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## **12. Background**

The total number of deaths due to influenza that will occur is dependent on the severity and epidemiology of the pandemic virus. The number of deaths depends on the attack rate of the virus and the virulence of the strain.

### **12.1. Introduction**

During an influenza pandemic, Peterborough City and County authorities will have to be prepared to manage additional deaths due to influenza which will be over and above the number of fatalities from all causes currently expected during the inter-pandemic period. A list of funeral homes and crematoria in Peterborough County and City can be found in Appendix A to this chapter.

### **12.2 Planning Process**

The Peterborough County-City Health Unit (PCCHU), the City and County of Peterborough, and the Peterborough Regional Health Centre (PRHC) are working with key stakeholders in the funeral home sector, emergency medical services, and the Office of the Regional Coroner to manage deaths that occur in the community as a result of an influenza pandemic.

### **12.3 Goals**

The goals of this plan are to:

1. To ensure an effective, efficient, coordinated response to the increase number of deaths occurring in Peterborough County and City.
2. To ensure the safe and appropriate handling of the deceased.

### **12.4 Planning Assumptions**

The Plan assumes that:

- people will continue to die of causes, other than influenza;
- substantial numbers of people may be unable to work due to illness, caring for ill family members or death;
- there will be an increase in the number of deaths due to influenza over a short period of time;
- there will be an increase in the number of deaths occurring in the home;

- the hospital morgue capacity will not be capable to manage the increased number of deaths;
- temporary morgues may be required to handle the increase in deaths; and
- since a Regional Hospital is located in Peterborough City, deaths from individuals residing in other jurisdictions will occur in Peterborough and may have to be transported to funeral homes outside of this area.

### **12.5 Triggers for Using This Plan**

Upon notification by the PRHC and/or funeral homes that the number of deaths exceeds their capacity, this plan will be implemented.

### **12.6 Roles and Responsibilities**

#### **1. Role of the Coroner**

In the early stages an infectious disease outbreak, it is likely that some deaths may be referred to the Coroner until the nature of the outbreak, i.e. pandemic influenza, is identified. The coroner investigates deaths as per S.10 of the Coroners Act. (See [http://www.e-laws.gov.on.ca/DBLaws/Statutes/English/90c37\\_e.htm](http://www.e-laws.gov.on.ca/DBLaws/Statutes/English/90c37_e.htm)) This includes deaths occurring suddenly or unexpectedly or deaths under such circumstances as may require investigation. These deaths are reported directly to the Coroner or to a police officer. If a police officer is notified, he/she will contact the Coroner.

The Regional Supervising Coroner has stated that, after the pandemic has been declared, most deaths from influenza would not be classified as sudden or unexpected, and therefore a Coroner would not have jurisdiction as per S.10 of the Coroners Act to involve himself in these deaths.

The Coroner would become involved in some deaths that he/she would not normally investigate if there is no one else to assume responsibility for specific tasks related to these deaths, i.e. signing death certificates and approval of cremation services.

As per Section 16 (3), of the *Coroner's Act*, R.S.O. 1990, 'A coroner may authorize a legally qualified medical practitioner or a police officer to exercise all or any of the coroner's powers under subsection (1). R.S.O. 1990, c. 36, s. 16(3). In Peterborough County and City, the Regional Coroner has designated some family physicians to act as Coroners.

The identification of the dead, if the person is unknown, is the responsibility of the Coroner's office.

## 2. Role of Funeral/Crematorium Directors

During the course of a pandemic, funeral directors may be able to manage additional deaths due to influenza, over and above the number of fatalities from all causes. The total number of fatalities (including influenza and all other causes) occurring during a pandemic wave of six to eight weeks is estimated to be similar to that which usually occurs over a period of six months. On average, most crematoria can handle one body every four hours and could probably run 24 hours to meet the increased demand. Cremations have fewer resource requirements than burials and, where acceptable, this may be an expedient and efficient way of managing a large number of corpses during a pandemic. Bodies for cremation are embalmed less frequently. Cremated remains do not require refrigeration, thereby allowing a memorial service to be held at a later date.

