A replication of Dawson's study on differences in final arrangements for cremation using a rural population vs an urban population

Nadine C. Freshman
University of Nebraska at Omaha

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A REPLICATION OF DAWSON'S STUDY ON DIFFERENCES IN
FINAL ARRANGEMENTS FOR CREMATION USING A RURAL POPULATION
VS AN URBAN POPULATION

A Thesis
Presented to the
Department of Gerontology
and the
Faculty of the Graduate College
University of Nebraska
In Partial Fulfillment
of the Requirements for the Degree
Master of Arts in Social Gerontology
University of Nebraska at Omaha

by
Nadine C. Freshman
July 1996
A REPLICATION OF DAWSON'S STUDY ON DIFFERENCES IN
FINAL ARRANGEMENTS FOR CREMATION USING A RURAL POPULATION
VS AN URBAN POPULATION

THESIS ACCEPTANCE

Acceptance for the faculty of the Graduate College, University of Nebraska, in partial fulfillment of the requirements for the degree
Master of Arts in Social Gerontology, University of Nebraska at Omaha.

Committee

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<tr>
<td>Bryan J. Insights</td>
<td>Gerontology</td>
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<tr>
<td>Michael J. Hill</td>
<td>Communication</td>
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Chairman 7-15-96
Date
ABSTRACT

A REPLICATION OF DAWSON’S STUDY ON DIFFERENCES IN FINAL ARRANGEMENTS FOR CREMATION USING A RURAL POPULATION VS AN URBAN POPULATION

A study completed by Dawson, Santos, and Burdick in 1990 surveyed close survivors of deceased persons from six metropolitan areas of the United States to investigate the differences in final arrangements when burial or cremation was employed as the method of body disposition. The present study chose to replicate the cremation aspect of Dawson’s study in rural Nebraska. However, as work progressed, it became clear the small number of responses received would not be statistically significant. At this point, a qualitative aspect was introduced into the study. Nine case studies were obtained to provide a broader scope of understanding regarding the differences in final arrangements for cremation.

Several important differences were found with regard to cremation practices in a rural versus a metropolitan setting. These differences included where the services were held, the frequency of services even being held, use of flowers and monies for remembrance items, and the frequency of social gatherings after a service. As all of these areas ranked higher in the rural setting than the metropolitan setting, it is interesting to note the aspect of tradition still plays a large role primarily due to its familiarity to the
surviving family members.

In both the surveys and the case studies, it was overwhelmingly obvious the decision for cremation was the preference of the deceased. This study did not address specific personal beliefs that may have contributed to this decision. However, this study found the majority of the case studies had disease ravaged bodies which may have been a factor for cremation as these individuals may have not been comfortable with their body image. Again, the present study did not ask for cause of death in the quantitative aspect of this study which may have shed additional light on this area.

As traditions gradually fade with regard to ethnic and religious concerns, and as individuals wish to exert more control over our dying, death and final disposition, more people will opt for more non-traditional methods of body disposition, including cremation.
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Chapter I

The Problem

Introduction

Changes in our understanding of death and grief over the past decades have provided corresponding changes in funerals and the ritual response to death. Margaret Mead (as cited in Irion, 1990-1991) reflected when she wrote, "I know of no people for whom the fact of death is not critical, and who have no ritual by which to deal with it" (p. 159). Funeral ritual is a basic element of the human species and provides an important function whereby an individual does not have to invent completely new behaviors to deal with the death of a loved one.

Mankind, from the earliest of times, has practiced death rituals and ceremonies in great variety all with the ultimate purpose of body disposition. The reason for these rituals is not hard to understand. Such procedures are important to the healing process. The very meaning of life is derived from our association with one another. Hence the death of one individual is traumatic for the survivors. Morgan (1984) notes, "Recognizing that death rituals and ceremonies are important in meeting the social and emotional needs of the survivors, we should plan these ceremonies carefully" (p. 67).

