

Death and Bereavement in British South Asian

Communities

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Death is a most traumatic life-cycle event for a family and social group, and draws the members together, bringing into high relief their social, cultural and religious norms and values. It touches on familial and social roles, and inevitably, gender issues, such as who the heirs are and who has to perform or facilitate the death rituals. Beliefs about life after death and the rituals associated with them help to make sense of the death of a person. In the diaspora the practices may be thrown into confusion by new circumstances, raising questions about individual and group identity, religious beliefs, and the function and purpose of ritual. This paper explores some of the issues Hindus, Sikhs, Muslims and Zoroastrians (Parsis)¹ from the subcontinent face when a member of the community dies, especially in a British hospital, the processes of ritual and cultural adaptation which are occurring, and the ways in which continuity of belief and practice is being maintained.²

The communities under discussion are very different, with a wide range of languages, social classes, regional variations and educational backgrounds. While, in such a short paper, some generalisations are inevitable, it is important to recognise that there are also major differences within each community, depending on country and region of origin, language, and possible caste and sectarian affiliations. Thus Gujarati Patels belonging to, e.g. Swaminarayan will follow very different practices to Panjabi Brahmins whom may be influenced by Arya Samaj, and Sylheti working class Muslims have different traditions to middle class Pakistanis. They have different migration histories, with, for example, many Parsis coming to Britain from the 19th Century onwards for educational and professional purposes, and more recently, large numbers of Gujaratis coming from East Africa, and many Sylheti Muslims coming directly from Bangladesh.³ There are, however, among South Asians on the subcontinent, some common presuppositions about the nature of family life and care of the dying. Within the extended family elderly people are cared for at home, and this is where one should die when there is no hope of cure. In many hospitals provision is made for the family to stay with the patients, prepare the correct food, and undertake much of the physical and emotional care of the patients, and when they are about to die they are often sent home. With a higher mortality rate in the poorer communities, death is more common, and because people often die at home it is familiar, even to children, who are not excluded from the death bed (cf. Eisenbruch

1984:292).

In Britain most deaths occur in hospital,⁴ and S. Asians have to deal with medical personnel who may have little understanding of their traditions or religious and social needs and have a different set of assumptions about how to respond to death. Crowds of Asians around the bed of a dying person to say goodbye and perform religious rituals, and emotional responses to a death can be disruptive on busy wards. Yet failure to be with a dying person, both from the personal and religious perspectives, can be catastrophic for relatives, leading to long term guilt and anxiety; for Hindus the rituals (or the failure thereof) actually affect the progress of the soul. Following a death relatives have to face state bureaucracy over the registration of deaths, and the professionalization of disposal. Changes in the timing of funerals and problems of burial and cremation can lead to a feeling of loss of control. The brevity of the cremation service for Hindus and Sikhs is in danger of changing the focus of the funeral, from concern for the departing soul to the comfort of the mourners. Families are often fragmented, which affects the support system. Trained religious leaders may not be available, which is especially acute for Hindus who require specialised Brahmins for some of the post-mortem rites. Muslims often choose to return the body to the country of origin instead of burying as soon as possible, reflecting the sense of alienation felt by many Muslims in Britain. Delays in the timing of the funeral upsets the traditional mourning patterns, in which normally the rite of separation precedes the transitional period; in Britain the transitional or liminal period has to precede the rite of separation.

Where the local community is large enough and articulate enough to make its needs felt, there are often inventive compromises. Hindus, in particular, who have the most elaborate and lengthy rituals, have shown themselves to be pragmatic with respect to their rituals. Sikhs and Muslims, who have simpler rituals and are not dependent on qualified priests, seem able to maintain continuity of ritual more readily provided they can feel in control of how things are done and there are not untoward delays. Parsees have lived in a diaspora situation for over a thousand years in India where they could retain their traditional methods of disposal but in Britain they have had to compromise over this issue. In order to explore these issues, models of death will be discussed first as a point of comparison with regard to the British experience. These are ideal types of what is seen to occur on the subcontinent, reinforced by accounts of how friends and relatives died.

There is a concept, in each community, of how to prepare for death and a model of how to die, with the appropriate prayers and rituals. Hindus, Sikhs and Muslims stress the importance of dying with the mind fixed on God, and the need for the family to help facilitate this. After death the body is bathed and dressed according to the religious and/or caste tradition. The cremation, burial or exposure takes place the same day or, if the death is in the evening, the following day. Mourning⁵ and post-mortem rituals are then set in motion according to religious and social traditions in each group. These rituals give the mourners a sense of control over the uncontrollable, of satisfaction that they have done the best they could for the soul of the deceased. Such models seem to have disappeared in the British Protestant community, especially within the general hospitals, where people can still die alone. Even within the hospice movement and palliative care movements which are transforming the process of dying, the stress tends to be on spirituality rather than religion, which can be vague and woolly (Walter 1996; Firth 1996b).

