit the sick is the priest and lay preachers. Each of these will take turns to visit. They will visit twice a week if the sick person is in the hospital; but their visits will be daily if the sick person is at home. Sometimes hospital regulations restrict visitors. Hospital staff need to know that faith in the healing power of God is ingrained in the lives of the Fijians. It is very important that the priest should pray and talk to the sick person. Faith in God and the promise of life after death is what Fijians hold fast to, when all else fails.
It is important to a Fijian that the priest is present before he or she goes to the theatre for an operation.

Diet

Because Fijians are used to heavy food, hospital food is often not enough. This is why relatives take cooked food. They will take mainly taro, sweet potatoes, chicken and fish cooked with vegetables. It is important that the medical staff explain to patients and relatives which food is suitable.

Immediately Before and After Death

The minutes just before the sick person dies are important. This period is called "Sa Kaciva Na Nona I Sulu". The patient is ready to be dressed to die. Close relatives will gather to dress him or her up. It is important to the dying person to be fussed over. He or she interprets this as the love and concern of very close relatives.

When death occurs, the foremost thing is to relate the news to the family. The news may be passed to the priest. He will then relay the message to the family of the dead. Traditionally, relatives relay the message to each other. Fijians in today's society accept the message by various means, eg telephone, wireless, telegraph.

Traditionally Fijians view post mortems as unthinkable. They accept death as being God's will. They believe that the dead should not be tampered with.

Some cases call for further medical examination. Fijians, despite their attitude to post mortems, will relent quite willingly, where a post mortem is essential.

THE FUNERAL

Fiji's social hierarchy involves the chiefs and commoners. Inevitably this will give rise to two types of funeral. Each funeral is similar, except for the size of the crowd present on the the days before the funeral. A chief may have a large area under him. He may also be related to other chiefs. Because of this, a whole province or provinces can be present during the funeral. This is very different from the death of a commoner: then the people from only a few more villages may come to the funeral.

Burial

Amidst sorrow and grief, relatives will prepare the house where the corpse is to be laid before burial. Women will prepare the deceased's dress. They will go and bring the deceased home. Male relatives will be waiting to receive mourners at a makeshift stall. Receiving of mourners can take one whole day and night. Through the presentation of the whale's tooth, mourners also bring mats, tapa and food. Again the mourners are thanked by the presentation of a whale's tooth. They will be served a sumptuous meal, and they will join in the kava drinking.
The time of the funeral will depend on how quickly the close relatives arrive home. Often a funeral is held up if a close relative sends word that he or she will be at the funeral. Fijians bury their dead; they are never cremated. Traditionally each village has a clan whose job is to bury the dead. First, the deceased is put in the coffin. This will be carried to the church for the funeral service.

The service is completed beside the graveside. Piles of mats and tapa are buried with the dead.

The Last Feast (Burua)

After the funeral the close relatives prepare a feast. All will be given uncooked taro, pork or beef to take home.

The two reasons behind the burua are, firstly, it is done in memory of the dead; and secondly, it is a symbol of sincere thanks from the relatives, to all those who came to share this difficult time with them.

There are a few more customs after the funeral. The relatives desire to perpetuate their dead relative in their memory. The most important customs are performed on the hundredth night from the day of the burial. Feasting again is the centre of the gathering. The final custom is when the closest female relatives change their mourning attire, from black to normal daily wear. This time is marked by a feast; and the women will visit the grave.
DEATH AND DYING IN TERMS OF NIUE CULTURE

Mr Sipeli

INTRODUCTION

Like other races, Niueans fear death, as well as dying. They regard it as "tapu" (taboo). Perhaps the subject of death is "tapu" because its occurrence is infrequent; it is not an everyday happening because of the small population. People do not discuss death amongst themselves or with the dying, unless the dying person raises the subject.

Dying Niueans may raise the subject of death, because they are very conscious of their condition; they may wish to make verbal death-bed wills. It is vital at this time that a husband or wife is by the bed-side. Alternatively, a well respected elderly person of the extended family should be there, or a pastor, or a minister of the dying.

BEFORE DEATH

For psychological reasons, Niueans would encourage their dying relative or friend to talk. But this would depend very much on the condition of the patient and the skill of the person at the bedside.

The Niueans know that hearing ends when breathing ceases. So the family and close friends of the dying person continue to keep them awake by a continual monologue. Family members take turns sitting by the bed-side talking. This is one of the important reasons why Niueans want to be near their loved one. At the dying stage of a loved one most available members of the immediate and extended family and close friends congregate at the bedside, (especially those who have travelled some distance).

Privacy is vital for a dying Niuean. But Niueans are conscious of hospital regulations relating to visiting hours, and the number of visitors allowed. Niuean leaders, generally, have warned some Niueans about hospital regulations. (Of course there are always those who are not mindful of any regulations when a loved one is dying.)

Although Niueans need privacy, they are very conscious that hospitals cannot favour any ethnic group, majority or minority. However, the writer of this article found the staff of Wellington Public Hospital very helpful on several occasions: without being asked they would isolate a dying Niuean. This gave the immediate and the extended family opportunity to share the devotion with the loved one.

Niueans would encourage a person dying not to surrender his or her faith, especially when he or she had only a few weeks or months to live. A Niuean would not give up hope of a recovery
until a person ceased to breathe. They believe that humans are not masters of life. This belief seems to imply that Niueans think there can be some form of psychological or miraculous healing. There were cases of this back on Niue, but that is not our concern here.

IMMEDIATELY AFTER DEATH

To Niueans, the corpse is a "tupua" or "aitu", this means it is a ghost and nothing more. In Niuean society, a corpse must be treated with respect for two main reasons. Firstly, if the deceased's corpse was neglected or perhaps not properly dressed, sooner or later the family concerned would be haunted. Secondly, on moral grounds, human corpses are different from other dead bodies. This concept is coupled with the sense of grief and loss. According to Niuean traditions the corpse had some form of psychological interest in terms of security for the living, other than on any religious ground.

Post-mortem

The Niueans attitude to post mortems varies from family to family. Generally though, this would be considered a strange practice.

Frequently, the family in Niue would have to give consent for any post mortem. The communication has to be done properly, effectively and in the best and quickest way. Toll call after toll call, meeting after meeting are constituted to deal with the issue. Undoubtedly, frustrations and ill-feelings do occur from time to time, prior to final agreement. Toll calls may be very expensive. Very often the family or relative in dealing with such a case takes the easy way out after an initial call to Niue; they may refuse without giving any reason to the hospital authority.

When a post-mortem is requested, the Church Minister's role is nothing more than explaining in the best possible way the purpose of the request, and the value of it to the family concerned, as well as to the medical profession generally. Sometimes a church leader will keep out of the discussions. (The writer of this article did so from time to time, for psychological reasons.)

Hospital staff need to understand the difficulty in getting approval, and the cost factor involved in terms of time and money. Even though the issue was not simple to deal with, there were Niueans who freely offered the corpses of their loved ones; there were those who refused also. This may not have been because of any religious belief nor because of sentimentality: it may have been for personal reasons.

My experience in Auckland several years ago has helped me to explain post mortems to Niueans. For example, one Niuean waited months for a kidney transplant: he received one from a young Palagi who passed away as a result of a motor accident. Thus practical experience is very helpful in explaining the importance of post-mortems to Polynesian people.
Bereaved families find requests for post mortems difficult to deal with. Such a request comes as a double blow for the family, at a time when it is least expected.

Extra Contact Person

Church members always regard their church leader as important, whatever their denomination. Some families, however, for personal reasons, are reluctant to include the name of their denomination on the hospital admission form. This may be because they don't belong to any denomination, or they may not understand the word "denomination". Also, the word denomination does not apply to Niueans since they do not have a hospital Chaplain. A particular name of the church parish may be needed, (for example, St James Parish, 235 Adelaide Road, Newtown, Wellington). It is important for hospital staff to check the address given: most ministers don't have offices in the church but in the house, where he or she lives. It is important to get the home telephone number.

An extra contact person such as a church minister is valuable in dealing with illiteracy cases. (Misinterpretation of a doctor's diagnosis does not assist the patient nor the family's morale.) There is another advantage in having an extra contact person by the dying person's bed-side: sometimes, he or she can communicate better with the dying: the minds of individual family members may be emotionally confused. Often, too, hospital rules, in terms of noises and overcrowding, are overlooked.

DYING MOMENT

To a Niuean, the dying moment of a loved one is a moment of obliviousness: it always results in an outburst of wailing. Normally, when the family is told of the deteriorating condition of the loved one, the family will wish to have their minister with them, if possible. He or she would arrive and lead them in devotion. The same applies when a person dies. A church minister of the family could be contacted at any time of the day, as well as during the night. The first thing a Niuean family wishes to do when a loved one is declared dead, is to have a family devotion or prayer, prior to dispersing.

The most important point to note is that there is no hard and fast rule about what to say at the time of death. This is true for any human being or any ethnic group at present. It is particularly true for Niueans. How hospital staff express a request or command in terms of words is the sensitive area. Niueans are very critical of people's attitudes. Words are not necessarily the medium of expression of such attitudes. Behaviour and tones of voices convey attitudes.

Even when Niueans cannot express themselves adequately or logically, they are able to recognise the difference between a mistake by staff and a deliberate attempt to make difficulties for them. Niueans don't mind mistakes. But it would usually be helpful to the family if the hospital staff used simple English, and free of ambiguous words. They should also avoid asking negative questions.
Samoan Customs Relating to Death and Dying

Sister Iosefo Pesio

Introduction

In Samoan society, people are not afraid of death. They believe that God will decide whether or not they will die, and when death will occur.

Samoans do not look to doctors or medicines for cures for their elderly people. This is because they accept that death is God's will; they accept that old people will die.

Before Death

The sick are not left alone and there is always company, silent or noisy. The chores of daily living are carried on around the sick person.