The PCCHU recommends that funeral homes and crematoriums:

- Develop written plan for an influenza pandemic and review and update it annually
- Collaborate with other funeral homes and crematoriums, the PRHC and the PCCHU
- Coordinate plans with other organizations as required
- Identify opportunities to collaborate/share resources during a pandemic
- Develop a plan of how to manage increase deaths with a shortage of staff
- Develop a business continuity plan which will include:
  - determining which services must be maintained and those that can be curtailed
  - identifying opportunities for redeployment of staff (including cross-training)
  - identifying strategies to augment staff (for example, using retirees and former staff, extending hours of work, calling staff back to work, volunteers)
  - plan for possible labour, insurance and/or liability issues when redeploying or augmenting staff
  - plan for support for staff (child care, transportation, family responsibilities)
  - involve the Joint Occupational Health and Safety Committee and unions
- Purchase and maintain a one month inventory of supplies (See OHPIP, Chapter 10 and 10A at:  
[http://www.health.gov.on.ca/english/providers/program/emu/pan\\_flu/pan\\_flu\\_plan.html](http://www.health.gov.on.ca/english/providers/program/emu/pan_flu/pan_flu_plan.html) )
  - identify alternate suppliers for equipment since traditional supply chains may be disrupted
- Train staff on routine practices and the consistent use of PPE
- Provide education to staff using approved fact sheets and notices provided by the Funeral Boards or Associations, PCCHU and the MOHLTC before and during a pandemic
- Ensure that infection control measures are in place to minimize the spread of influenza and protect staff (Refer OHPIP, Chapter 7, Infection Prevention and Control and Occupational Health and Safety at  
[http://www.health.gov.on.ca/english/providers/program/emu/pan\\_flu/pan\\_flu\\_plan.html](http://www.health.gov.on.ca/english/providers/program/emu/pan_flu/pan_flu_plan.html)

### **3. Role of the Peterborough County-City Health Unit**

Influenza is a reportable disease under the Health Protection and Promotion Act. Therefore, the PCCHU will be notified by health care professionals (physicians, nurses, hospitals, laboratories, long term care facilities) of deaths related to the pandemic. This information will be entered into iPHIS.

The PCCHU Public Health Inspectors are responsible for ensuring that handling of the deceased are performed in a sanitary manner. This includes ensuring a mechanism for the prompt collection of the dead and ensuring that the temporary mortuaries and/or cemeteries created during a pandemic are located, built and maintained so that a health hazard does not arise.

During a pandemic, Public Health Inspectors at the PCCHU will ensure the following:

- Personnel handling bodies will use personal protective equipment and wash hands frequently
- Corpses are wrapped in plastic sheeting.
- Vehicles used for transporting of bodies are to be maintained in a clean condition and reserved for transporting those dead of communicable disease.
- Temporary mortuaries have impervious, well drained floors, preferably located at ground level, and a potable water supply. These sites also must separate the mortuary attendants accommodation (office, washroom, change room, etc.) from the mortuary. Unless refrigerated, corpses should not be held for more than 48 hours before burial during warm months. (Refer to the Practical Guidelines for Safe Embalming Procedures for Funeral Directors, Ontario Funeral Service Association, 1989)

#### **12.7 Temporary Morgues**

An increase in the number of deaths that may occur during a pandemic may overwhelm local morgues and funeral homes. In Peterborough County and City, the morgue is located at the Peterborough Regional Health Centre. It has a current maximum capacity of six bodies. It can also hold two additional bodies in the autopsy suite for short periods of time since it is not refrigerated. When the morgue reaches capacity, a temporary morgue may be required.

A temporary morgue must be maintained at 4°C to 8°C. Corpses will begin to decompose in a few days when stored at this temperature. If the body is not going to be cremated, plans to expedite the embalming process should be developed since bodies may have to be stored for an extended period of time.