Statement of the Problem

The two most common methods of body disposition today are earth burial and
cremation. The most common disposition method of the American colonists and their descendants was earth burial—the custom most prevalent in their homelands (Dawson, Santos, & Burdick, 1990). Today this trend continues with earth burial accounting for approximately 80% of all deaths (Szanton, 1992).

The modern cremation movement started in Europe where sanitarians were pushed to find an alternative to earth burial due to the overcrowded conditions of European graveyards. English surgeon Henry Thompson, distressed over the unhealthy air and water of English cities began promoting the concept of cremation. In 1874, he published “The Treatment of the Body After Death” to influence others that cremation offered a more sanitary way to dispose of a body (Sloane, 1991).

America’s first machine for cremation was built by Dr. F. Julius LeMoyne in 1876, just two years after Thompson’s article appeared in print. LeMoyne built the machine primarily for his own cremation, hoping that his cremation would demonstrate that the body was returned to its natural components, exactly as with earth burial. The chief difference between the two methods, he and other cremationists argued, was that decomposition was two hours in an incinerator and at least two years in a grave. Either way, the body decomposed into carbonic acid, ammonia, lime, phosphorous, iron and sulfur.

The first individual cremated by LeMoyne was Joseph Henry Louis (Sloane, 1991). The cremation was technically a success, but the lack of any Christian ceremony, coupled with a long speech on spiritualism, overshadowed the scientific dimension. The
absence of any religious rites or customs created a prejudice against the process and stifled the public’s use of cremation over earth burial.

As time passed and cremationists had greater opportunity to present their case, people began to feel less negatively about cremation, and the issue became less volatile. Cemetery managers began incorporating the practice into their operations, recognizing that cremation was an additional service to offer the customer and the person choosing cremation might be persuaded to purchase a lot or a niche in a columbarium. Cemeteries thus began to cooperate with the local cremation societies in building crematories.

By the early 1900s, the leaders of the cremation movement recognized the sanitary argument could not continue to be the primary motivating reason for people to choose cremation. Although they continued to suggest earth burial was unhealthy and cemeteries in densely populated areas were a mistake, they increasingly focused on the economic differences between the types of disposal. Knopf’s 1922 article in the *American Journal of Public Health* discussed not only sanitary advantages of cremation but also the economic ones. Knopf pleads, “One must have had the privilege of practicing among the poor to realize what an expensive funeral means to the families who have often sacrificed their savings for a tuberculous invalid who had lingered for a year or two. If there is any need to plead for a more simple and inexpensive disposition of the dead, it is certainly apropos in such cases” (p 398).

John Gebhart’s 1921 study (as cited in Sloane, 1991) of funeral costs and other analyses of the expensive nature of funerals, mourning rites and cemetery lots showed
some people, especially the poor, were being left destitute by the cost of burying their dead. Reformers considered cremation, which simplified disposal and left little need for cemetery lots or expensive stones, a possible answer to these expenses.

So where have the last 70 years brought earth burial and cremation? A current study by Dawson, et al, (1990) investigated the differences in final arrangements when burial or cremation was employed as the method of body disposition in six metropolitan areas of the United States. Their results were consistent with other researchers in that cremation as a method of body disposition is associated with higher levels of education, employment and incomes than is burial. Also in agreement is the finding that persons who are cremated are more likely to be Protestant than Catholic and tend to have been less active in their religious activities.

The Importance of the Problem

As the Dawson, et al, (1990) study surveyed a metropolitan population, they also recognized the need to view this problem in a rural population. Luckily, living in Nebraska affords the opportunity to view this problem in a more rural setting. It could be hypothesized a rural population would cremate their dead less often than the national average of 18% (Szanton, 1992). The reasoning for this stems from the thinking that rural areas do not have populations that are as highly educated, well paid, or employed as urban areas. Beyond the economics of the issue, it could also be argued that the significance attached to funeral rites with earth burial are stronger in rural communities, following the
example set by their ancestors, and their desire to follow tradition. As the average age of
rural communities tends to be older, this factor would likely be an additional plus for the
traditional funeral and earth burial. But, the dichotomy that exists here is quite puzzling.
If cremation is less expensive and rural populations have less educated individuals with
lower paying jobs, then why is cremation not used more frequently as a method of body
disposition?
Introduction

The early advocates of cremation were moved to their views by the thought process that cemeteries were a place of corruption and disease. Cremationists also criticized the cemetery as a waste of space, and even worse, the cemetery was a purely wasteful expenditure.