For Hindus a good death (su-mrtyu) is at the right time, in old age, and in the right place, on the ground at home. It should be prepared for throughout life, and approached willingly and peacefully (iccha-mrtyu). All affairs should be set in order, daughters' or granddaughters' marriages arranged, conflicts settled, and gifts made of money and land (Parry 1982:82-83; Firth 1989, 1994). It is important to say goodbye to relatives and friends, and last words are treasured. A Brahmin priest may be called to facilitate an act of penance, sarva-prayascitta. A cow or calf which symbolically takes the dying person across the river of death, Vaitarani Nadi may be brought in.⁶ The thoughts at death determine where one goes afterwards (Bhagavad Gita 8.5), so to help the dying person think only of God hymns, may be sung; or 'Ram Ram' or the sacred syllable 'Om', or the Gayatri Mantra may be chanted, or readings from a favourite text. Just before death the person is laid on the floor, Mother Earth, with the head to the North, enabling the soul to leave more easily.⁷ At the last moment Ganges water and a tulasi (basil) leaf are placed in the mouth (Firth 1991:59; 1994:180). Signs of a good death are a 'shining forehead', a peaceful expression, with the eyes and mouth slightly open to indicating the soul has left from them. In holy individuals the soul leaves from the brahmarandra at the top of the head. The good death also depends on the subsequent rituals, from the immediate cremation to the twelve days of post-mortem rites. The activities of the mourners, especially the eldest son, for whom it is one of his most sacred duties (Firth

1991:66), are essential for seeing the soul on its way and forming a new body for its next life; fulfilling these gives great satisfaction.

Bad deaths (akal mrtyu) are uncontrolled deaths in the wrong place with no time to prepare, and fix the mind on God, signified by vomit, faeces, urine, and an unpleasant expression (Parry 1982:82ff.; Firth 1991:66). The soul fails to move on, and creates problems for the family. It can haunt them, cause bad luck, nightmares, illness and infertility. The worst death of all is suicide for selfish reasons. The body is buried, not cremated. A remedial ritual, narayana bali is necessary to set the soul at rest.

The concept of a good death is also implicit in Sikh teaching. It is a painless, fearless, peaceful death in old age.⁸ It is important to deal with unfinished business, and settle property and marriage arrangements. The mind should be in a meditative state or listening to the scriptures, the Guru Granth Sahib, reciting the evening prayer, Kirtan Sohila, or the Psalm of Peace, Sukhmani Sahib. As the person dies “Waheguru” (wonderful Lord), should be repeated peacefully. Amrit⁹ may be placed in the mouth and on the ears. If a granthi is present, prayers (Ardas), may be offered. Many Sikhs place the person on the ground (GGS8) despite the directive in the Rehat Maryada not to follow such a Hindu custom (Cole and Sambhi 1978:177). To die on a bed indicates family neglect, resulting in social stigma and inauspiciousness (Kalsi 1996:32). The funeral, with cremation, follows immediately. A premature or violent death, especially of a son, is a disaster. Suicide is sinful, but the person is given a proper funeral.

Muslims believe that it is important to prepare for and remain ready for death, so that a person can make up for deficiencies in prayer, worship and other religious responsibilities. While a good person is normally expected to have a comfortable and peaceful death, and a bad person a painful death, the time and manner of death is entirely in God's hands and no one can assess the character of an individual from the manner of death (Rahman 1989; Antes 1989). A dying person should deal with family affairs and make a will. Debts should be paid if possible, or arrangements made to pay them after death by the descendants and heirs under Islamic law. Death should, ideally, take place at home with the family. The dying person has to accept God's decree and rely on His wisdom, mercy and justice. He and his relatives should ask forgiveness from each other and from God. At the point of death the patient

should be propped up or turned onto the right side facing Makkah. He, or his relatives, should affirm the unity of God by saying Kalimat Ashshahadah “there is none worthy of worship except God”. The Qur'an, particularly Surah Ya Sin (Surah 36), should be read to help the person's mind to be fixed on God (Prickett 1980:92). Cleansing the body follows strict rules. After the funeral, burial in a shroud follows immediately.

Unlike the three above communities, Zoroastrians view death as a temporary triumph of evil rather than a gift from God, who is totally good and the giver of life (Mistree 1982:49-50).¹⁰ When death is imminent two or more priests are called to pray for the repentance of the person's sins, Patit, and the Ashem Vohu prayer should be recited by the dying person or a relative.¹¹ A few drops of pomegranate juice are placed in the mouth as a substitute for the sacred Haoma libation. As soon as death occurs it is important to ensure the soul shakes off the fetters of the body without falling into the hands of Ahriman, the evil spirit (Dhalla, 1938:409). Rituals from this point are designed to aid the soul on the one hand, and to ensure on the other that the body, now afflicted by evil and ritually contaminated, is disposed of in accordance with the laws of purity. Immediately after death a lamp is lit to give light to the soul. The body is ritually bathed (sachkar),¹² and dressed in an undervest, sudreh, around which is tied the sacred cord, kusti.¹³ Specialist corpse bearers, nasasalars, in paiwand (linked by a cloth, for additional protection against evil) take the body to a bangli, a special bungalow within the grounds of the Tower of Silence, dakhma. The body is placed on three stone slabs around which the nasasalars make a (sand) boundary with a nail to contain the corpse demons within its parameter (Modi 1979:56). A dog with ‘four eyes’¹⁴ is brought in at intervals (sagdid) to detect life, if any, in the corpse and protect the mourners, before the funeral, geh sarnu. Two priests in paiwand conduct the prayers. The male Zoroastrian members of the congregation pay respects to the memory of the person. Non Zoroastrians, who do not have the ritual protection of the sudreh and kusti, are not allowed to see the corpse for their own ritual safety. The body is then borne on an iron bier to the dakhma, or Tower of Silence, followed by a procession led by the priests. After a further farewell the dog is brought in to view the corpse again (sagdid), in order to contain the evil around the body. Following this the nasasalars carry the body onto the tower which has three concentric tiers for men, women and children, and exposed to the vultures, who dispose of it very quickly, leaving no polluting flesh.¹⁵ This method of disposal is considered to be ecologically sound and does not pollute the sacred elements of earth, water and fire. (Modi 1979:50ff.; Mistree