Samoan houses do not have separate rooms. Everyday routines are regarded as normal and natural. They give the elderly something to see, hear and be a part of, even if they are terminally ill and bedridden. Noise is considered healthy.

Dying people are never left alone. It is a considered belief that their souls will be taken away more quickly if the living are not caring for them and being with them, physically.

The elderly or dying do not complain about anything usually - food, bedding or medicine. They know that they are in the best hands. It is a custom that the elderly sick are with the ones that they wish to be with. If they are sick, they travel to the one they most want this comfort from.

Families usually bid to take care of their aged: it is the highest honour to care for the sick and dying. If a parent dies in your home or care, you are blessed and regarded as the privileged one.

The particular family group looking after the dying person must be given support by the rest of their extended family. This support may be financial, as well as emotional.

The extended family may expect to do all the menial or hard tasks. They may have to leave their homes to do the fetching and carrying.

The favoured group of carers is left to comfort the dying by their presence. They will touch, press softly, smiles, (lomilomi) and keep the person company. They are the last to embrace the dying one. They have the honour of covering the dead.
The sick people will not be sad or frightened about death. They know they are with their loved ones. The loved ones are doing all in their power to make their last days easy, and comfortable. The best is given.

In Samoan society it is considered a bad thing if a dying person is separated from his or her family. This could make the dying person fret.

If anyone is called to the sick bed, he or she must go. If a person does not go, this is courting bad luck. For example, a woman may find she is unable to have any children, in future years; her inability to conceive children might be regarded as a punishment for not getting to the bed of her dying parent. People are prepared to travel long distances in order to be with the dying person.

All the family must have a hand in nursing the sick, especially the old, and more especially elderly parents. Those who cannot be in the front line (or the main nurses, as it were) must do the fishing, cooking, washing for the family (tautua).

In Samoan society, old people are pampered with good food - foods the family know are their favourites. They know that the old people may not eat the food; but the aroma of their favourite food, and foods they like is the next best thing to eating. The family will go to great lengths to get such foods, and to prepare them lovingly. At times they will spare no expense.

If the dying person is at home, the bedding is always clean and fresh. It is changed often (as with hospital care). New sheets, pillow cases, pillows and towels are bought especially.

The period before death can be a time of reconciliation. People will pray that God will forgive any offences their dying relative/friend has committed.

Before death, people may ask their dying relative to forgive them, for any breaches there have been. They want to hear this person saying he or she will forgive them. Then, they believe he or she is ready for death.

In Samoan society, people would not want a dying relative to have medicines or treatment, even if that person was a patient in a hospital. Because of this, there may be a problem for doctors, or nurses, to get a Samoan patient to take drugs. Or the patient may take the pills, but spit them out as soon as the nurse has gone. Or he or she may try to leave the hospital, before being discharged.

Samoan people have their own doctors. In Samoan society, the fofo (person who doctors), usually visits the sick, morning and night, to minister to them. Lomilomi - not quite a fofo - is a soothing massage and relieves pressure and tension; it really is to get the circulation going. It helps to make them more comfortable.
Samoans believe in the healing properties of a shrub called "ti". They use the leaves of the ti plant to soothe or to draw out a fever. At times they use sap from various trees, too, or juice, to heal or soothe.

Death is a very sacred time in Samoan society. At the actual time of death, the family tries to be present. They want to see death. They interpret signs or gasps from the dying person as expressions of wishes. A person who grants a last wish will be blessed.

IMMEDIATELY AFTER DEATH

Mourning is carried out in a dignified way. Pent-up tears flow quietly and are accepted anywhere. One must be seen to cry, some time. A person who does not cry is regarded as hard and unfeeling. The pent-up tense feeling could make a person sick, they believe. Women, men, children and chiefs cry - not all the time, but at intervals, and with decorum.

In Samoa, a funeral traditionally has a particular woman from another aiga (family) to look after the body. She performs the functions of the undertaker. This responsibility is based on a traditional convenant between any two aiga.

If death occurs in one aiga, a woman from the other aiga will wash, clean, clothe and be responsible for the body until the time of the burial. This special woman is called feagaiga, a covenant woman. (Sometimes covenant women do this work in New Zealand, too.)

Children may touch their parent's body after he or she dies. If there is no covenant woman available, a child will prefer to wash and prepare his or her parent for death.

When the body has been washed, it may be powdered. Sometimes coconut oil will be used, to oil it. In the past, it was customary to have the dead person wrapped in "tapa" (cloth). But more usually, now, a new white garment will be used. Expensive material may be used. The garment may be made new, specially. It would be considered an honour to be able to make this garment.

Samoan family and friends would want to come and see the dead person. They would want to pray for his or her soul, whether they were Catholic or Protestant.

In Samoan society, people would want to take their relative's body to their own house as soon as possible, if a person had died somewhere outside his or her home. In New Zealand, it might be more difficult for people to have the body at home. It would be more usual for the body to be kept in the church, until the time of the funeral.

It is most unusual for Samoans to be cremated. In accordance with Samoan customs and traditions, the greatest indignity a human body can be subjected to is to be put into a fire and burned.
Usually, Samoans would be opposed to post mortems, also. They regard death as part of a natural cycle. A post mortem would be quite inhuman, and a great indignity for the body.

The chiefs or matais, or others in the extended family, might organise the funeral. The time for it might depend on when the relatives could all travel to that place.

THE FUNERAL CEREMONY

Many Samoans would prefer to have their own minister or priest, to conduct the funeral service. In Samoan society, people would see the funeral as part of a life-cycle, where the dead person will go on, to another place, beyond death.

After the funeral, there would be a feast for all those who had attended. The grieving family would prepare the feast, and guests bring presents, eg, food and mats.

The funeral feast provides a way for the dead person, through his or her family, to thank those who have made sure that the funeral was conducted in a dignified way. Also, the funeral feast allows those who are still living to rejoice; it is a time to accept the continual life cycle, with joy.
Tongan Customs Relating to Death and Dying

Father Okusi Falemaka

Introduction

Most Tongans have adopted Western customs. But it is important that doctors and nurses should understand the general background of Tongan beliefs.

A Tongan may look on family as an important part of himself or herself. Doctors and nurses should appreciate this.

Before Death

Doctors and nurses need to realise that it is most important that the family comes to visit a Tongan who is dying. Hospital staff can show that they appreciate this by asking the patient whether relatives have been to visit.

If a Tongan patient is dying, it is important that the close relatives know he or she is dying. Usually, these relatives will tell other family members.

A minister or priest would come and pray for a dying Tongan person, if he or she was an active church member. If the person dying is not an active church member, a friend or relative might ask a minister or priest to come to pray for them.

Most Tongans in New Zealand hospitals would be people who had been exposed to Western customs. But occasionally there might be an older person, still influenced by Tongan customs and superstitions relating to food. Such a person might want to eat food forbidden by nurses; he or she might even try to leave the hospital, to be able to do this.

Generally, Tongan patients would accept the necessary drugs prescribed by doctors. But at times, patients may not trust the doctors. It is important that doctors and nurses gain the confidence of their Tongan patients.

Just After Death

Most Tongans would not want post mortems. They regard death as God's will. They feel that people should be left in peace - a post mortem would be an indignity.

A post mortem would be very rare for a Tongan. The exceptions might be where someone had been murdered or where suspicion surrounded the death.
Health regulations in Tonga require that a burial should take place very soon after death. But in New Zealand, relatives might want to keep the body in the house as long as possible. It would be usual to have continual prayers around the body, before the burial.

Tongans would want enough time for friends and relatives to come and see the dead person, to pay their last respects. It is important for relatives to come - even distant relatives, and friends of relatives.

If some relatives lived a long way away, the family might want the body kept at the undertaker's for embalming. They would want to allow time for distant relatives to travel.

FUNERAL

The head of the family would arrange the funeral. This might be an eldest son, or a father, or the "elder" of a group.

It would be rare for a Tongan to have cremation rather than burial, even in New Zealand. For Catholics, there would be prayers at home, at church, and at the burial place.
PROTESTANT ATTITUDES TO DYING

Reverend Williams

INTRODUCTION

Protestant attitudes to death and dying vary enormously.

Many adults have never seen a dead person or been to a funeral. Death is still a taboo subject even between many spouses and friends, and they have little idea what to do when someone dies.

Those with some experience of death and funerals also have widely differing ideas.

This applies as well to attitudes about what happens after death. Most, though not all Protestants believe in some kind of life after death. But for many this is vague; some have never really thought about it. Some may picture a physical place to go to, and this has a bearing on how they view the death, the disposal of the body, the question of an autopsy and the use of organs for transplant.

BEFORE DEATH

Protestant churches do not usually insist on the minister being called. However, many Protestants do appreciate the presence of an appropriate minister or chaplain. It is wisest to ask the people concerned whether they wish a minister to come. In the hospitals served by full-time chaplains, they may be contacted at any time.

Before death, visiting by family and friends is important. Flexibility of hospital visiting hours rules to accommodate this is helpful.

IMMEDIATELY AFTER DEATH

Protestantism is not averse to post mortems; ultimately it is a decision for the family of the deceased.

Funeral arrangements are made by the family as quickly as possible.

THE FUNERAL

Most Protestants want some kind of religious service as a mark of respect for the deceased person and as support for family and friends. But the form and venue for this will vary depending on the religious beliefs and the wishes of the relatives, and on the distance from the place of interment.
Funeral arrangements are usually made in consultation with the funeral director and presiding minister, who may be contacted by the funeral director.

Some relatives and friends will want to see the dead person between the time of death and the funeral. Some will not. On the day of the funeral, some will go to the graveside or crematorium, some will not. Some will have the service in a church or chapel, followed by a committal at the graveside or crematorium. Many funerals these days are held entirely in either the funeral directors' chapel or the crematorium.

Cremation is the preferred means of interment these days among many Protestants in cities close to a crematorium.

All this suggests that it is unwise to draw firm conclusions about Protestants' expectations, experiences and beliefs.