Temporary cold storage facilities could be utilized as a temporary morgue during a pandemic for the storage of corpses prior to their transfer to funeral homes and/or cemeteries. Types of

temporary morgue facilities may include refrigerated trucks, cold storage lockers, ice arenas, and curling rinks.

Note: Use of local businesses for the storage of human remains will only be considered as a last resort. The post-pandemic implications of storing human remains at these sites can be very serious and may result in negative impacts on business with ensuing liabilities.

The Regional Coroner will be responsible for temporary morgue facilities.

### **12.8 Handling of the Deceased and Infection Control**

All individuals who handle dead bodies will use Routine Practices (the Health Canada term to describe the system of infection prevention and control strategies) (See Preventing Febrile Respiratory Illnesses at

<http://www.health.gov.on.ca/english/providers/program/infectious/syndromes/fri.html> or

Routine Practices to Prevent and Control Transmission of Nosocomial Pathogens at

<http://www.health.gov.on.ca/english/providers/program/infectious/syndromes/fri.html>).

Special infection control measures are not required for the handling of persons who died from influenza, as the body is not 'contagious' after death. The actual risk of influenza infection spreading from the body of a deceased individual is minimal, with the primary precaution against disease spread being the prevention of exposure to splashes or aerosols of body fluids.

The people attending funeral service and visitations may be incubating or already ill with influenza, either acquired from the deceased or in the community. Aggregation at a funeral and close contact in comforting relatives and friends provides a potentially efficient route of transmitting influenza. To reduce this risk, alcohol-based hand sanitizers and tissues should be readily available in funeral homes, along with waste receptacles for tissue disposal. Signs should be posted to encourage use of the alcohol-based hand sanitizers. Attention to environmental cleaning within the funeral home is also important. Strategies to enhance social distancing during the funeral and visitation should also be considered.

### **12.9 Transportation of the Deceased**

The deceased will be transported to a funeral home, crematoria or cemetery. Funeral directors will be responsible for the transportation of the deceased to the designated location unless the case has been accepted for investigation by the Coroner.

If the funeral home/crematoria are unable to handle the increased demand to transport the deceased, alternate drivers may be utilized. The funeral homes are responsible for training their drivers on the proper handling of the deceased and the procurement of additional transportation vehicles. There are no special legal requirements in terms of driver license or the type of vehicle needed for transportation of a corpse.