1982:55ff.; Bhedwar)

The lamp is kept burning, with prayers directed to the divine being Sraosh, who acts as a 'midwife to the soul' (Dhalla 1938:409) until the judgement given by the celestial court early on the fourth day when the soul crosses the allegorical bridge of the Separator, after which the soul enters heaven or hell depending on the balance of its thoughts, words and deeds. On the third day the uthumna ritual is held, followed by the cheharum, for the soul early on the morning of the fourth day before the soul receives its judgement. Some of the prayers can only be recited in fire temples.

Death in Britain

In Britain most deaths occur in hospital where there are often problems of suitable care, lack of understanding of the tradition of the patient and his/her family and inadequate communication. Elderly Hindus have been known to lie down on the floor, believing that death is imminent, and been placed back in bed by uncomprehending nursing staff. Some hospitals are now offering a compromise of a mattress on the floor. There is a low take-up of hospice places, possibly because they are not perceived to provide the appropriate care for Asians. They are seen as somewhere one goes to die, whereas hospital is where one goes to get better. Care in private nursing homes is patchy, and care of patients at home can also be problematical without sufficient adult carers. Medical staff often do not have any grasp of the profound long-term religious meaning and implications of the last rites and prayers, or of the social and psychological importance of the last farewells to the extended family, caste and friends.¹⁶ This is not just an issue for ethnic minorities, but the result of the medicalization and professionalization of death. Without this understanding it may be difficult to ensure the patient has the appropriate death rituals especially if the family do not know that death is imminent, with unfortunate consequences for both the dying individual, whose very soul may be at risk, and for the mourners

There may be language and communication difficulties with medical staff, and assumptions are sometimes made that the comprehension of patients is more limited than it actually is. A Punjabi man speaking excellent English was unable to speak clearly because of a stroke. His wife, an articulate graduate, had a marked accent. All the communication was done through a fifteen year old daughter on the assumption that the parents could not understand what was

going on. Requests for information were denied, requests for help when the husband deteriorated were treated lightly. When eventually the staff realized he had pneumonia, he was whisked off into intensive care and the mother was barred from seeing him. The two women were sent home with reassurances that he would recover, but he died in the night. The news was broken to the girl on the telephone at 4 am. They had great difficulty getting satisfactory explanations as to why the husband had died, and concluded that the staff were fundamentally racist: "They think we are stupid because we are black". In this situation the daughter was unusually mature and articulate, but often younger children have to interpret, especially if the women in the family do not speak English (Rack 1990:66,299; McNaught 1990:35). Next to pain Rees says, poor communication 'is the most important source of distress to the dying patient' (1990:306). Idiomatic English, or metaphors used to describe illnesses may be unfamiliar to the medical staff. (Krause 1989; Currer 1983)

Medical terminology may difficult. A Sikh doctor had difficulty explaining his sister that her five year old daughter, who had been hit by a car, was 'brain dead' because on the ventilator she seemed to be alive. Body language may be misleading, and women may be reluctant to talk to men. Some conservative Muslim men may be equally hesitant to talk to female staff.

Large numbers of visitors can create difficulties on hospital wards especially if they are wailing. On a maternity ward British nurses were upset by the noise made by Asian mothers following a still-birth or neonatal death. Asian nurses commented that once the wailing was over, the mothers seemed to come to terms with the loss better than English mothers, who tried to 'blame' all the time.

Hindu pandits rarely conduct an act of penance for a dying patient. The most important rituals are the giving of Ganges water and the tulasi leaf, reading the scriptures or chanting God's name. When a Gujarati Kumhar woman was dying the relatives wanted to give her Ganges water when the doctor switched off the life-support machine. The doctor flatly refused, on the grounds that the shock might kill her, "But she was dying anyway". As a consequence, they believe that her soul will be restless for seven generations.¹⁷ There was a lack of communication between the doctor and the relatives (who spoke English well); he clearly wanted to protect the patient without realising the water would not be forced down her throat. The couple describing the event believed that their infertility was caused by the

unsatisfied ghost of the aunt. For other faiths, too, to be deprived of their last rites causes great anguish to the families, as the final prayers and statements of faith are as important to the departing one as to the relatives, and they fail in their most profound duty, especially if the deceased is a parent.