More enlightened views of the need for grieving and taking time to adjust to the death of a relative or close friend are becoming accepted. But it is still common among Protestants of Anglo-Saxon stock for children to be excluded from funerals and for people to expect the bereaved to have returned to normal a few weeks afterwards.

Those close to someone who has died, whether they are Protestant or otherwise, will be upset and are commonly in a state of confusion or shock. They need to be given space to express their distress and to be with their loved ones at the time of death and afterwards. At an appropriate moment it may be reassuring to remind them that the funeral director and minister can help with the necessary arrangements for the funeral. However deserted or angry they may feel at the time, most Protestants basically believe that God loves them and will strengthen and comfort them. At this time they need a gentle approach to understanding their individual needs.

A helpful booklet, 'Losing Someone You Love' by Richard Randerson is available on request from the Alfred and Isabel and Marian Reed Trust Chairman, Mrs H M Lane, 11 Rutland Way, Wellington 1.
DEATH AND THE CATHOLIC FAITH

Father E Urlich
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INTRODUCTION

For the Catholic, like all other Christians, life is a gift; it is a gift that originates and is sustained by a living and faithful God. As such, it is precious at all its stages. This is true at times of birth, marriage, sickness, suffering, dying or death. It is true, too, even in the every-day affairs of eating and drinking.

In these basic life situations, people may feel part of the very mystery of life. We believe in the importance of faith and of our own experiences and the experiences of others, in these fundamental situations. Through these, the human is linked to and meets the divine.

For the Catholic, this meeting point with the divine is taken up and ritualised in the sacraments. Classical theology describes sacraments as an outward sign of an inward grace. To put it in less formal terms, the sacraments are an encounter with God through human words, signs, symbols and actions.

Yet, however we describe them, they bring about what they signify. For instance, the sacrament of marriage enables married Christians to reflect the love of God to each other; they then reflect that love outwards to others.

Within the Catholic Church there is, in fact, a sacrament combining the needs of the whole person as both a spiritual and physical being. There is Baptism with birth, Holy Communion with its eating and drinking in its highest dimensions, Reconciliation with forgiveness, and the Anointing of the Sick with sickness and dying. Requiem Mass, together with the prayers for the dead and relevant funeral rites, are also of profound importance.

In observing and celebrating the sacraments, Catholics not only affirm their belief that all life is sustained by God. They also continually reaffirm their hope in eternal life. This, of course, takes into account the mystery of death. And a mystery it is. The Catholic Church and the faithful realise this, but that does not lessen their belief in life after death. The accepted view of the Church of today is contained in the documents issued after one of the most epoch-making events in the church's history - the Second Vatican Council of 1962-65.

In helping to understand the customs relating to death and dying within the Catholic religion we quote the document's reference to the mystery of death:
"It is in regard to death that the human condition is most shrouded in doubt. We are tormented not only by pain and by the gradual breaking up of the body, but also, and even more, by the dread of forever ceasing to be. But a deep instinct leads us rightly to shrink from and to reject the utmost ruin and total loss of our personality.

"Because we bear in ourselves the seed of eternity, which cannot be reduced to mere matter, we rebel against death. All the aids made available by technology, however useful they may be, cannot set our anguished minds at rest. They may prolong our life-span; but this does not satisfy our heartfelt longing, one that can never be stifled, for the life to come.

"While the mind is at loss before the mystery of death, the church, taught by divine revelation, declares that God has created us in view of a blessed destiny that lies beyond the limits of our sad state on earth. Moreover, the christian faith teaches that bodily death, from which man would have been immune had he not sinned, will be overcome when that wholeness which he lost through his own fault will be given once again to him by the almighty and merciful Saviour.

"For God has called us, and still calls us, to cleave with all our being to him in sharing forever a life that is divine and free from decay. Christ won his victory when he rose to life, for by his death he freed us from death.

"Faith, therefore, with its solidly based teaching, provides every thoughtful person with an answer to anxious queries about his or her future lot. At the same time it makes them able to be united in Christ with their loved ones who have already died, and gives hope that they have found true life with God."

BEFORE DEATH

Because of their belief that life, both now and hereafter, is sustained by God, Catholics also believe that the sickness and suffering which often precedes human death has great meaning. We know that personal sickness and pain are a heavy burden. We know, too, that Christians suffer sickness and pain as do all other people. Yet our faith helps us to understand better the mystery of suffering and to bear the pain more bravely.

From Christ's own words we appreciate that sickness has meaning and value not only for our own lives and salvation but also for others. We appreciate it even more when reflecting on Christ's suffering and death on the Cross.

We also know that Jesus loved the sick, and that during his life on earth he often looked upon the sick and healed them. It is the Catholic belief that, while sickness is closely related to the human condition, it should not be seen as a
punishment we suffer because of our human sinfulness. Indeed, it is part of the plan of God’s providence that we should struggle against all sickness and carefully seek the blessings of good health so that we can better fulfil our role in human society.

As such, the Catholic Church places great importance on the anointment of the sick. The sacrament of anointing is seen as prolonging the concern which Christ himself showed for the bodily and spiritual welfare of the sick, as the gospels testify, and which he asked his followers to show also.

The sacrament has its beginnings in Christ and is spoken of in the Letter of James. The church, by the Anointing of the sick and the prayers of the priests, commends those who are ill to the suffering and glorified Lord, that he may raise them up and save them. The church also believes that those seriously ill need the special help of God’s grace in the sacrament of anointing lest they be broken in spirit.

The celebration of this sacrament normally consists of the laying on of hands, followed by the anointing, with the blessed and sacred oils, on the forehead and hands. The sign of the cross is traced on the person's forehead and hands.

This sacrament may be repeated whenever necessary during the person's illness. In former times, the sacrament of anointing was a "once only" and was usually called the Last Rites. This is not the emphasis today, even though there should be special care and concern that those dangerously ill due to sickness or old age receive the sacrament.

The sacrament can be repeated if the sick person recovers after anointing or if, during the same illness, the dangers become more serious. A sick person should be anointed before surgery, whenever a dangerous illness is the reason for the surgery.

Elderly people may be anointed if they are in a weak condition, although no dangerous illness is present. Sick children may be anointed if they have sufficient use of reason to be comforted by the sacrament. Anointing also applies to the mentally ill.

In the hospital situation, there is among Catholics a great need and desire for other sacraments, especially Holy Communion. The need becomes more urgent for the dying. For the Catholic, Holy Communion is food for the journey. In the sacrament of Communion the Catholic believes that Christ is truly present as God and man under the form of bread and wine.

Communion is normally given on request by the patient. The celebration of the sacrament consists of short prayers before and after the actual reception of Communion.

Because of the concern for the peace of mind and soul of the person in hospital, the Sacrament of Reconciliation (or Confession) looms large in Catholic practice. This sacrament
comprises the confessing of one's sins and the prayer of forgiveness by the priest. It is given on request by the patient.

For babies in danger of death the sacraments of Baptism and Confirmation are administered.

Although Catholic chaplains operate in some hospitals on a full-time basis with regular visits, there is still the need for the chaplains to be notified when their patient is dying or when the person is seriously ill and relatives have been told.

Chaplains are on call at a patient's request and when relatives or staff require assistance. It is always appreciated that in the event of a patient's condition deteriorating the chaplain be notified immediately.

THE FUNERAL CEREMONY

After death the burial process is vital. Prayers for the dead and the funeral are conducted by the deceased person's parish priest. A Requieum Mass is essential in committing the person's soul to God.
To members of the Church of Jesus Christ of Latter Day Saints (often referred to as Mormons), death is a very important step in their eternal progression.

INTRODUCTION

The Church's philosophy and attitude towards Death

Members of the Church consider death to be an important step in their eternal progression. It is the strong belief of members of the Church that we did not start our lives here on this earth but rather lived in a pre-earthly life as spirit children of Our Father in Heaven. They further believe, however, that during our sojourn on the earth we cannot remember our pre-earth life and therefore we have the opportunity, through our faith in Christ, to prepare and to prove ourselves worthy, to return to the presence of God to return home to one of the many mansions which he has prepared for us.

A further facet of the philosophy of Mormons on death is in respect of young children. It is the belief of Latter Day Saints that children do not reach the stage where they are able to responsibly discern between right and wrong ie the age of accountability, until they are 8 years old. Consequently, it is believed that children who have not reached the age of 8 years are not in a position to be able to commit sin. Baptism in the Mormon Church is not performed for young people who have not reached the age of 8 years. If a child less than 8 years old dies, it is considered that they have died without sin and will return directly to the presence of God.

To Latter Day Saints then, death is not a departure but a home coming.

Mormons believe it impossible that anything so natural, so necessary and so universal as death should ever have been designed by God as an evil to mankind. It is, instead, a necessary transition in eternity. Only in an eternal frame of reference can death be properly viewed and understood.

If we look at mortality as a complete existence, then pain, sorrow, failure and short life could be a calamity. But if we look upon the whole life as an eternal thing, stretching far into the pre-mortal past and into the eternal post-death future, then all happenings may be proper perspective and may fall into proper place. Passing from this life is not an end but a beginning. In fact it is often referred to by members of the Church as "the birth that we call death".
Members of the Mormon Church do not claim that the sure knowledge they have of the life hereafter avoids the grief and sense of loss which permeates the lives of those who remain and who are close to one who has died. However, this knowledge of a sure reunion in the eternities does help. Certainly, a practising member of the Church who is approaching death, does not see it as a foreboding mystery but rather as entry into a new life of excitement and progression.

BEFORE DEATH

When a member of the Church is hospitalised for any reason including terminal illness or impending death from any other cause, apart from the person's family who will of course be very concerned, there will be several other members of the Church who will be concerned because of their particular relationship with the ailing member. These include the Branch President or Bishop, Elders Quorum President or High Priests Group Leader, Home Teachers, and if a sister is involved, Visiting Teachers. Any one or other of these members could be expected to visit the hospitalised member both in the interests of that member and as a support to family members who may be bereaved.