### **12.10 Process to Handle Deaths**

#### **a) Deaths Occurring At Home**

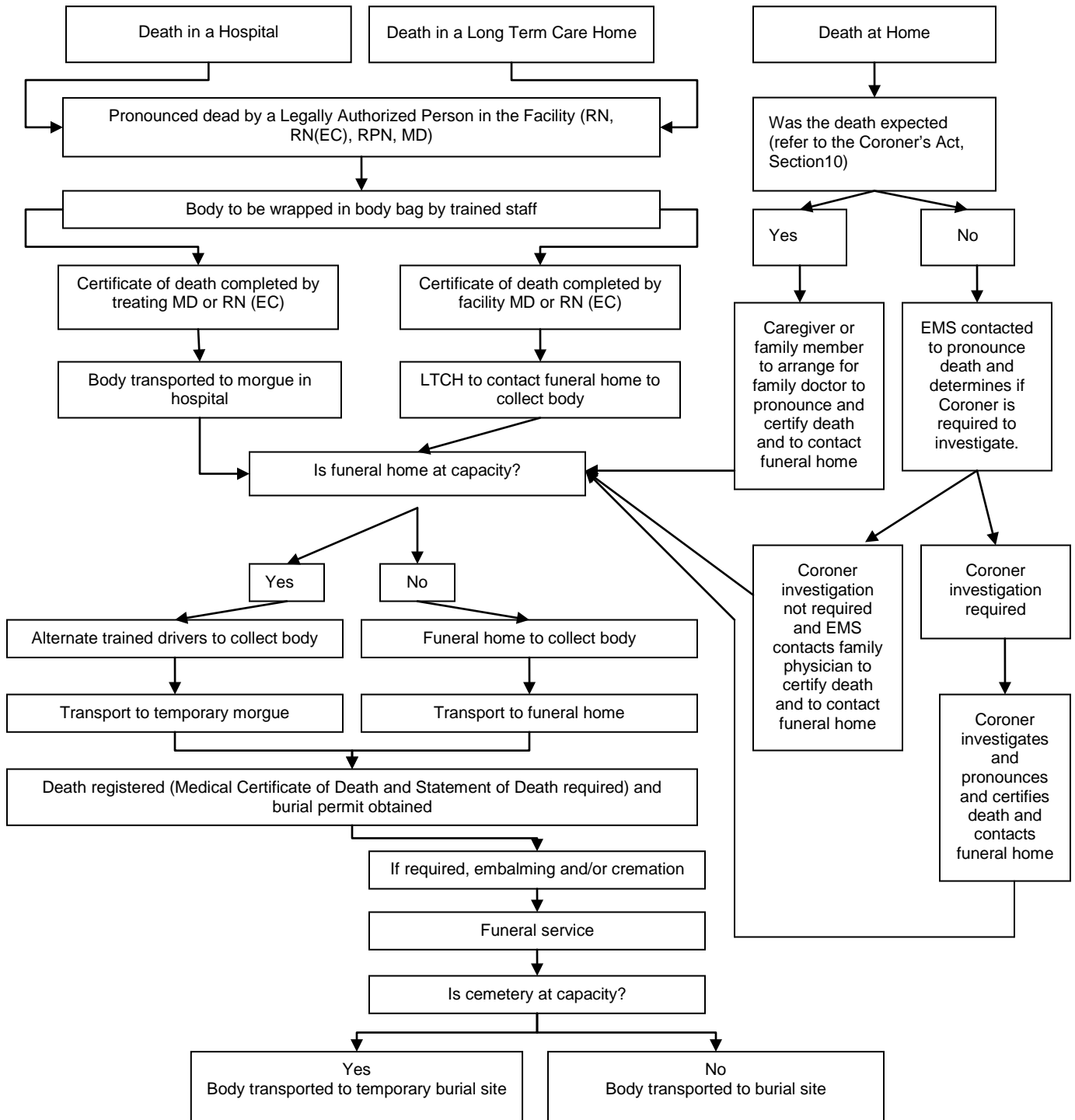
During a pandemic, an individual with serious complications of influenza and near death may choose to die in their home instead of the hospital. For these expected deaths, families should consult with their family physician and/or nursing agency to ensure that a ‘Do Not Resuscitate’ order signed by a physician is prepared and available at the home. Families will have the names and phone numbers to call to report the death. (See Peterborough Regional Health Centre, Base Hospital, Medical Directive for Expected Death and DNR, Nov 2005, and Peterborough Regional Health Centre Base Hospital Program Policy, Cease Resuscitation Order).

#### **b) Deaths Occurring in a Long Term Care Facility or Hospital**

There will be no change in the process for handling deaths in a long term care facility or a hospital during a pandemic.

The following table describes the process for pronouncement and certification of deaths during a pandemic.

**Process for Handling the Deceased During a Pandemic**



Note: if deceased does not have a family physician, Coroner can pronounce and certify deaths.

### **12.11 Special Handling of Unclaimed Bodies**

Bodies that cannot be identified before burial are entered into the Vital Statistics database as 'John Doe' noting the date and place of death. The collection of multiple 'John Doe' bodies at a pandemic body collection area would necessitate the assignment of numbers to each body (ie., John Doe1, John Doe2, etc.) A specific or police number should be linked to each body to avoid delay in processing the registration of death. The Coroner, supported by police, is responsible for gathering and retaining evidence for later identification. Such evidence includes, but is not limited to, full body x-rays, dental records, photographs, finger prints and DNA samples. Unidentified bodies are buried and not cremated.