After Death

After the death South Asians often feel they have lost control over the care and disposal of the body because of the legal and bureaucratic requirements to do with registering the death, burial or cremation. Post-mortems create delay, and are particularly difficult for Muslims, whose belief in the resurrection of the body makes the idea of being cut up abhorrent, and denies that death is God's will. As the body still has a level of consciousness it can feel pain and know that modesty has been violated. The absence of a body causes immense distress since there cannot be a funeral, although prayers will be said.

Many Asians feel that the professionalization of death is a denial of community responsibility, although undertakers are said to be more understanding than medical staff. A Sikh lecturer said,

Whoever heard of funeral directors in the Punjab? Here funerals are administered by third parties who take money for this purpose, whereas in the Punjab a funeral is very properly a community affair, where close relations and friends, when they had heard of a particular death, would inconspicuously go about the business of arranging for wood and other material with perfection. [Here] the body is put into a box with a name on it! (Firth 1993a).

When his two year old son died in England he was shocked at the way control was taken out of his hands by the funeral directors. The body was put into a coffin and then in a hearse, and he felt bereft at not carrying the body himself as he would have done in the Panjab.

Preparing the body

For most cultures the laying out of the body is an important part of the final care of the deceased person; this of course, was also common in Britain (Clarke 1993:4). In India Hindus and Sikhs bathe and dress the body immediately after death, prior to cremation the same day. Here there is often a wait of a week or more because of bureaucratic procedures, and pressure

on the crematorium. The bathing has to be done just before the cremation according to caste and family traditions, in order to purify the body as a sacrifice to fire, Agni (cf. Kalsi, 1996:34); to do so a week after death is very traumatic, especially if there has been a post-mortem.

Many Muslims do not want anyone of a different faith - or of the opposite sex - to touch a body; others accept this by medical staff if there is no one else to do it and if rubber gloves are worn. No non-Muslim can give the ritual bath. However, a Muslim nurse pointed to the dilemma faced by nursing staff who tried to be sensitive to what they perceived as Muslim requirements:

I went to see this young Muslim who had died vomiting a lot of stale blood and had been left with his face in it. You need to have common sense. Can you imagine coming in to see your father or husband like that and remembering it for the rest of your life? Generally people don't mind having the tubes removed and the body straightened, but the important thing is to communicate with the family so that you know beforehand what you can do.

Muslims take the body to the Mosque if there are suitable facilities, or to the local undertaker for the ritual bath. Until this is done those performing the ablutions are ritually impure and cannot say their prayers, so it should be done as soon as possible after asking permission of the heirs. In large mosques there are professional men and women who undertake the ritual bath, with the assistance of family members of the same sex as the deceased. The body is washed three times, first with soap, and finally with camphor or scented materials, starting with the parts of the body which are to be washed before prayer, carefully observing the modesty of the person at all times. It is then placed in a shroud, kafan, made of three pieces of white calico for men, and five pieces for women.

Because it is so difficult to follow the purity rules strictly after death, Parsis are pragmatic about accepting the changes necessary in Britain. They will try to negotiate with the authorities to avoid a post-mortem (Dala, personal communication). Non-Zoroastrians may have to touch the body, especially in hospital and at the undertakers. If the death occurs at home the family may bathe and dress the body, but usually this is left to the undertakers. Two members of the community in paiwand may then go and help the undertaker prepare the body

for the funeral. It has been known for a dog to be taken into the mortuary for sagdid, but this is rare.

Funerals in Britain

There are often long delays at crematoria for a week or more. In the Subcontinent disposal is usually the same day as the death. Hindus and Sikhs carry the body on a stretcher to the cremation ground, where it is burned on an open pyre. The Hindu chief mourner circumambulates the pyre with water and then with fire, which is used to light the pyre. He may also break the skull to release the soul or to enable it to realize it is dead¹⁸ In Britain the cremation usually takes place much later which truncates the funeral and forces a change of timing and structure, with implications for the soul. Because of the limited time in the crematorium, part of the service, which would normally take place at the pyre, takes place in adapted form in the home. The body is brought back from the undertakers. In India 6 balls of rice, wheat or barley, are offered to the deceased and to spirits which might be dangerous to the body or newly released soul, at various stages en route to the pyre.¹⁹ In Britain these are offered at the house, if at all. After negotiating with the pandit and under his guidance, the chief mourner (normally the eldest son), performs the rituals according to caste and family traditions. Herbs, sandalwood, ghi and flowers are placed on the body. Ganges water and tulasi are put in the mouth with a coin, symbolising payment of the ferryman crossing the river of death. Sometimes the chief mourner circumambulates the coffin with incense sticks as a substitute for the circumambulation of the pyre with fire. Mourners circumambulate the coffin to bid farewell before closing it and taking it to the crematorium. Friends, neighbours and community follow in buses, including Panjabi and increasingly, Gujarati, women. The cremation service is similar to the Western one, often including a homily by the pandit or community leader. There is little time for the Sanskrit rituals, and the emphasis is changing from concern about the fate of the soul to the comfort of mourners, reflected in the service produced by the National Council for Hindu Temples. The sons or male relatives then go down into the crematorium and press the button, or push the coffin in²⁰, instead of lighting the pyre. Mourners and friends then return to the deceased's home, sprinkle themselves with water from a bowl outside, and sit quietly with the family. Arya Samajis return to the house for a havan, the sacred fire ceremony, followed by the giving of a pagri, turban, to the eldest son to signify that he is now head of the household.