Doctrines on Health

It would be of assistance to hospital staff to be aware that practising members of the Church of Jesus Christ of Latter Day Saints do not smoke or partake in alcoholic beverages, tea or coffee. Further, members of the Church do not participate in the use of any habit forming drugs. Abstinence from the items mentioned forms part of a health discipline which members of the Church strongly believe makes for a much healthier life and gives the body added strength to be able to combat more effectively those diseases and conditions which appear to be more prevalent in the cause of ill health and death.

Notwithstanding the importance of this health code, members of the Church are advised to follow the directions of their physicians in respect of the administration of medically prescribed drugs.

Ordinances Relating to Death

In the Church of Jesus Christ of Latter Day Saints, there are no official ordinances performed for a member who is near death. A strong belief held in the Church is that the relationship any of Our Father in Heaven's children have with him in the eternities will depend more on the way we live our lives on this earth and the way in which we respond, both in faith and works to the teachings of the Lord Jesus Christ, than it will on any particular ordinances carried out just before death. The way a person lives their life of course will be in accordance with the principles and culture in which they are raised. It is believed that all men, women and their cultures throughout the earth, are basically good and all men will be judged on their concept of what is right and wrong. Our relationship with the teachings of the Saviour can be
developed in this life, or if a person does not have the opportunity of exposure to his teachings in this life, in the spirit world, after death, but before the final judgement of God.

Notwithstanding the fact that no specific ordinances are carried out for those who are near death, Mormons believe strongly in the healing powers of God which can be invoked through male members of the Church who bear the Priesthood. It is believed that irrespective of the gravity of a person's illness, it is within the power of God, subject only to his will, for any person to be raised from his or her bed of affliction. To this end, it can be expected that a dying member of the Church, at the request of that member or close members of his or her family, will wish to be administered to by bearers of the Priesthood. The procedure followed will be for two adult male members of the Church to visit the hospital and attend to the ordinance. They would be appreciative of privacy while carrying out the ordinance. The head of the recipient of the blessing will be annointed with a small amount of specially consecrated oil following which the hands of the two Priesthood Holders will be laid on the head of the recipient and a vocal blessing will be pronounced.

It is understood that on occasion, people who are close to death will perhaps be in isolation or in an intensive care unit where visiting is strictly controlled. However, the administration of this ordinance is very important to the person concerned and to members of his family and the Church appreciates greatly the co-operation which it has received in the past and will no doubt receive in the future from medical staff in the circumstances described.

A further particular area where the understanding of medical staff is required is in the case of newly born babies who are not expected to survive. Although children are not baptised before they are eight years old, an ordinance which is performed on new born babies, normally at the first appropriate church meeting, is "the giving of a name and a blessing". This is a similar ordinance to what is called Christening in other churches. Normally, the baby is held in the arms of two or more Priesthood holders, the name chosen by the parents is officially given to the baby and a blessing is pronounced upon the child by the officiating Priesthood holder.

In the case of a hospitalised baby which may die, this ordinance is very important to the parents. Firstly, they would wish the child to be given its chosen name and secondly, they would wish the Priesthood, subject to the will of God, to incorporate in the blessing the hope of a restoration of the child's health. Often, new babies who are critically ill are in incubators, and a high degree of sterility is required. Despite this, with the correct protective clothing, hospital staff have allowed Priesthood holders to introduce their hands into the incubator to touch the baby, as is required, during the pronunciation of the blessing. This procedure is much appreciated by the parents of the baby.
IMMEDIATELY AFTER DEATH

Preparation of the Body for Burial

On most occasions after death a body is delivered to a Funeral Directors premises where any special arrangements for clothing the body are taken care of. However, should the need ever arise for the dressing of the body to be carried out at the hospital, hospital staff should be aware that there are cases where members of the Church will personally wish to dress the body in special burial clothing. In these cases, the procedure is very sacred to members of the Church and strict privacy would be requested during the dressing procedure. Because of the sacred nature of this procedure, no detail as to the reason for it can be given in this article.
INTRODUCTION

The customs of Jehovah’s Witnesses relating to death and dying are based on their Biblical beliefs. They accept the entire Bible as the Word of God, the truth, and the final authority on this and all other matters of life.

It is natural to hold the memory of a loved one in honour. Normal human feelings demand the providing of a "decent burial". The same feeling creates the desire to carry out the last wishes of the deceased, so long as this would not violate the person’s conscience and his or her sense of what is right. Similarly, most persons refrain from acts that would be disrespectful of the dead.

Jehovah's Witnesses share these feelings, but because of their desire to be governed by God’s standards, they make sure that their practices are not motivated by a belief that the dead are aware of what is being done. This is because such belief is based, not on truth, but on superstitions that have spread from ancient Babylon. It is also founded on the deceptions of demons who impersonate the dead.

Physical evidence supports the Bible’s teaching that death is a cessation of life and that man has no mortal soul capable of surviving into the spirit world. Man himself is the soul, for we are told in the Bible: "Jehovah God proceeded to form the man out of the dust from the ground and to blow into his nostrils the breath of life, and the man came to be a living soul". At death, humans return to dust and their thought processes cease.

BEFORE DEATH

Jehovah’s Witnesses have God’s view that life is something precious, sacred. Hence, when they become sick they seek medical assistance. They appreciate very much the help that hospitals, doctors and nurses give in the way of medical care and treatment that can cure or alleviate the effects of illness. Jehovah's Witnesses are not martyrs, seeking death, but they love life and take reasonable steps to sustain it.

However, more important to them than their present life is their future everlasting life and to assure this they will remain faithful to God in all matters. If in so doing they die now, they have full faith in God's power to resurrect them. Jehovah's Witnesses will not under any circumstances accept treatment that involves taking into their body blood or blood fractions. They believe that to do so would be to
violate clear-cut Bible commands. (For further information as to the stand of Jehovah’s on this matter please see the booklet Jehovah’s Witnesses and the Question of Blood, published 1977, by Watchtower Bible and Tract Society of New York, Inc.) But as to other recommended treatments, these are left as a matter for individual decision by the sick or dying patient. Especially where there is a choice between alternative treatments it should be left for the patient to decide.

However, the Bible does not require that an individual employ every possible medical means to extend life when such would be basically just a lengthening of the dying process that is already well under way. Jehovah’s Witnesses appreciate from the Bible that until God’s Kingdom rectifies matters, death is the lot of all mankind, so they expect to die eventually. Therefore, they may decline special treatment where death is imminent and cannot be avoided.

But Jehovah’s Witnesses do not condone “mercy killing” (euthanasia), which they consider tantamount to murder, and hence prohibited by the sixth of the Ten Commandments, “you must not murder”. They will do their best to support one who is dying, helping them to be comfortable and consoling them with the resurrection hope. Often Jehovah’s Witnesses in hospital will have many visitors, as all in the congregation who can endeavour to assist in this way.

IMMEDIATELY AFTER DEATH

Grief

It is natural for bereaved individuals to show grief, for death is indeed an enemy and brings a sense of loss. Giving way to grief has the effect of releasing emotional tensions, but Jehovah’s Witnesses try to show a balance in this, avoiding uncontrolled grief. They do not give in to excessive mourning and do not fear the dead. Nor do they think that the deceased need help from the living. Rather, Christians have a hope that the dead will be restored to life. Hence, the sorrow of Jehovah’s Witnesses is tempered and balanced by hope.

For those who have lost a loved one in death, this hope of a resurrection helps them to overcome feelings of loss and grief. It aids them to make the best of their new circumstances and strengthens them to help others.

How do Jehovah’s Witnesses show grief? Jesus wept over the death of Lazarus and foretold that his followers would fast out of grief after his own death. But he also said that they should fast so as to be noticed only by God and not by men. Their expression should be from the heart, not for outward show. And the Bible forbids actions that suggest belief that the dead survive in a spirit world.
Hence, at a time of grief due to death, Jehovah's Witnesses would not copy the custom of wearing black or some other special garb as an external sign of mourning. Of course, they would be likely to wear dignified clothing in public at such a time as it would be inappropriate to dress in a casual way.

The above-mentioned principles from the Bible also rule out for Jehovah's Witnesses the practice of wake keeping or tangi, which is generally accompanied by mournful singing and wailing for the bereaved family. This practice originated in the fear of the dead and was designed to appease the deceased and ward off malevolent spirits. But since the Bible shows that the dead are "conscious of nothing at all", such practice is based on a falsehood and so is not followed by Jehovah's Witnesses.

Support for the Bereaved

Jehovah's Witnesses take seriously the Biblical injunctions to "speak consolingly to the depressed souls," "comfort the mourning ones" and "look after orphans and widows in their tribulation". Therefore, they generally try to visit those among them who are bereaved, offering some comfort and sympathy and giving some practical help. They are able to encourage the bereaved with the hope of a resurrection to life for the dead, thereby helping to ease the pain and loss of death of a loved one. Often they can also provide help in making funeral and other arrangements.

Post Mortems

As the Bible does not specifically touch on the matter of post mortems, Jehovah's Witnesses leave this as a matter for conscientious individual decision by the deceased's next of kin.

THE FUNERAL CEREMONY

A Christian funeral provides for disposal of the body in a way that meets legal sanitary requirements and is socially acceptable. Burial or cremation is acceptable to Jehovah's Witnesses, according to the individual choice of the deceased and/or the next of kin. It is also left as a matter for personal decision as to whether the corpse is present or absent (in which case a memorial service is held) and whether the coffin is open or closed during the funeral talk.

