Conversation on 'Dying and grieving in the time of COVID-19: can we do better?'

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The COVID-19 pandemic has not only changed the rate at which people are dying, it has changed the circumstances and ways in which people are able to grieve and otherwise deal with death. This virtual meeting brought together over 30 academics and practitioners with different perspectives on these issues to broaden our understandings of the challenges that COVID 19 and associated policy responses have introduced, and to consider what research might contribute to efforts to improve experiences of dying and grieving as we move forward.

We started with four thought provoking short presentations before opening up to a broader discussion.

Dr Arnar Arnason shared insights from social anthropology illuminating different cultural ideas about what makes a good death and illustrating some of the various ways in which people strive to turn bad deaths into good deaths. Arnar offered initial thoughts on why many deaths from COVID may be considered bad deaths, and why grieving them may be particularly difficult.

Dr Rebecca Crozier explained how archaeological studies of different treatments of the body after death can help understand how people have navigated death in the past. She also noted that in the current climate in which most people are quite distanced from death, and especially from dead bodies, archaeological evidence and images that generate insights and raise questions about past attitudes and approaches to death can facilitate discussion about dying and grieving today.

Dr Stephen Makin and Dr Phyo Myint reflected on their recent clinical experiences with COVID-19 as geriatricians working respectively in a rural community and a city hospital. Their accounts gave insight into some of the many practical and personal challenges that the disease itself and the requirements of social distancing have introduced for fulfilment of their commitments to facilitate good deaths, including via the provision of emotional and spiritual support. They also illuminated some of the creative strategies and remaining difficulties for communicating sensitively and supportively with bereaved family members, who may have diverse ideas about what makes for a good death.

Abi Patenden, Manager of Freeman Brothers Funeral Directors and Immediate Past President of the National Association of Funeral Directors, gave a vivid sense of how COVID 19 brought simultaneously to funeral service teams a huge demand for their work and a need to change the way they went about it. A theme of practical and personal challenges for fulfilment of service commitments to help bereaved family members deal with death well, and on their own terms was again evident. Abi also raised important questions about the longer term implications of constrained options to celebrate lives and mourn loss together and about social inequalities in access to (support for) opportunities to influence how the bodies of dead family members are handled and to participate in social activities that mark the end of lives.

The comments and questions that followed reflected appreciation of these insightful and stimulating presentations. Participants with diverse academic/professional backgrounds and personal experiences offered further examples of how COVID-19 and associated social distancing requirements have impacted professional and personal relationships and precluded or constrained

practices that people use to help bring some good from death and to help them grieve. These included the university's anatomy department currently having to disappoint every family wanting to donate a relative's body for a broader social good. Participants also drew on other areas of clinical and social activity to further illustrate and illuminate ideas about good and bad deaths, how people are remembered and relationships with the dead sustained, and how social benefit can be derived from difficult circumstances.

The Conversation confirmed significant scope for research to further investigate and support a positive shaping of understandings and practices relating to death in the time of COVID-19. It also revealed something of the wealth of expertise and insight that is present across the University of Aberdeen to help develop this. Members of the Research and Innovation team and Public Engagement in Research Unit expressed willingness to support continued conversations and the development of grant applications. We hope to see more work in this area soon, including in contributions to an exhibition being planned by our Special Collections and Museum team.

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