It is customary, in India, to collect the ashes on the third day and take them to the Ganges (Firth 1994:254ff.; Garuda Purana II.5.15). British Hindus take them to Hardwar, but if they cannot afford this they can be posted. Others place the ashes in the sea or a local river in Britain, although this can cause problems with the National Rivers Authority (Firth 1991:78; 1984:264ff., Poulter 1989: 82-85; 1990:124 ff.). A Swaminarayan family asked Lord Montagu of Beaulieu if they could use a beach on his river bank He agreed, and Pramukh Swami²¹ blessed the spot where they then deposited their father's ashes. In a sense this is now a sacred part of India, and the river is symbolically the Ganges.

Sikhs follow a similar pattern to Hindus, although content of the ritual is different and much simpler. In Britain, the body is usually brought back to the house for a last viewing, and the granthi may attend and say prayers. The family, female friends and neighbours circumambulate the coffin which is then taken to the Gurdwara where the granthi, the trained functionary, says prayers, and the family, male friends and neighbours pass around the coffin. At the crematorium there is a short service and a homily. The evening hymn, Kirtan Sohila may be sung before the final ardas, prayer. The mourners return to the Gurdwara for a service with a eulogy and prayers, and then return to the family home for a meal. Following the funeral of a really old person there will be a feast in celebration of a good life.

Hindu and Sikh infants have a simplified ceremony. Children are normally buried under the age of three or four, as they have unformed personalities and are too pure to require the ritual purification of fire, but some Sikh communities in Britain insist on cremation with a simple ritual and no meal afterwards.. Hindu infants do not have a normal funeral, and may be buried with little ceremony in a special corner of the cemetery. A pandit may say prayers.

Muslims carry the body in a coffin on the shoulders of male relatives or friends, either to the mosque or directly to the cemetery, where the funeral prayer (salat-ul-janazah) is said. Women are not allowed to go in the South Asian communities. In the mosque it is placed in front of the Imam who faces Makkah. Prayers are said without the usual bowing and prostration (Prickett,1980:95). The body should be buried in a deep grave facing Makkah. At the graveside the Imam or a leader recites verses from the Qur'an including Surah 20:55: ﴿From the (earth) did We create you, and into it shall We return you, and from it shall We bring you out once again.﴾ Leaning over the dead person he addresses him by name and

reminds him of the fundamental beliefs of Islam.

Burial should take place immediately, but there are often delays of several days before the grave can be dug because of privatisation and local bureaucracy.²² There may be problems over finding space that allows the grave to be dug so that the body faces the Qibblah at Makkah. The biggest problem is registering the death at a weekend or over Bank Holidays, and some local authorities have arranged for duty registrars who would be available for Muslims during holidays.

Although there are no religious objections to the use of coffins for Muslims, many dislike them intensely and bodies are sometimes surreptitiously removed for burial. As one Muslim woman said, “We are told 'Ashes to ashes and dust to dust', but how can this happen when we have to use a coffin?” It is felt that the body should lie on the ground but have some sort of roof over it, often provided by digging a niche into the side of the grave, which also enables the body to be placed on its right side facing the Qibblah. Some cities such as Bradford allow burial without coffins. Leicester’s creative solution, in consultation with local Muslims who had many different ideas on the matter, is to suggest the body is carried to the grave in a coffin. The body is then laid in the grave facing Makkah, and covered with the upside down coffin. In Portsmouth where coffins have to be used, the lid may be removed at the graveside, soil packed under the head and the body placed in the right position before closing the coffin and the burial.

According to the Hadith, burial should take place where the person died, so the custom of sending the body back to the country of origin is a matter of recent tradition rather than religious obligation. It is done partly to enable the deceased to go back to his or her roots, and partly to ensure the burial is done properly. It is also important to know that relatives will be able to visit the grave regularly. It may also reflect a feeling that the deceased and his relatives did not really feel at home in this country.

Zoroastrians have a particular problem of disposal because it is has so far been impossible to provide a Tower of Silence in this country. Neither burial nor cremation is a wholly satisfactory substitute. According to Mistree burial is doctrinal preferable, but Bhedwar and the High Priest, Feroze Kotwall, take the view that cremation is preferable for the soul as the

body is destroyed quickly.(Mistree and Bhedwar, personal communication). A burial area at the Brookwood cemetery was bought in 1862, and a chapel built there in 1901, with an iron stand for the coffin. (Hinnells, 1996:134ff.). The 40 mile journey from London is sometimes a handicap, but there is much more time to conduct a full funeral ritual in the presence of other Zoroastrians, whereas at local crematoria time and space are limited. If there is a cremation the first forty minutes of the funeral prayers are said at the undertakers' chapel, or at the family home, and the remaining fifteen minutes at the crematorium. The relatives and friends greet the bereaved family and then return to their own homes for a bath to remove ritual contamination.