Jehovah's Witnesses do not view a funeral as a sacrament to obtain the supposed repose of the soul, nor is it an act of appeasement toward the "departed spirit". They do not consider it possible to "consecrate" the dead by the manner of burial. Since the dead are "conscious of nothing at all", actions taken toward them cannot either benefit or appease them, or influence their standing in God's eyes. However, the funeral or memorial service does comfort the surviving relatives, gives a message of hope to all in attendance and demonstrates the esteem in which the dead loved one was held.
If the individual who had died was associated with the congregation of Jehovah’s Witnesses, it would be normal for that congregation to be asked to conduct the funeral. In fact, the deceased may have expressed that wish, and it would be appropriate for surviving members of the family to honour it. Of course, family responsibility reasonably extends to the making of funeral arrangements. However, while taking care of the expenses and the legal and routine work involved, the family can ask the congregation, through the elders, to conduct the funeral, which they will normally be happy to do at no charge.

Where there is a real need, the elders of the congregation of Jehovah’s Witnesses may also decide that the congregation may assume certain funeral responsibilities for one of Jehovah’s Witnesses who dies destitute and without relatives capable of caring for these matters.

In all matters pertaining to the services for the dead, Jehovah’s Witnesses consider it vital to conform to what is true. Therefore, they avoid anything that even remotely resembles ancestor worship or a belief in “departed spirits”. They will not share with other religions in any sort of joint funeral service which would involve a measure of interfaith.
THE JEWISH WAY IN DEATH AND DYING

Mrs Adele Hirsh

INTRODUCTION

This chapter is an attempt to provide a concise summary of some of the rulings of traditional Jewish law on the religious and moral issues encountered in the field of death and dying. The conclusions and the rulings in this chapter must represent but generalities. It is quite impossible, in a chapter of this limited scope to provide specific answers to the many complex questions that arise in this subject matter. This presentation, therefore, serves only as a guide to orient the physician and hospital staff to the problems. Specific cases require consultation of a competent rabbinic authority.

The Jewish Definition of Ethical Standards

Judaism, the founding monotheistic religion, embodies within its philosophy and legislation a system of ethics, a definition of moral values. It emphatically insists that the norms of ethical conduct can be governed neither by the accepted norms of public opinion nor by the whims of the individual conscience. Moral values are not matters of subjective choice or personal preference. The human conscience is meant to enforce laws, not to make them. Right or wrong, good and evil are absolute values which transcend capricious variations of time, place and environment, as well as human intuition and expediency.

Jewish law has the advantage of being heir to rich millenial tradition of intimate partnership between Judaism and medicine. Many of the principal architects of Jewish law, and some of the most outstanding authorities of the Talmud, codes, commentaries and other rabbinical writings, were themselves medical practitioners. The literary depositories of Jewish law, from the Bible and Talmud to the medieval and modern rabbinical literature, are replete with discussions on religious and moral problems raised in the practice of medicine, and the conclusions they reached frequently reflected their practical experience in medicine no less than their respect for the medical profession and their infinite regard for human life and health inculcated by Jewish teachings.

The Infinite Value of Every Human Life

The first principle in the Jewish approach to medicine is that every human life is of infinite value. From this all important principle stems numerous practical rulings, such as the duty to heal the sick as a religious precept, and the prohibition of such acts as suicide, euthanasia and hazardous experimentation on living human beings.
This principle is the indispensable foundation for a moral society. If a person who has only a few minutes or hours more to live would be worth less than one who can still look forward to seventy years of life, the value of every human being would lose its absolute character and become relative, relative to a person's life expectancy, state of health, intelligence, usefulness to society, or any other arbitrary criteria.

The slow erosion of the moral ethic is an oft repeated occurrence in the history of many social orders. First the nearly dead are equated with the dead. This value judgment is then extended to encompass the inferior individual. The mentally retarded, the cripple, the unproductive and the undesirable, are then exempted from the guarantee of the inalienable right to life.

The Supreme Duty to Save Human Lives

It follows from the above premise that Judaism never condones the deliberate destruction of any human life unless the fundamental ethical structure of our society is being challenged, as in the case of certain criminal acts or in the time of war. It does not condone the destruction of human life in order to relieve suffering, or even if the intent is to save other human lives, as for example, by hazardous experiments on healthy patients, or on patients near death. The infinite value of human life makes it wrong to sacrifice even one moment of one person's life for any purpose.

BEFORE DEATH

Informing the Critically Ill Patient

In the Jewish view, patients suffering from a fatal illness should not be so informed if there is the slightest chance that such knowledge may further impair the physical or mental well-being of the patient. Jewish ethics permit and even require that the facts concerning the true severity of the illness be withheld from the patient. The patient should be made aware that he is seriously ill so that he may be forewarned to "set his house in order", but this should be done without giving the patient a totally negative outlook. The patient should be made aware that he or she is seriously ill but that there is every expectation that they will be healed. The positive side of the illness including the chances for cure, however remote, should be emphasised. Only in exceptional circumstances in which the concurrence of physician and rabbi is obtained, should the true facts be divulged to the patient. Even then it should be emphasised that medical prognostications may be grossly inaccurate, lest they further reduce the morale and defence capabilities of the patient and their family. Mention of death should be avoided, if possible, lest the will to live be undermined. The doctor should never set a "maximum time to live" for any patient. Such estimates are usually destructive of the defence energies of the patient and the family.
Hazardous Surgery and Clinical Experiments

Jewish law is fundamentally opposed to any form of experimentation in which the human organism serves solely as an experimental animal. Even the informed voluntary consent of the participant does not suffice to permit the physician to subject that person to hazardous medical procedures. Suicide, in whole or in part, is equally abhorrent to Jewish law and to our philosophy of life.

The evaluation of new surgical procedures, or the multi-phase study of new pharmacological agents, can occur only within a therapeutic protocol. A patient suffering from an illness for which there is known medical treatment may be subjected to new procedures if there is valid expectation of benefiting him. Only where the expectation of beneficial results exceeds the danger of harm to the patient can this new treatment be applied. It is axiomatic in Jewish theology that the physician performs his duties under Divine licence. There can be no usurpation of Divine prerogative in the healing activities of the medical profession; the physician serves as a mortal intermediary.

This is a fundamental tenet of our faith that the personal God exercises providence over all his creatures.

When hazardous treatment is suggested that is not based on reasonable scientific groups, then such treatment is forbidden by Jewish law. Under these conditions, the physician must sense that he has no licence to function. He is relieved of his responsibilities, which remain in the hands of the Healer of All Flesh.

These considerations compel the following conclusion. When a hazardous procedure is proposed because death is inevitable without medical or surgical intervention, the actual risks of therapy must be evaluated against the possibility of restoration to good health. Often the evaluation involves great subjectivity. The physician should present to the religious guide a coherent medical statement of the pros and cons of the new procedure. In joint consultation, the rabbi and the physician will then be able to reach a definite judgment as to the advisability of this proposed treatment. Under Jewish law, a physician who in error prescribes a drug that is harmful but the intent was to benefit the patient, is nevertheless judged as one who has committed manslaughter.

Euthanasia

Judaism condemns any deliberate induction of death, even if the patient so requests, as an act of murder. Life is not ours to terminate. Therefore, it is absolutely forbidden to administer any drugs or institute any procedure which may hasten the death of the patient, unless such drugs or procedures have significant therapeutic potential.

One of the most perplexing of all medical-moral problems facing the physician is that of passive euthanasia. Judaism does not condone either active or passive euthanasia. This
term has been used to describe a wide range of morally questionable medical practices. They include the "near active" euthanasia of prescribing maximal dosages of barbiturates and narcotics with full knowledge that these dosages will physiologically compromise the patient, as well as the withholding of antibiotics so that "the old man's best friend", bronchopneumonia, can bring to a more speedy end to the ebbing life force.

The birth of a deformed child in need of life-saving surgery (e.g. Downs syndrome) is a problem in passive euthanasia of frequent concern to pediatric surgeons. Defining a deformed child as "less than human" threatens the foundation stone of Jewish ethics - the infinite worth of man.

As the end draws near and if the patient is conscious he or she should be permitted to have the services of a Rabbi. The final rites however, should not be a cause of aggravating the physical condition of the patient.

**IMMEDIATELY AFTER DEATH**

The inviolate right of humans to life which differentiates them so pointedly from infra-human species extends a protective cloak over the body, even after the Divine soul has left it. The rights of an individual do not cease with death. It is, therefore, never permitted to injure or mutilate the body except for the overriding consideration of the protection of life and health. The reverent treatment of the body and its speedy burial are Biblically ordained precepts. The deceased's immediate family bear the duty to inter the dead. Cremation, freeze-storage of the bodies, or above ground burial crypts, are in violation of Jewish law and practice. The duty to bury in the ground extends to every part of the body, even if a person gives a testamentary direction to be cremated. Jewish law requires that it be ignored as an unwarranted usurpation of the Divine rights over the body.

**Post Mortem**

Discussion of the specific medical considerations that demand autopsy examination should be grounded in mutual respect and cooperation between the rabbi and the attending physician. Full disclosure of the medical exigencies that call for an autopsy will enable the rabbi to evaluate fairly the position of Jewish law in the specific case. People are in the service of God, whose Divine precepts commit us to walk the middle road in a search for a morally equitable balance between the needs of medical progress and the exalted concept of man created in God's Image. The physician and hospital staff should respect the religious sensibilities of patients and family and should not pressure the family for autopsy permission when it is in violation of the religious principles of those concerned.
PROCEDURES FOLLOWING DEATH

Immediately following a death, a competent religious official should be placed in charge of the body. If relatives or religious personnel are not available, a Jewish staff member should be asked to supervise the removal of the body from the deceased's room to the mortuary. The official's first act should be to close the eyes and straighten the limbs of the deceased. Since Jews are prohibited from violating the Sabbath laws, relatives of the deceased should not be asked to sign documents or settle payments due to the hospital until approximately one hour after sundown on Saturday. It is a hallowed tradition of Judaism that the deceased is attended by a specially appointed guardian until burial. The hospital should cooperate by permitting this guardian to spend the night in the morgue anteroom where he can recite the prayer ritual in accordance with Jewish law and custom.
HOW THE GREEK ORTHODOX FAITH AND CHURCH
UNDERSTANDS DEATH

Archbishop Dionysios Psiachas

INTRODUCTION

Death, according to the Orthodox faith is a sleep. It is the last stand of the present life and the beginning of the Eternity. The Orthodox Christians do not see death as a nightmare which inspires fear. They see it as a messenger who brings the message of the Eternity. This messenger opens the curtain of the present life: we are shown the panorama of the life to come.