By 1900, the cemetery co-existed with a new set of professionals involved with the dying and the dead, the funeral director and hospital staffs. Death was likely to occur in a hospital now while a nurse stood by and the physician was not far away. The funeral director had become the overseer of the funeral process, informing the family of proper and necessary activities and mediating between the family, the hospital, and the cemetery.

Cremationists rejected such a view of funerals and the rituals attached thereto and wished to simplify the entire burial process. They also argued to limit burial costs, which they believed were based on vanity and guilt rather than on goodness and honor.

Today, there is little published work on attitudes regarding cremation and who chooses this method and why as opposed to earth burial. However, the literature that speaks to the issues at hand is reviewed.
A Review of Related Literature

One of the first articles published this century advocating cremation was written by S. Adolphus Knopf in 1907. He argued cremation provided a more reliable manner of destroying contagious pathogens, in particular, those of tuberculosis. In addition, he felt cremation of persons who died of tuberculosis and other infectious diseases would be an economically sound way to relieve the contagious disease issue among the poorer populations of New York City.

Knopf continued with his writing, and in 1922 sought to obtain the opinions of 50 other “distinguished sanitarians and clergymen” on the topic of cremation. He stated, “I feel that one man’s opinion does not count in such a tremendous question” (p. 299). He mailed a letter of ‘inquiry’ with four questions. They are as follows:

1) Do you believe that cremation must be considered a more sanitary and more economic disposition of our dead and better for the community at large than interment?

2) Do you believe in the possibility of infection arising from interred bodies when death was caused by a contagious disease?

3) Are you of the opinion that in many instances, particularly among the poorer classes, the ordinary funeral and burial is far too expensive?

4) In your opinion, would it be a wise policy to consecrate the many acres of land for burial of the dead to the living for habitation or recreation grounds? (pp 389-394).

He tallied his responses and found the majority of his correspondents believed in cremation on economic and general sanitary grounds, while concerning the other three
topics there was a diversity of opinion.

To a number of eminent clergymen of various denominations (total number not identified) Knopf (1922) asked the following question, "Is there any reason, scriptural or ethical, against cremation of our dead?" (p. 395).

The responses he obtained concluded the Catholic church at that time would not change its attitude which meant cremation was not an option. A Lutheran minister, Rev. J. B. Remensynder, personally favored cremation but saw the "crux of the difficulty" with Christians who believe in the bodily resurrection of Christ. Remensynder stated, (as cited in Knopf, 1922) "If it were not for its connection with this theses of resurrection, I should greatly prefer cremation" (p 395). Other religious denominations, Episcopal and Unitarian, were also in accord with cremation in Knopf’s survey.

In the conclusion of Knopf’s (1922) work, he reaffirms his own endorsement for cremation by stating, “When all was over (the cremation process) nothing remained but a few fragments of calcined bones and delicate white ashes and dust, perfectly pure and odorless” (p. 399).

Knopf’s survey was an attempt to validate his own attitudes regarding cremation with other professionals of his era. Although in principle the individuals surveyed were favorable to cremation for sanitary and economic reasons, there was, as still is now, a disparity of opinions regarding cremation. Interestingly, the surveyed individuals were well educated, which we know today is a determining factor in one's decision to choose cremation.
Moving to a more current time, Cottrell, Eddy, Alles and St. Pierre (1984) surveyed 184 undergraduate students to determine their attitudes and beliefs concerning body disposal and related concerns. Their results showed significant relationships in the primary reasons for choice of body disposal, religious affiliations, perceived reasonable costs, desire to utilize the services of a funeral director, and the choice of body disposal.