### **12.12 Social and Religious Considerations**

Some religious and ethnic groups have specific directives about how bodies are managed after death. These needs will be considered as part of pandemic planning. (See Appendix B: Cultural and Religious Practices During Death and Dying)

**Appendix A: List of Funeral Homes and Crematoria in Peterborough Area**

<b>Funeral Home/Crematoria</b>	<b>Phone</b>	<b>Fax</b>
<b>Comstock Funeral Home &amp; Cremation Centre</b> 356 Rubidge St. Peterborough, ON K9J 7B3	745-4683	745-8197
<b>Duffus Funeral Home</b> 431 George St. South Peterborough, ON K9J 3E2	745-4612	745-4715
<b>Nisbett Funeral Home &amp; Chapel</b> 600 Monaghan Road South Peterborough, ON K9J 5H9	745-3211	742-4475
<b>Hendren Funeral Home</b> 66 Queen St. Lakefield, ON K0L 2H0	652-3355	652-5120
<b>Norwood &amp; District Funeral Home</b> 36 Queen St., P.O. Box 182 Norwood, ON K0L 2V0	639-5322	639-2150
<b>Ministerial Association</b> 1494 Glencairn Ave. Peterborough, ON K9J 6S3	745-4878	745-4111
<b>Brett Funeral Chapel</b> 20 George St. West Havelock, ON K0L 1Z0	778-2231	778-2869
<b>Community Alternative Funeral &amp; Cremation Services</b> 83 Hunter St. West Peterborough, ON K9H 2K5	742-1875	742-0016
<b>Rosemount Gardens</b> 251 Whittington Dr. Peterborough, ON K9J 6X4	742-3242	742-4796
<b>Little Lake Cemetery</b> 915 Haggart St. Peterborough, ON K9J 2Y1	745-6984	745-6164
<b>St. Peter's Cemetery</b> 870 High St. Peterborough, ON K9J 5R2	745-4681	745-9258
<b>Lakefield Cemetery</b> 1262 Buckhorn Road Lakefield, ON K0L 2H0	652-3252	652-1312

Funeral Home/Crematoria	Phone	Fax
<b>Benson Funeral Home</b> 24 King St., Millbrook, ON L0A 1G0	932-5300	932-5306
<b>Kaye Funeral Home</b> 539 George St. North Peterborough, ON K9H 3S1	745-7889	745-2316

**Appendix B: Cultural and Religious Practices during Death and Dying**

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**Introduction**

In accordance with the Canadian Charter of Rights and Freedoms and the Canadian Human Rights Act, we much consider the differing cultural and religious practices with respect to the dead and dying during a pandemic Outbreak. In Canada, according to the National Defense Department, there are 48 recognized religious practices that we are currently aware of. This report will briefly outline what is required by each religious practice during the time of imminent death and/or at the time of death.

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### **Anglican Church of Canada**

A chaplain or local priest may be called in to see the patient and prayers may be said at his/her bedside. The family or the patient may request to receive the anointing of the sick which involves anointing with holy oil. Last rites are given and after death, prayers are said. Funeral services are normally conducted in the Church.

### **Baha'i Faith**

There is a strong belief in the afterlife and therefore the body should be treated with great respect. Last rites are preformed. After death, burials should take place within an hour's distance of the place of death and cremations are NOT permitted.

### **Baptist Church**

There are no specific rituals that are performed. Funeral and burial practices are in common with the Protestant Christian Churches.

### **Brethren in Christ Church**

There are no specific rituals that are performed. Funeral services are held in a Church and ministers lead prayers at the burial services.

### **Buddhism**

When a death becomes evident, an ordained monk or nun must be notified so that the appropriate rituals may take place upon the death. Since Buddhist's believe in reincarnation, prayers for the next life of the deceased are done. Nurses and family members should not touch the body for three to eight hours after breathing has ceased and then the body should be treated gently and respectfully. Cremation is preferred and the Buddhist Temples may keep the ashes for a period of time after the death.

### **Christian Church (Disciples of Christ)**

Standard Christian practices are done for funerals and burials.