To those of the Orthodox faith, the present life is nothing other than the vestibule of the life to come. The death is the portico which conducts us to an Eternal Parthenon. Even more, it is the prelude to the endless music of Eternity.

The Holy Fathers of the Church say that death is a departure from the sad to the good: we go to more joyous repose and joy. Death is not death if it kills no part of us, save that which hinders us from the perfect life, the body. Death is not death if it ushers us closer to Christ: he is the founder of life.

We have two lives: one temporal and one eternal. God takes our temporal life. But, in return, he gives us a life infinitely more beautiful and eternal in the Heavens. To win this life we must prepare ourselves with confession and penitence, we must do this even in our very last hours of life.

BEFORE DEATH

If a person becomes ill and enters a hospital, after being examined by the doctors, she or he must see the priest also. The hospital staff or the relatives of this person should ask for a Canonical Greek Orthodox clergyman to visit the patient.

When the clergyman visits the patient, he talks with them. He recites prayers for them and he visits many times, preparing the patient for Confession and Holy Communion. He talks with the relatives and comforts them.

Unfortunately some patients do not wish to see a priest (at least during the first days of their entry to the hospital). They think they are to die. But this is the reason the priest visits them.

A hospital staff member can try to prepare the patient for the visit of a clergyman. He or she can advise the patient that it will help him or her spiritually and bodily if he or she sees a priest, and asks for the help of God.
After the first visit of the clergyman, he starts his duties. He will now become a friend of the patient. The advice and prayers can help the patient and change his or her situation.

**IMMEDIATELY AFTER DEATH**

When a Greek Orthodox person dies, the relatives should call any funeral director. Most funeral directors know how to prepare the body of a Greek Orthodox person. They take the body to their office to be washed and prepared.

The coffin is placed in the funeral director's chapel for the relatives to visit. They will be accompanied by an Orthodox Priest for a short prayer.

**Post Mortem**

In the Greek Orthodox Church, post mortems are allowed only in cases of suspicious sudden deaths. In recent years, the church has allowed hospital authorities to use parts of dead bodies where doing this might prolong the life of other people.

The reason the church does not allow the dead bodies to be given for experiments or to be dismembered is that there is a strong belief (between the majority of the Fathers of the Orthodox Church) that the same bodies will rise in the Second Coming of our Lord. Because of this, the bodies must be kept intact.

**THE FUNERAL**

The body is brought to the church for the funeral service at an arranged time and day. At the door of the church, a priest is waiting to conduct the procession in to the church. The coffin is placed before the royal doors (the central doors of the altar screen) facing the holy altar.

The coffin is kept closed. An Icon is placed on it. This may be an Icon of the Resurrection of Christ, or of the Holy Mother of God, the Virgin Mary, or another Icon. Two big candles are lit. One is at the head and one at the foot of the coffin.

Flowers or wreaths are allowed. But in some cases the relatives will prefer that donations are given to the parish church or to any other institution, instead of flowers.

During the service, the priest is helped by a chanter. A censer is used with suitable incense. This denotes that as the body ascends to Heaven, the prayers also ascend.

At the end of the service, first the clergy, then the mourners and all the congregation pass the coffin. Some kissing the Icon and the coffin, others only bow. They give their sympathy to the relatives, who stand in a certain place near the coffin. (It is called "the last tribute" or "the last salute").
After this, the coffin bearers (or relatives) hold the coffin. The celebrant priest conducts the procession, chanting, towards the exit. Here it is placed on the hearse, to be brought to the cemetery.

A short service is held at the cemetery. Then the coffin is lowered to the grave. The priest pours wine, oil and a little earth into the grave and on the coffin. He recites verses from the 50th Psalm. (The verses symbolise expiatory sacrifices.)

Following the service there is a kind of reception at the home of the deceased, or at any other hall. There, coffee, drinks and various cookies are offered.

Cremation is not allowed in the Greek Orthodox Church. Some may insist on cremating. This will be done without the permission of the church. After the service in the church, they take the body to the crematorium, without a priest following. After the burial, there is a series of memorial services, which are well known to the Orthodox people.

Note: In places where there is no Greek Orthodox clergyman, the relatives or the hospital staff may ask for the services of a Rumanian Orthodox, or a Serbian Orthodox or a Russian Orthodox priest. If none of these is available, they even may ask for an Anglican or Roman Catholic Priest to visit the patient. This priest will give a few prayers and comfort; but not Holy Communion. And in the event of death, one of these priests may conduct the burial service.
INTRODUCTION

This earthly life is temporal and inevitably ends in death. Death, according to Islam, is not the end of existence but it opens the door to a higher and permanent form of life. Hence it is a natural phenomenon and is a transient phase between this earthly life and the life of the Hereafter.

Nevertheless, dying is often a painful experience. It is also a very sad and emotional period for those who were close to the deceased. Islam does not overlook these aspects of death and its practices and customs are designed to subdue the associated effects.

Islamic practices related to death can be classified into three states, namely: before death, immediately after death, and burial.

BEFORE DEATH

The first thing for a dying person to do is to try to free himself from the obsessions of this worldly life. This is often the time when the dying person is in pain. It is also the time when relatives and close ones desire to comfort the sick person and the person longs for company. In this circumstance, the undermentioned practices are usually observed to make these last moments of one's life beneficial in achieving these goals.

Thus, the person's will and wishes are heard and carried out when appropriate.

The person's bed is preferably orientated so that his or her face faces Makka - which is south-west from New Zealand. Some of the ways this is achieved are lying the person on the side, lying on the back with the head slightly raised and supported by pillows or the like. It must be remembered that the person's comfort takes preference over facing any direction, hence this should only be done if it is convenient.

In Makka, which is in Saudi Arabia, is the "Kaaba" - the first house built for the worship of God by Prophet Abraham. Muslims all over the world turn towards this arena in their worship. This turning towards one focal point symbolises the Unity of God, which is the fundamental and most important teaching of Islam.

As the ultimate aim of the dying person is to concentrate on the Hereafter, objects that remind one of this world (e.g., music, radio, etc.) are best removed, unless requested otherwise.
Listening to the recitation of the Quran - Islam's Divine Scripture - reduces the worry of death and helps to focus on the Next Life, this it is usually recited by those who are present. A sick person may request for the Quran to be recited.

It is the wish of every Muslim that his or her last words be the testimony of the Unity of God, as this is the Absolute Truth and Reality. It may happen that the dying person may not be alert enough to remember to fulfil this life-long ambition. Hence, as the last moment approaches, those present recite these phrases audibly, so that the dying person can join in and recite with them. These phrases are usually recited in Arabic, regardless of the mother tongue or cultural background of the person.

The phrase is:

la ilaha illal lah.

which means "there is no deity but God".

IMMEDIATELY AFTER DEATH

When a person's body is confirmed, the following should be done immediately:

1. the eyes closed gently;
2. the mouth closed (and secured if necessary) in order to accomplish normal expression;
3. lay the deceased with all joints of the body at ease. Hands and feet should be straight and the toes together. The toes may be secured together to prevent them from parting. All this is so that the dead person has a normal and not undignified look;
4. all clothes are to be removed and the body fully covered, with a clean sheet;
5. if applicable (ie if there are no relatives to contact) the Muslim Community must be informed about the deceased, as it is the duty of the community to bury its dead.

Post Mortem

Generally a post mortem is not allowed. However if it is necessary for medical study an exception will be made.

FUNERAL

A Muslim has six duties towards another Muslim. The funeral is the last duty which a Muslim owes to another. The funeral service includes giving the deceased a bath, shrouding, funeral prayer and finally burial.
Bathing the dead

When required, the Muslim community bathes the deceased person. A Muslim must not be buried without a proper bath, wherever this is feasible. This bath is given in order to make the best possible preparation to meet the Creator in the Hereafter.

After the body is bathed and dried, camphor and perfume are usually applied on the body to neutralise any unpleasant odour that may be given off from the body. The body is then shrouded for burial.

Shrouding

Islam recommends that Muslims be buried in sheets of cloth rather than in the normal attire. A male is shrouded in three pieces and a female in five pieces of white cloth. The three sheets consist of one wrapped around from the waist to the feet, another that covers the top half from shoulders to the waist and the third is a sheet that is wrapped around and completely covers the whole body from the head to the feet, inclusive. In addition to this, women also wear a scarf covering the hair, and a band that is wrapped around the chest. These two pieces are included before the final covering sheet is put on.

All Muslims leave this world clad in this simple garment, signifying that the social status of a person in this world is of no consequence to the life in the Hereafter.

Funeral Prayer and Burial

After the body is shrouded, it is recommended that it be buried at the earliest possible time. Before the deceased is buried a funeral prayer called "salatul janaza" is performed by Muslims. This prayer should not be confused with prayer in the English sense of the word. Informal prayers for the deceased may be said whenever one likes, either individually or collectively. The salutal janaza is a formal prayer that is performed in congregation and it consists of praises of God and asking Him to forgive the deceased, giving him or her a life of bliss in the Next World.

After this brief service, the body is buried. Cremation is not allowed in Islam.
INTRODUCTION

At the very outset, it should be emphasised that the Hindu customs and rituals relating to death and dying have had an extremely long and complex development. What has broadly been called Hinduism - the religion of about 9,000 Indians settled in New Zealand, has affected all other Indian creeds such as Sikhism, Buddhism and Jainism. Although the number of Sikhs in New Zealand is very small (approximately 700), and they profess in some ways divergent beliefs, their basic customs concerning death and dying parallel or complement Hindu rituals and practices. The followers of Jainism in New Zealand are very small indeed but in this field they share much with their Hindu and Sikh neighbours. The Buddhists are regarded as non-Hindus or heterodox and although they share some of the fundamental beliefs and practices of death and dying with Hindus, they have their own rich and strong tradition.