An 11-item questionnaire was developed to determine preferred methods of body disposal, reasons for selecting a mode of body disposal, beliefs concerning the funeral industry and funeral director and beliefs and opinions concerning the cost of body disposal. In addition, the questionnaire gathered demographic data (i.e. age, sex, academic background, religious affiliation, community size, etc.). The questionnaire was administered to students at the Pennsylvania State University.

From the available data, several independent variables were selected that the investigators believed had potential for explaining preference of body disposal.

The data clearly showed a significant difference with regard to the reasons for selecting traditional and non-traditional methods of body disposal. Those who preferred the traditional method did so because of reasons related to religion, family consideration or social acceptability. Those expressing a desire for non-traditional methods did so for the reasons of economic simplicity or altruistic concerns. These data support the notion that societal, religious and other factors influence the person's decision regarding body disposal preference.

A significant relationship was found between religious affiliation and choice of
body disposal. Catholics were more likely to state a preference for traditional methods of body disposal, while the Jewish and Protestant faiths were more likely to state a preference for non-traditional methods. These findings were consistent with religious views related to the traditional methods of body disposal alternatives. For example, many Jews advocate a simple funeral process. The most common alternative, cremation, is generally discouraged by Catholics, while it is acceptable or thought to be an individual decision by most Protestants.

The authors hypothesized exposure to a death education course would increase the likelihood of choosing a non-traditional method of body disposal, as compared to those with no such experience. They felt an informed individual would be more likely to assess alternative methods and make a decision consistent with personal beliefs instead of simply selecting the traditional funeral process because of its familiarity and social acceptance.

Interestingly, there was no significant difference between the two groups (death education course vs no death education course) with regard to their body disposal preferences. The authors state, “It is interesting to note that the majority of both groups stated a preference for non-traditional methods of body disposal. In addition, the percentage of subjects stating a preference for non-traditional means is much higher than what actually occurs among the American population” (p. 116). These findings may indicate a reversing trend among college age students.

In 1985, French published work that surveyed various groups of clergy and funeral directors in South Carolina to “determine the extent to which the clergy, as
representatives of the institutional church, support directions taken by the funeral industry” (p. 145). A total of 150 questionnaires were sent to funeral directors and to 50 United Methodist, 50 Roman Catholic and 50 Episcopalian ministers.

The responses obtained by French (1985) indicated that Catholic priests were similar to those of funeral directors in their endorsement of current funeral practices, with Methodists more critical and Episcopalians very strong in their support of alternative customs, such as memorial services or cremations.

Another interesting aspect of French’s (1985) study found that while only four of 17 black funeral directors responded, cost estimates were higher than those of white funeral homes, “... and the highest estimate for reasonable funeral homes costs, $2400, was from a black funeral home” (p. 146). Harrington (as cited in French, 1985) notes that simple funerals, let alone memorial services, are hardly known among the poorer segments of society. He speculates, “Dying is a moment of style and status, at least in the impoverished world of the racial ghetto” (p. 184).

Two additional aspects of the South Carolina survey are significant. Both funeral directors and Catholic priests were almost unanimous in stating it is very important for the body to be present at the funeral. Ninety-six percent of the funeral directors responded the body should be present as did 90 percent of the priests. Only 50 percent of the Methodists and 29 percent of the Episcopalians felt it important for the body to be present.

On the topic of cremation, French (1985) notes, “only 5 percent of the funeral
directors in the South Carolina survey factor a wider practice of cremation with 77 percent opposing it, and the remainder making statements such as 'Whatever the family wishes'” (p. 149). The Catholics by 33 percent favor a wider use of cremation, 57 percent of the Methodists and 83 percent of the Episcopalians wanted to see cremation practices increased.

Fulton (1965) surveyed attitudes of the public toward funerals and funeral directors. The most favorable rating came from those of the Catholic faith, secondly the Protestants, third, those that were classified non-affiliated, and finally Jews and Unitarians. Memorial society members were much higher in income level, education, and professional status, but lowest in traditional religious affiliation.