Mourning

The mourning rituals provide a conceptual framework for expressing grief, but also provide both the bereaved and the kinship network with an opportunity to review the life of the person who died, as well as to set the lot in a wider framework of meaning relating it to the 'Ultimate purpose of life'. (Ballard, personal communication). On the Indian subcontinent mourning procedures begin immediately after the funeral, but with the delay in Britain, have to be set in motion before it. Since one of the functions of mourning is to adjust to the absence of the deceased person, a delay in disposing of the body upsets the customary pattern of events. To use Van Gennep's terminology (1960:11), the period of transition now precedes the rites of separation and no longer follows them. For example, according the Hadith, Muslims should not mourn after the third day, but this assumes the burial is done immediately after the death. Zoroastrian rituals assume that the soul remains within the precincts of this world for three days, moving on to the other world on the dawn of the fourth day, but these also assume that the body has been disposed of mourning.

In India, for the first ten days of the Hindu period of mourning (beginning after an immediate cremation) rituals create a new ethereal body for the newly departed soul, before the twelfth day sapindikarana enables it to take on a new body and join the ancestors.²³ Thus a delay, for Hindus not only upsets the traditional mourning patterns, but also has implications for the proper progress of the disembodied soul. Normal reactions to loss may be complicated by anxiety about the ghost of the deceased disturbing the family, bad luck, and guilt at the failure to do one's duty. Many of my informants felt long term guilt, anxiety, remorse and anger at their own failure and the failure of the hospital to allow them to be present or

perform the final rites, reflecting both their psychological and religious dimensions.

In principle, all four religions discourage too much weeping. Hindus and Zoroastrians say weeping creates a river which the soul has to cross. Sikh Gurus discouraged too much grief, because the deceased has gone to God. The Hadith says that weeping is permitted for three days but not beyond that, and wailing is forbidden. It is still common, however, and one young woman who was reminded that it was forbidden pointed out that if she did not wail the rest of the community would criticise her for not having enough feeling. The expression of grief is often less inhibited than among native Britons, particularly in the less well educated communities.²⁴ This can cause problems in hospitals, especially in large wards. Both undertakers and the crematorium officials have complained about violent expressions of grief at some Bhattra Sikh funerals in Southampton - a hearse received several hundreds of pounds worth of damages when distraught men jumped on it, and complaints have been made about noise at the crematorium by mourners in the adjacent chapel.²⁵ The brevity of the service has also been problematical for the authorities as well as the mourners, since the latter may not wish to leave until they see the smoke emerging from the chimney, causing chaos for incoming funerals. Yet Eisenbruch, as a psychiatrist, believes that it is harmful to proper grieving if communities are deprived of sufficient time to pour out their grief. (1981 II:336)

It is obligatory among Asians to pay their respects and express their regrets, talking about the deceased and reminding the mourners of their religious teaching. The Hindu period of mourning lasts between 10 and 30 days. The family are regarded as extremely impure, and no other Hindu will receive food or drink from them; relatives and caste peers provide simple food. Furniture is removed from the living room, white sheets spread on the floor, and friends and neighbours condole and listen to the readings from the Bhagavad Gita, the Garuda Purana or other books, and sing hymns. The family live austerely; the men do not shave and may sleep on the floor. There is no radio or television. The twelfth day rituals are considered by many Hindus to be the most important. If a Brahmin priest is not available the ritual may be performed in India on behalf of the family by a surrogate male relative or done by the chief mourner in India at Hardwar when he takes the ashes. Gifts of money, food and clothing, which the deceased would normally need are given to the Brahmin priests; many British Hindus prefer to give to charity, partly because of cynicism about Brahmins, and partly because their roles are changing in Britain.

There are further rituals at one, three, six months and a year. Widows used to be in mourning for at least a year, but here it is reduced to three, after which they can go out, and gradually resume normal life. Offerings are made to the deceased relatives, on the lunar anniversary of the death and to all the ancestors during a period in the autumn called pitr-paksa, maintaining a continuous link between the living and the dead. Gifts are made to Brahmins and to charity. In Britain there may be a ritual at the temple on the anniversary according to the Western calendar; many other Hindus only make this offering at the pitr-paksa.

Sikhs follow a similar pattern in the home, without the severe restrictions of Hindus. The holy book, the Guru Granth Sahib is read, either continuously for three days (akhand path) or over eight to ten days (sadharan path). This normally begins after the funeral, but if there is a long delay it may be started sooner. At the conclusion of the reading and prayers, if the deceased was head of the household, there is a pagri ceremony, followed by a feast in celebration of a long life if the deceased was elderly (Kalsi 1996:35). Sikhs do not believe that actions performed on behalf of the dead will reach them (Cole and Sambhi 1978:12). Nevertheless granthis may be given gifts after the funeral, and annually on the anniversary of the death.

Islamic law requires friends and relatives to feed mourners for three days. The only greeting given at this time is "From God we come, to God we return". After this the family should return to normal, and no-one should talk about death or the deceased, unless the family is grieving too much, or brings the subject up. Unofficial mourning often continues until the fortieth day with Qur'anic readings. Shi'ites give homilies on the meaning of death with examples from the deaths of the martyrs. At the end of this period the family may call their relatives and friends and have further readings and a meal to signal the end of mourning. At the end of Ramadan, during the festival of Id graves are visited.