This chapter aims at describing the customs and rituals relating to death and dying among Hindus and Sikhs who have migrated to New Zealand from different parts of India and follow their religious traditions strictly. It should be remembered, that some of these observations are not found in the ancient Indian texts but that they are followed at a popular level by these communities which trace their origin from the ancient sources.

BEFORE DEATH

Since most of the Hindus come from an extended family and have a wide range of relatives in New Zealand, it is necessary to let as many people see the dying patient as possible. It could be easily arranged in consultation with the eldest son or daughter or the spouse. Most of the Hindus have strong family ties and it is always helpful to talk to the dying patients about their family. Survival after death (reincarnation) and the ethical belief in action (Karma) constitute the central teachings of Hinduism and it will be helpful if the person dealing with the dying patients has some information about these doctrines. Most of the Hindus believe in God (Krishna, Rama, Vishnu, Shiva etc) and it is very usual for them to recite these names at the time of death. The sacred scripture followed by most of the Hindus in New Zealand is The Bhagavadgita (songs of the Lord) and it will be helpful if this scripture is easily available to the dying patient or kept near his or her bed for reading. The chief of the world of the dead, according to Hindu mythology is Yama, the father of mankind and the first one to die. It is believed by most
of the Hindus that after death they would enter heaven and would be united with their departed family. Most of the Hindus believe in the immortality of the soul and its post-existence. The following passages of the Bhagavadgita are usually recited and discussed among Hindus to come to terms with death and dying:

"As the soul passes in this body through childhood, youth and age, even so is its taking on of another body, the sage is not perplexed by this."

"Just as the person casts off worn-out garments and puts on others that are new, even so does the embodied soul cast off worn-out bodies and take on others that are new."

"For to one that is born, death is certain, and certain is birth for the one that has died. Therefore, for what is unavoidable thus should not grieve."

Most of the Hindus believe in God as the saviour who by his grace, protects the devotee and grants him the communion with Himself. There are Hindu priests in every major city. It is always helpful to invite them to visit the dying patients in consultation with the members of the family.

**IMMEDIATELY AFTER DEATH**

After the person's last breath, the body is washed and clothed. Many Hindus would prefer to take the dead body home or if possible, they would like the dying patients to die at home in the company of their family members. The Hindu householders consider their topmost duty to care for the dead and make sure that the dying patient has utmost attention and affection of the family.

The nature of death, according to Hindu mythology, is very complex. It is only the body that dies and the implication of such a view leads to an acceptance of some indestructible soul which is immortal and eternal. Although the avoidance of injury to the body of the dead, which is to be burned, is recommended by the Hindu scriptures, the post-mortem can be conducted only under exceptional circumstances. Most of the Hindus believe that the dead person would be united with his body, in its best form, after death. It is also believed that after death, the eye of the dead person would go to the sun, the breath to the wind and the body to the mother earth. The modern view of the abode of the dead is extremely varied and complex and most of the Hindus believe that depending on the nature of action of the dead person, the dead body would be allotted a status in the next life. The nature of the heaven which is attained by spirits is described in one of the earliest scriptures of the Hindus, the Rigveda, and many Hindus believe that the dead person would stay in heaven. It is a usual practice that every day food and water should be offered to the dead people and every month rice-balls (pinda) are offered on the day of the new moon in a ceremony known as Sraddha (faithful). These are not funeral rites but are gestures of good will and homage to the dead spirits. If
proper ceremonies are not performed, most of the Hindus believe that the dead person would become the wandering ghost without a proper body. But if ceremonies are performed in right manner, he or she would have a place in the heaven with the fathers.

FUNERAL RITES

Although in ancient India, the burial of the dead was in practice, the cremation is the usual practice among Hindus. It is practised to this day except for very small children or saintly persons whose bodies are believed not to decompose. The cremation takes place in India on the "burning ghats" especially near the sacred river but such practice is not possible in New Zealand. Cremation is taken to be an offering to the sacred fire, the God, who according to Hindu mythology, was both priest and deity and who would burn the body but protect the soul to be united with the ancestors.

After death the body is taken home by some Hindus and laid on the ground before it is taken to the cremation and placed on the funeral pyre. The practice of cremation implies the belief in the destruction of the physical body and Hindus do not believe in the 'resurrection of the body'. The spirit is believed to ascend to heaven. The son is usually asked to perform the rituals, and it is still emphasised.

Traditionally, the Sraddha rites were directed by priests and even today it is in practice among Hindus. In New Zealand, however, the full Sraddha ceremonies are rare and many people are content with simple offerings. But proper funerals are regarded as essential for the dead as well as living members of the family.

Death Ceremony among the Sikhs

As we mentioned earlier, the Sikhs (the followers of Sikhism, a religion founded by Guru Nanak and practised by many Sikhs in New Zealand), have more or less similar customs relating to death and dying with some minor variations. When a Sikh is on his death bed, the friends, relatives, or priest read Sukhmani, the verses of peace. Complete silence is observed. The dying person is not removed from the bed. Only the name of God is repeated. The Sikhs do not approve of lamentations after the person is dead. Everybody bows to the will of God and Wahiguru is repeated. All the dead bodies, including those of infants, are cremated. Before cremation, the dead body is washed and clothed, in accordance with the Sikhs symbols and rituals. The funeral procession recites the sacred hymns from Sri Guru Granth Sahib, the sacred scripture of the Sikhs. It is desirable to keep this book in the hospitals. The eldest son performs the death ritual and puts the dead body on the pyre. If the eldest son is not available it could be done by the nearest relative. After the cremation, Sohila is read. People then join the bereaved family to console them. The death ceremony continues for at least thirteen days, and prayers are offered to God to keep the departed soul near His feet. The Sikhs forbid the
erection of monuments over the remains of the dead. They believe in contribution to the hospitals in the memory of the deceased. The following passage is very significant and is repeated constantly:

"Thy will is sweet, my Lord,
Thy Grace alone I beseech".
INTRODUCTION

In Vietnam, beliefs and customs surrounding death vary from region to region and sometimes from family to family. However, everyone agrees that the death of a family member is as important as a birth (or even more important).

It is considered a blessing for parents to have their children at their side when they die. If the eldest family member dies, all other younger members of the family are supposed to come home to pay tribute to the deceased, no matter where they are.

A person who is terminally ill prefers to die at home rather than in hospital. Many people believe that the spirit of a person who does not die at home becomes detached from the body and cannot rest in peace.

When an old father is dying, he would be placed in his bed in the common room with his head facing east to show that he is dying of natural causes.

Everybody should keep quiet - the mother and family members watch to see if he has any last wishes to make. These last wishes are written down to be followed later because there is no written will as in western societies.

Family members will take turns to sit and keep watch near the dying father until he actually breathes his last breath. When he dies, the person who keeps watch should lay a chopstick across his mouth so that the teeth won't cling together.

The watcher must know exactly what time he died so that the family's astrologer can tell whether he died at an auspicious time or at an evil time.

IMMEDIATELY AFTER DEATH

When he is dead, family members lie the corpse on the ground for a few minutes so that he can "absorb" the air of the ground.

When he is put back in the bed, his face is covered with a piece of coarse white paper so that, it is believed, he can't see family members who are now in grief.

Normally, the eldest son of the family will be in charge of all the ceremonies and rituals. In most families, there is an experienced elderly relative who will advise on the necessary rituals and prescribed behaviour.
The Cleaning of the Deceased

A big pot of water is boiled and people add five special spices to clean the corpse. If the father dies, the eldest son will do the cleaning. If the mother dies, the eldest daughter will do the cleaning.

After the deceased is cleaned, he is dressed in his best clothes with the buttons and fasteners removed, his hair is combed, his finger nails cut. Then the eldest son puts a few grains of rice or three coins (or a tiny piece of gold) into the deceased’s mouth. This is to provide food and money for the deceased in his world.

At this time weeping is extravagant. Some women become prostrate. The body may be treated roughly, as if the family is angry at their loss. Before the body is put into the coffin, people often wind it in white silk or red silk. Two thumbs are tied together, so are the two big toes. Silent prayers are offered by the family kneeling at different positions around the body, and red wax candles are turned.

The Placing of the Deceased into the Coffin

Family members must choose an auspicious time to put the deceased into the coffin. The bottom of the coffin is covered with thick white cloth and on the top of it is spread a thick layer of tea leaves which will absorb any liquid secreted by the deceased.

A ceremony is conducted at the same time, and during the ceremony, family members kneel in front of the coffin and weep. When they stand up, males stand on the left hand side and females on the right.

When the coffin is sealed, it will be placed in the middle of the common room with the head facing south.

From now on, family members must take turns to keep vigil over the deceased day and night. (The vigil period is from three days to five days or a week, it depends on circumstances). On the coffin, people place a bowl of cooked rice and a boiled egg, into which joss sticks are placed.

Funeral Uniforms

At a special ceremony, funeral uniforms are distributed to all members of the family. They are made of plain white cloth. White head bands are also worn.

Members of the family wear different clothes so that an outsider is able to tell who they are. Sons do not wear the same as daughters and the bride and the groom each wear different clothes from the family’s. From now on, no shoes are worn. Everyone is barefoot.

The Visit to the Family in Grief

Normally, friends of the family pay a visit only after the deceased has been placed in the coffin.
The visitors may bring along scrolls of white silk on which the deceased's virtues are extolled, incense sticks, white or red candles, or sometimes money. The family often has white silk scrolls hanging on the walls. On the scrolls are black Chinese characters saying something good about the deceased. Names and gifts of the visitors are written down in a notebook so that the family will be able to thank all of them later.

Visitors always kneel down before the altar to pray, to pay tribute to the deceased. Family members are expected to kneel down (or to perform "lay"/lei) to return the respect to the visitors.