### **Christian and Missionary Alliance**

Standard Christian practices are done for funerals and burials. Funerals however, are conducted by Pastors.

### **Christian Reformed Church**

Standard Christian practices are done for funerals and burials. Funerals however, are conducted by Ministers.

### **Church of Jesus Christ of Latter-day Saints**

Mormons follow standard Christian practices for funerals and burials. Funerals are held in Chapels and directed by Bishops.

### **Church of Nazarene**

Standard Christian practices are done for funerals and burials.

### **Doukhobors**

There is no church service however; family, friends and community members are traditionally sought as spiritual comfort to the dying and the bereaved. Prayers and hymns are done at the time of burial.

### **Eastern Orthodox Churches**

Orthodox Christians have a strong belief that the body is sacred because it was the Temple of the Holy Spirit and will be restored at resurrection. The Orthodox funeral consists of three services:

1. The vigil, or Trisagion after death, is conducted by a priest at the wake. People gather to pray.
2. The funeral service continues at the Church where the body is brought on the day of the burial. Divine liturgy (Mass) is celebrated and after the service, the congregation offers its farewell to the deceased.
3. The Trisagion is repeated at the graveside. Memorial services may be held on the 3<sup>rd</sup>, 9<sup>th</sup>, and 40<sup>th</sup> day after death.

### **Evangelical Free Church**

Standard Christian practices are done for funerals and burials. Funeral services are conducted by a Minister with prayers, Scripture readings and hymns being sung. Ministers also preside over burial services.

### **Evangelical Missionary Church of Canada**

Prayers should be said for the sick by not necessarily at the bedside. Standard Christian practices are done for funerals and burials. Funeral services are conducted by a Minister with prayers, Scripture readings and hymns being sung. Ministers also preside over burial services.

### **Free Methodist Church**

Standard Christian practices are done for funerals and burials. Funeral services are conducted by a Minister with prayers, Scripture readings and hymns being sung. Ministers also preside over burial services.

### **Greek Orthodox**

Prior to death, Holy Communion or Eunction are administered. There are no last rites. The body is washed in oil and wine then dressed in a burial shroud. The service after death is very short (about 10 minutes). There is NO cremation as their belief is that the body is sacred.

**Hinduism**

Autopsies are avoided whenever possible to allow cremation to immediately take place. Hindus prefer to die at home, with preferences to being on the lowest level of the home to be as close to the Earth as possible. Personal things (i.e. wedding bands) should stay on the body until just before death and then removed. The family washes the body and arranges for immediate cremation. Embalming is strictly forbidden. Makeup on the body is also forbidden. Cremations usually occur on the day of the death and ashes are scattered on water. Burial is only preferred for children under two years of age. Men dress in white and allow their hair and beards to grow for 2 weeks. Vegetarian food is preferred during mourning. The Sraddha ceremony to honour the deceased is held between the 11<sup>th</sup> and 31<sup>st</sup> day after death. Predecessors are honoured in the ceremony.

**Hutterian Brotherhood**

Since Hutterites normally live within a communal type colony, they usually die within the colony. Funeral services are conducted by the colonies and usually members from other colonies will attend. Burial is done in a colonial cemetery.

**Islam**

If death is near, the patient recited the Islamic creed and other Muslims may read passages from the Qur'an. If the patient is female, unless it is an emergency, only females may attend to her. In an emergency, preference is given to a female Muslim Doctor first, then a female non-Muslim Doctor, than a male Muslim Doctor and lastly, a male non-Muslim Doctor. In a hospital, women should be given a hospital gown that covers their legs and long sleeves. Rooms can only be shared woman to woman in a hospital. When deceased, the eyes and mouth should be closed by running a bandage from under the chin and tying it to the forehead. Appendages should be straightened. The body is washed and shrouded in a white cloth. Women wash women and men wash men although a husband or wife may wash their spouse's body. Funerals are held at the Mosque with prayers for the deceased. An Iman presides. Burial takes place as soon as possible with the body on the right side facing Mecca. Participants fill the grave with soil, sprinkling water on top. Cremations are NOT permitted.