For Parsis, all the rituals following the funeral for the first four days after death are performed in order to give comfort and blessings to the soul in its new environment. On the afternoon of the third day is the uthumna ceremony. The final prayers, charam, on the early morning of the fourth day, are to aid the soul facing judgement. These rituals have to take place whether or not the body has been disposed of; if it has not some prayers, known as

Sroash karda, cannot take place in the same town, which is difficult for some Parsis. They can, however, be done in a fire temple in India, which has the advantage of maintaining historical and family continuity. The family abstains from meat for three days after death, but a meal of dhansak, with meat, is eaten on the fourth day, and a Parsi community meal may be organised, at which the family may announce charitable bequests in the name of the deceased. On the tenth day (dehom) additional prayers are recited, and after 30 days (salroj) and on the 31st the cycle of prayers is repeated. Thereafter there is an annual remembrance (varsi).

Conclusion

Living in the diaspora, as we have seen, causes many disruptions in the way in which South Asians deal with death and bereavement, with respect to hospital care, bureaucratic rules over the registration of death, the professionalisation of death care, changes in cremation procedures, and for Muslims, local restrictions over burial. The major areas of concern are being with the dying person to the end, being able to perform the appropriate death-bed rituals, preparation and disposal of the body quickly according to particular traditions, immediate burial or cremation, and the time and freedom to conduct rituals and mourn in the appropriate way.

Hindus, Sikhs and Parsis are, on the whole, pragmatic about the necessary alterations to funeral arrangements. Hindus, however, with their very complex rituals, have to make many adjustments, particularly if ritual specialists are not readily available. Those conducting the rituals are inventive, and because so much of the short funeral occurs at home the family are involved. Some Hindu organisations are devising funeral services,²⁶ rejected by many pandits as more for the mourners than the welfare of the soul. These may have long term effects on beliefs about the departure of the soul, particularly if the umbilical to India becomes looser in the younger generation.²⁷ For Parsis the changes to their disposal traditions would be less difficult if time was not an issue.

Asian migrants have already experienced earlier losses, of country and wider family networks. Some have migrated twice or three times, losing all possessions and family members. Uprooting affects whole communities, not just individuals, who may try to compensate by clinging to the past, while others try to adapt and 'modernise', as Jonker

comments with respect to Muslim communities in Berlin (1996). Eisenbruch observes that both extremes, of resistance to change and the desire to adopt the customs and behaviour of the host community can prevent adequate mourning at the time of death (1984 II:299). One Sikh family was thrown into chaos when an educated, anglicised daughter insisted on 'English' mourning customs following the suicide of her mentally ill sister. Her widowed mother was not allowed to place sheets on the floor or accept community help because the girl, who had an English boyfriend, felt that they should continue with the cooking, have flowers and cards in the house. The mother was unable to mourn as she wanted to, but also felt humiliated in the eyes of the Sikh community who were critical of the daughter's behaviour.

It is often particularly difficult when a parent dies, since the parent is part of the person's history and forms his or her sense of identity and continuity (Kakar 1978:36; Eisenbruch 1984:II.325). In the Asian community the authority structure within the family may make this particularly disorientating if the individual is not in a joint family with other senior relatives. The depth of grief and sense of disruption and dislocation felt by Asians at the death of a parent may not be appreciated by white British professionals or colleagues who do not live with their parents, or have such hierarchical and dependent relationships with them.²⁸

A further difficulty for South Asians is that they are not allowed time off work for mourning. Very often three days is allowed for an immediate relative, which for Hindus and Sikhs especially, is quite inadequate, and not even that is permitted for an uncle or a 'cousin-sister' or '-brother'. This means that often people claim sick leave or take time from their annual leave. It also creates problems for employers if employees happen to have a run of bad luck with a number of bereavements.

Several young Hindus have commented that without proper explanation the rituals seemed boring and meaningless, and were critical of expectations to show grief for distant relatives. Yet they appreciate the way death draws families together, and many young people who were questioning their religious identity have found new significance and meaning in their religious and cultural tradition at the time of death. Ballard points out that the death and mourning rituals are highly sophisticated, providing a means of sharing and dissipating grief within the entire community, 'in contrast to a contemporary English tendency to shove the

unpleasant fact of death under the carpet’ (personal communication). Compromise and adaptation, often involving considerable ingenuity, enable South Asians to find ways of dealing with death, and to renew ties and reassert religious traditions as far as possible. In those areas and institutions where medical and local authorities are sympathetic to their Asian patients and clients, make an effort to understand them and also compromise, there are some creative solutions to their requirements. At their best they are valuable models of how religious, social and cultural traditions can provide a coherent framework for coping with death and bereavement at a time when Western models are often perceived to be inadequate. Recognising the importance and value of traditional customs, as far as possible, contributes to the mental health, equilibrium and social well-being of the individuals and communities.