At the same time, a small orchestra of four or five people plays a sad tune to show the deceased that visitors have come to see him.

The Announcing of the Bad News

It is not a Vietnamese custom to publicly announce a death in the family. The news is spread by word of mouth. However, people nowadays have adopted the custom of having death notices printed in newspapers. And one or two days after the funeral, a thank you note appears in newspapers to thank everyone who has come to the funeral.

THE FUNERAL CEREMONY

The Funeral Day

The funeral day must be an auspicious day chosen by the family's astrologer after the deceased's horoscope has been consulted. Hospitals should be aware of this because it is sometimes necessary to bury the person on the day after death, since the next auspicious day may be months away.

The Funeral Procession

Of course, every family member is now wearing a funeral uniform. If the father has died the eldest son carries a bamboo stick and walks behind the hearse. If the mother has died, the eldest son carries a bamboo stick and walks in front of the hearse.

The rest of the family will be walking behind the hearse. They prefer to walk instead of using cars or buses. If there is not son in the family, the person who inherits the title will carry the stick. Other family members, especially women, are expected to show their grief openly by crying and weeping.

Some wealthy families hire a band and sometimes even professional mourners (about 10 years ago!)

In front of the procession, people display these scrolls of white silk given by friends. And the procession is often led by a Buddhist monk.
Along the road to the cemetery, people burn incense sticks and scatter golden paper. At the graveside, the Buddhist monk conducts a brief ceremony to ask the God of the soil for permission to bury the deceased.

Then the family waits for the "right" time to lower the coffin into the grave. The head of the family will throw a handful of soil into the grave and every family member will do the same.

After the soil is replaced, ritual offerings of food and burning incense sticks are left on the grave. Every family member performs "lay" before leaving the grave.

**AFTER THE FUNERAL**

Three days after the funeral, a small ceremony is held at the graveside. This is the opportunity for the family to tidy up the grave and set up the tombstone.

From the fourth day onwards, family members no longer visit the tomb; however, at home, twice a day ritual offerings of food are made at the altar. This continues until the hundredth day.

If the family is Buddhist, seven days after the funeral, the family invites a monk to the house to conduct a ceremony which every family member attends to pray that the deceased will rest in peace. The same ceremony will then take place once every seven days until the seventh week (or the forty-ninth day).

On the hundredth day, a special final ceremony will be held with a lot offerings on the altar.

During the mourning period, family members are discouraged from such enjoyments as going to the movies, theatres, night clubs or attending happy occasions such as weddings or parties. This restraint is practised in honour of and out of respect for the deceased.

The relationship to the deceased determines the formal period of mourning. A father should be mourned by his family for three years. A husband is mourned by his wife for two years, but a wife is mourned by her husband for only one year (social discrimination!!)

A widow in mourning is expected to wear sombre clothes, avoid social activities and refrain from remarrying.
BELIEFS OF THE KAMPUCHEAN COMMUNITY

RELATING TO DEATH AND THEIR CUSTOMARY PRACTICES FOR FUNERALS

Chan Tholla

INTRODUCTION

1 Influence of Buddhism

Beliefs and attitudes of people towards death - when people die, only the physical body is gone, the soul remains to be born again in the next life. This is reincarnation, which is really a follow-on from the Buddhist theory of impermanence or unsatisfactoryness of worldly existence - a world of deaths and decays!

On the conduct of funeral ceremonies - there are no funeral directors in Kampuchea! (I mean in the form of a business). Instead, a Buddhist layperson called "Achar" would take charge. The same person would be responsible for other ceremonies such as births and marriages and well, although some "Achar" might specialise in funerals.

2 Possible Effects of the Wars and Pol Pot Regime on People's Attitudes

For example, massacres and mass graves, prolonged prohibitions on proper funeral ceremonies, complete disregard for culture and tradition by the communist authorities. But since it is the duty of those living to secure dignified burials for their loved ones, some attempts were made at least to bury separately for ease of identification later on, (according to a reported case.)

BEFORE DEATH

In the case of prolonged illness by the dying, Buddhist monks would be invited to come and given chantings, the purpose of which is to help the dying concentrate on the Dharma. A Buddhist layman would then be assigned to look after him, until the time he or she dies.

Children and relations would come and see the dying to seek forgiveness for wrongdoings in the past. The sick person is encouraged to recite "Pu tho Arahang" (meaning: Buddha the Awakened One) and to concentrate his mind on the good things that he has done, and not to worry about family and things.

Relations would also prepare offerings to be given to monks on behalf of the sick person. The offerings would be shown first to the person so that he could rejoice in the good deed. Preparations begin: the layman would make the "death candle" to be lit just before the time of death and after the person has died. Another set of offerings, consisting of incence
sticks "Sla and Mlou", is prepared as a symbol for the soul to take to Heaven. A "soul flag" is also cut, made from white cloth, measured to be about the length of the dying person's forearm. On the flag are inscribed holy Pali words or some other drawings (crocodile or a heavenly Stupa). It is believed that the flag would carry the soul towards a new rebirth.

The soul flag is placed on the head board of the death bed. The sick person's room is decorated with white cloth with or without inscriptions or drawings of Buddha's lives.

IMMEDIATELY AFTER DEATH

The layman shuts the eyes and mouth of the deceased. Five more candles are then lit and placed at the head and foot ends of the death bed, and the "death candle" which has been lit since the time before death is now put out, to be replaced by a kerosene lamp. This symbolises the end of the life and the new beginning. The lamp is placed at the foot end of the death bed, together with five forearm-lengths of white cloth, one unit of currency, a bunch of bananas and a basket of rice. The soul flag is then put up high in front of the house, indicating someone has died. The coffin is then prepared. Before putting the body in the coffin, the body is washed with perfumed water and the hair combed. This "bathing" process is the Brahamist form of washing away sins, but because no such "baptism" exists in Buddhism, it is interpreted instead as a way of showing gratitude. (Bathing parents and elderly people is an established custom, a good deed performed by youngsters as old people find it hard to fetch water themselves). Then the body is dressed in white with the white cloth, and with cotton thread, tied at the neck, wrist and ankle. The tying symbolises the Buddhist way of saying that people have three worldly ties:

(1) wife or husband;
(2) children;
(3) belongings.

Those who could get rid of these ties are free from the Samsara, the cycle of life and death. Next, a gold or silver coin is put in the corpse's mouth as a parable that when one dies one cannot take anything with one, not even a single coin. Finally a square piece of white cloth in put over the corpse's face, and the body is then wrapped around by 12 forearm-lengths of white cloth before being placed in the coffin. Monks are then invited to give chantings and blessings.

For poor families, cremation is performed straight away. For well-to-do people, the body would be left in state for two or three days. For funerals of royalty or an abbot, the body could be left in state for a long time before cremation.
THE FUNERAL CEREMONY

Funeral Procession

After the coffin has been eased off the lying-in-state spot, the layman pours water on the supporting stones and kicks down the stones from the spot.

The procession order is as follows:

(1) the monks doing the chantings and blessings;
(2) the layman carrying the soul flag;
(3) the procession music, consisting of drums and high-pitched flute providing the rhythm of the procession;
(4) the popped-rice girl, being a close relation of the deceased, and dressed in white, recites the Dhamma and sows the popped rice looking straight ahead. The popped rice scattered on the ground symbolises bones scattering on the earth;
(5) the fireside (and soon to be ordained monk, or novice) being a male close relation of the deceased, dressed in white and wearing a string of grass tied to the coffin. This chain of grass represents the human chain of existence. Such ordaining is also to show gratitude;
(6) four carriers of the coffin. (Foot of the deceased forward);
(7) the candle holder (usually a favourite child of the deceased or maybe a maid);
(8) relations and friends bringing up the rear.

The procession tours the cremation place three times before placing the coffin on the cremation stand. (Head facing west).

The Cremation

The layman unties the body, and invites the monks to chant and give blessings. Relations and friends then put incense sticks and candles and flowers on the body and seek forgiveness. The layman and four carriers make three tours of the coffin, each carrying a torch, then light up the fire to begin cremation. While the fire is burning, the fireside novice will be ordained as a monk. He could leave the monkhood after the cremation or the next day.

Five or six hours later all would have been burnt. The carriers throw the coffin cover over the fire as an act to chase away evils. The layman and the carrier, each carrying an urn of water, and make three turns (tours) of the spot before putting out the fire. After that rice and beanseeds are sown onto the spot to signify the change: death and rebirth. The layman performs the "Change of State" act
(above) in three times, each time making a configuration of human form from the ashes and asking the gathering whether it is right.

Next comes the "bone picking" act. Relations could join in, picking up the bones and washing them with a mixture of coconut water and then placed them in a container to be put in the house or placed in the pagoda. Those who pick up teeth coins must realise that the items represent the gift from the deceased that must be kept properly.

That night, monks are invited to come and given chantings and also a Dhamma talk. The next day, food is offered to the monks as a meritorious act to be conveyed to the deceased. Seven days later the same ceremony is repeated, with another one on the hundredth day.

The reason for placing the bone container in the pagoda is that the soul could have a chance to listen to the monks chantings and Dhamma talks. Some well-to-do people would have Stupas of different sizes to store the container within the premises of the pagoda, usually around the temple buildings.

The sign of mourning for close relations is a shaven head, white shirt and black pants or skirt, or all white or all black. In general, people mourn for one hundred days but others could do that as long as one year.

Cremation is the most common way of burial. Some Khmers with Chinese ancestry may want a burial instead of a cremation. In the countryside cremations take place just near the deceased's house, or the nearest pagoda which would have a crematorium - just a shelter - for the purpose. Modern crematoriums in the city provide fast and efficient burials, but can be costly.

Funerals of royalty or an abbot are a big occasion, with lots of fireworks and long lying-in-state.

Of course lately, burials seem to have been the more popular way of disposing of the body, perhaps due to a shortage of firewood (it needs the whole tree for one cremation). Burials found a lot of favour among the communist authorities.