**Jehovah's Witness**

Although an Elder visiting a dying patient is appreciated, it is not a requirement. Last rites are not done as it would be inappropriate. Burial is the family's decision.

**Judaism**

If death is expected or imminent, the patient should not be left alone. A Rabbi must be called in to visit and for prayers. Burials should take place within 24 hours of the death or as soon as the family can gather. The body may not be left unattended until it is buried. The person must not be touched when the lungs are filling (as the person is dying). After death, the body is washed and dried and a belt is tied around the waist. Jew's are opposed to autopsies in most situations,

however if the Coroner orders an autopsy, the Rabbi should be consulted. Organs may NOT be removed from the body. During bereavement, seven days of mourning (Shiva) are observed by the immediate family. Visitors come during this time with gifts of food. One year of mourning and 30 days of social withdrawal follow Shiva. Remembrance services are held with the tombstone is unveiled. Cremations are NOT permitted.

### **Lutheran Church**

During illness, Holy Communion may be provided by an ordained person or a designate lay member. Pastors conduct funeral and burial rites. Although the Church does allow for variance of burial/cremation ceremonies (i.e. Military, Fraternity Tributes, etc.), they are NOT permitted into the liturgy. These rites should be kept separate from the services of the Church. The casket is always closed for the liturgy regardless of where it is celebrated. Cremated ashes are treated in the same way.

### **Mennonite Church**

Mennonite's are Christians and therefore usually follow Christian beliefs in memorial services in Church and during graveside services. Services are led by Pastors who may visit the patient and family prior to death.

### **Native Spirituality**

At times of sickness, rattles are shaken to call on the sprit of life to help in the healing of the patient. The patient may also burn tobacco, sweetgrass or other sacred herbs to assist in the healing. Funeral and mourning practices vary greatly among the different First Nations and individual families. The majority of Fist Nations people, who are Christian, usually prefer the funeral and burial practices of their Church. The First Nations people who follow native spiritual traditions are listed below with reference to their tribal name:

#### **Section .01 A. Algonquian People**

Interment takes place four days after death. After interment, a spirit house is built and a spirit plate is offered to the house to feed the spirit which may remain after death. Personal possessions of the person are buried with the body. These include medicine bundle, a bowl and spoon with some corn, and a pipe and tobacco if the person had one. Family and community members keep a fire burning on the grave mound for four days after the burial. Mourning is for one year.

#### **Section .02 B. Iroquoian People**

The Iroquois Confederacy includes the Mohawk, Onondaga, Seneca, Oneida and the Cayuga First Nations. The Great Law of Peace provides the guidelines for deaths and burials. Words given to use at the funeral (words said to the soul of the body) while attendees are told to mourn. One year is suggested for mourning; however 10 days is an acceptable length of time for adhering to strict mourning practices. A child under the age of three is only mourned for five days. After 10 days, mourners gather for a feast and thanked for their duties during the funeral and mourning period.

**Section .03 C. People of the Interior Plateau**

Upon death, a sacred fire is lit. The person's clothing is burned and all their possessions are given away. A wake is held for three days and three nights. Children are buried on the fourth day in the morning while adults are buried in the afternoon. Families grieve for one year and may cut their hair. After the grieving period has ended, a feast takes place to mark its end.

**Section .04 D. Costal People**

Although Christian burial practices are followed, traditional hymns may be sung at the funeral services. Rattles may also be shaken and family members may cut their hair. After one year of mourning, a feast takes place with a spirit plate of food set out for the deceased.

**Section .05 E. Inuit**

The Inuit generally follow the standard Christian practices.

**Pentecostal Assemblies**

Standard Christian practices are done for funerals and burials. Funeral services are conducted by a Clergy. Clergy also preside over burial services. No objection to cremation.

**Presbyterian Church in Canada**

There are no specific practices or rites though Church memorial services and burials are often accompanied by prayer. Funeral services may be held in a Church or Funeral Home. Standard Christian practices are done for funerals and burials. No objection to Cremation.