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References

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1. The term ‘Parsi’ was given to the Zoroastrian community which arrived in Gujarat from Persia, in the 10th Century (Mistree, 1982:104).
 2. The paper is based on twelve years of fieldwork among British Hindus, three years with Sikhs, and discussions and a more limited range of interviews with Muslims and Parsis Firth, 1989, 1991, 1993a, 1993b, 1993b, 1994, 1996
 - 3.. It is not the purpose of this paper to discuss these differences, but at the risk of some generalisation, to explore the questions arising from the interaction of these communities with the ‘host community’ at the time of death and bereavement. See Burghart 1987; Clarke, Peach and Vertovec 1990, Nye 1992, Ballard 1994; Barot 1995, Eade, 1997; Hinnells, 1996.
 - 4.. According to the Office of Population Census and Surveys 1991, 54% of total deaths were in hospital, 23% in the home and 17% elsewhere. There was no ethnic breakdown in these tables.
 5. The term ‘mourning’ is used in a technical sense of the period of adjustment after a death - van Gennep’s ‘liminal’ or ‘transitional’ period (van Gennep 1960.11ff.). However, Bhedwar, Dalal, and

Mistree have all commented that the Parsis are not encouraged to mourn.

6. Firth 1994:154-4, 192; Garuda Purana II.5.15.

7. Firth 1991:59,63; 1994:173 ff.; 179; Garuda Purana II.2.7-8; Stevenson 1920:142; Kaushik 1976:270-271; Kalsi 1996:32.

8. AG 1244; 1254; 793; Cole and Sambhi 1978, p.121-2

9. Amrit: lit. nectar, Water in which sugar crystals have been dissolved in an iron bowl and stirred with: a two-edged sword, over which scriptural verses are said. It is an important part of initiation and regular communal prayer. Cole and Sambhi 1978: 121-2.

10. The process of death is understood by the Avesta as astascha baodascha viurvisyat, the separation of the body from the soul (Bhedwar, personal communication).

11. Cf. Mistree 1982:55; Modi 1979:52-3; Bhedwar, nd. 2.

12. If the person dies in hospital this is done in the bangli; if at home, it is bathed there

13. The sudreh, the sacred 'garment of the good mind', and sacred thread, kusti, are worn by initiated Zoroastrians at all times (Mistree 1982:70-71

14. Two of the eyes are physical, two spiritual, marked by spots above the eyes. The four-eyed dogs also appear in the Rig Veda funeral hymn X.10; cf. O'Flaherty, 1981:44,46 fn.

15. The vultures cannot fly with food in their mouths or claws. This form of disposal is regarded as an act of charity. Everyone, rich or poor, is disposed of exactly the same way. In the centre of the dakhma is a pit into which the bleached bones are swept after 30 days, and covered with natural lime, which turns them to dust. For details see Modi, 1979:50ff., Mistree, 1982:55 ff., Bhedwar, nd. 1ff.,

¹⁶ The IQRA report on 'National Health service Facilities for Muslim Patients', shows that many hospital guidelines on Islam assume it is primarily Asian, that needs are poorly directed and information inaccurate. The "check lists" on Asian cultures provided by many hospitals do not convey the vast diversity within the different ethnic minority

17. The only way to solve the problem is for the entire extended family get together for a very expensive ritual called a *saptah*

18 Parry, 1982:79-80; Evison 1989:20; 1994: 95ff; 212, 223 ff..

¹⁹ Kane 1953:219; Parry 1985:615ff; Firth 1991:66, 75.

²⁰ Laungani comments on the grotesqueness of seeing the body disappearing on a conveyer belt after the experience of the open pyre (1996:199). However, some of my informants in India felt that the experience at the pyre was so traumatic, especially if the head had to be broken, or the body moved in the heat, that they were glad of the introduction of the electric crematoria.

21. Pramukh Swami is head of the Akshar Purushotham Sanstha of the Swaminarayan sect. Williams 1984:25ff/. Barot 1987:66-80.

22. See the excellent report: "Local Authority Facilities for Muslim Burial", Research Report, IQRA Trust., nd.

23. Sapindikarana: a ritual in which a ball of rice, pinda, representing the deceased is cut and blended to join the balls of rice, representing his father, grandfather, and great grandfather Firth 1994:271ff.; Parry 1989:509; Knipe 1977.

24. Eisenbruch notes that Greek immigrants have to be seen to grieve, and the Spanish and Mexican Americans show extremes of emotion which may seem threatening to medical staff and undertakers. One mode of expression, *el ataque*, socially sanctioned among Puerto Ricans, “consists of seizure like patterns, with a hyperkinetic episode, a display of histrionics or aggression, and sometimes the climax of stupor”. Yet Anglo-American hospital staff may feel bewildered, threatened, hostile or derisive when faced by these behaviours, which are often treated by them as pathological.’ (1984. II:509.). These same men, however, would consider it unmasculine to share these feelings with a counsellor. It is worth quoting this in full, because British professionals also have difficulties with extreme displays of emotion .

25.. Sikhs from the Jat and Ramgharia communities say that it is ‘only the low caste Bhattra group who behave in this undisciplined way’ and I have never seen it at Jat and Ramgharia funerals I have attended..

26. National Council of Hindu Temples (UK) 1987, Hindu Funeral Rites, Leicester, Shree Sanatan Mandir, Weymouth Street..

27. Killingley, Menski and Firth 1991.

28. Eisenbruch II.1984: 325; Parkes 1986:107ff.