**Rastafarianism**

Visiting the sick is very important to the Rastafarian and visits are often made in groups. Family members may pray at the patients' bedside. Although there are no specific rites or rituals before and/or after death, routine last rites are appropriate. Burial is preferred although Rastafarians do not usually attend funerals. Rastafarians believe that the body is the home of the spirit and when the spirit has departed, the body serves no other purposes. Autopsies will only be agreed to if ordered by the Coroner.

**Religious Society of Friends (Quakers)**

No specific rites or rituals. Burial is according to the common standards of contemporary society.

**Roman Catholic Church**

The Roman Catholic funeral is a liturgical celebration. Last rites are given and attention and care are adhered to with the dying person so that their last moments can be with dignity and peace. The Church's Order of Christina Funerals offers three liturgies: one of the home, one for the Church (usually called Mass), and one for the cemetery. Burial should occur in consecrated ground of a Roman Catholic Cemetery whenever possible. No theological or doctrinal

objections to cremation provided the cremation is not intended as a denial of faith in the resurrection of the body.

### **Salvation Army**

Funeral services and burials are conducted by Ministers (Officers). Practices are generally the same as what is practiced in the Christian custom.

### **Seventh-day Adventist Church**

No specific rites or rituals for funerals and burials are outlined by the Church.

### **Sikhism**

It is a cultural and religious practice for Sikhs to visit the sick and dying. Family and friends attend the deathbed to pray and to consol. Mourning is discouraged. Unless legally required, autopsies are avoided. The remains of the deceased may be taken to the family home or to the funeral home for a wake before cremation. The body is washed and dressed in clean clothing and other dress requirements know as the five K's (kesa or kesh – hair, kangha – comb, kacch – undergarment work by solders, kirpan – saber or small dagger/knife, kara – steel bracelet worn on right arm) by the family or by friends. After the wake, the remains are taken for cremation with family and friends in attendance. Prayers would precede the funeral. Ashes are disposed of by immersion in a body of water. If cremation is not possible, the body should be buried at sea or in another body of water. After cremation, the family and friends gather for a Bhog ceremony, usually in a Temple, for prayer, hymn singing, and ceremonial serving of karah Prasad. The ceremony includes a complete reading of the Scriptures by the family in either the Temple or their home which can take up to 10 days.

### **Ukrainian Catholic Church**

The Ukrainian Catholic funeral is a liturgical celebration and identical to the Roman Catholic funeral. Last rites are given and attention and care are adhered to with the dying person so that their last moments can be with dignity and peace. The Church's Order of Christian Funerals offers three liturgies: one for the home, one for the Church (usually called Mass), and one of the cemetery. Burial should occur in consecrated ground of the Roman Catholic Cemetery wherever possible. No theological or doctrinal objections to cremation provided the cremation is not intended as a denial of faith in the resurrection of the body.

### **Unitarian Universalist Church**

Death and funeral rites are decided on by the individual. Cremations and burial are both acceptable.

### **United Church of Canada**

There are no specific rites or rituals though memorial services in Church and burials led by Ministers are usually accompanied by prayer. The Church has no position on cremation.

### **Wesleyan Church**

Standard Christian practices are done for funerals and burials. Funeral services in Church use prayer, scriptural readings, hymns and a sermon. Ministers officiate at burial services.

### **Wicca**

Wiccans generally follow the customs of the local society. No specific rites or rituals.

### **Worldwide Church of God**

No specific rites or rituals in death, in dying and in mode of burial. Funerals may include services in Church and at the burial site.

### **Zoroastrianism**

When a Zoroastrian is near death, a Priest is requested to be in attendance to administer holy water for the patient to drink and for prayers. After death, the body is washed and dressed in clean white clothes. The body may be placed on the floor on a clean white sheet while Priests and family members say prayers. Because of their belief that the body is impure after this (because of decomposition), the body is not touched again by the family. It is given to the Funeral Director (or Undertaker) for cremation.

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