An interesting article by Jacobs and Wilkes (1988) brings to light the issue of AIDS and the cremation patterns that are being seen for these individuals. Their research presents evidence that persons dying of infectious diseases (AIDS and AIDS-related complications) have higher cremation rates than those dying of noninfectious diseases. The methodology employed for this research looked at the vital statistics registry of New York City, comparing ICD-9-CM codes and cause of death versus cremation outcomes. Their age range was limited to 25 to 44 year olds.

Jacob and Wilkes (1988) found that patients who die of AIDS are cremated more frequently regardless of race or location of death. They note:

It is impossible to determine from these data whether the families and friends of AIDS patients are seeking cremation as an alternate to burial or are being strongly urged to accept cremation as an alternative. In the
past, funeral directors have refused to care for the dead with contagious
diseases. With greater public tolerance for cremation, funeral directors
might influence the decision of the bereaved to opt for cremation. (P. 631)

The study by Dawson, et al, (1990) sought to survey close survivors of deceased
individuals utilizing a mailed questionnaire to investigate the differences in final
arrangements when burial and cremation were utilized as the method of body disposition.
Their sample was derived from six metropolitan areas of the United States and surveyed
740 survivors. They state, “There has, perhaps, never been a single form for a traditional
American funeral since funeral rituals vary with religious, ethnic, and socioeconomic
factors, and because America has always consisted of many heterogeneous groupings
employing a variety of funeral arrangements and rituals” (p. 130). According to Aiken
(cited in Dawson, Santos, and Burdick, 1990), there has been a general deemphasis on
funeral rituals in present day America, and that the funeral had changed from mainly a rite
for honoring the dead to an event where concern is focused on the needs and feelings of
the survivors. Aiken predicted that the use of cremation will continue to increase due to
multiple factors including ethnicity, education, religion and socioeconomic status.

Overall Dawson, et al, (1990) found cremation as a method of body disposition is
associated with higher levels of education, employment, and income than is burial. Also in
agreement was their finding that persons who are cremated and survivors involved with
cremation are more likely to be Protestant and have been less active in religious activities.
However, Dawson, et al, (1990) found the incidence of Catholics utilizing cremation (only
allowed since the 1960s by the Roman Catholic Church or prior to 1960 with specific reason) is 17 percent. It is likely cremation will continue to increase among Catholics.

Dawson, et al, (1990) noted both the church and funeral home were used more with burials than with cremation, suggesting traditional funeral services are more likely to occur when burial is the form of disposition. The sample obtained from the survivors of those cremated reported a much larger percentage of times when memorial services were held at a later date than did the burial sample, where it was very infrequent. The use of direct disposition with no services held was higher with cremation---almost 20 percent of the cases.

As related earlier, Dawson, et al, (1990) found religious and family traditions as well as clergy and family members all rated significantly more influential in the final arrangements by burial respondents than by cremation respondents. It is noted the burial respondents rated the importance of “Social/Community Tradition,” in general, higher than the cremation respondents.

Regarding the economic differences between a traditional earth burial and cremation, Dawson, et al, (1990) found respondents in both disposition samples rating “Keeping Expenses Low” as having little influence on the final arrangements. It would appear that factors other than economic concerns are important to the choice of cremation. But, interestingly enough, this survey does not support the idea that an important factor in the choice of cremation over burial is one of ecology and concern for use of the land.
Summary

The proponents of cremation began their crusade to provide a more sanitary and economic alternative to earth burial for those individuals who were succumbing to infectious diseases and whose families were being left destitute by the traditional funeral and earth burial (Knopf, 1907 & 1922). But, through the years, it has become apparent the use of cremation as a method of body disposition is being utilized more by individuals who are more highly educated, of higher employment status, more well-to-do, and are less active in religious activities. (Cottrell, et al, 1984; Dawson, et al, 1990; Fulton, 1965). It is interesting to note that with the advent of AIDS, an infectious disease often misunderstood by the general population, more AIDS victims in New York City are being cremated than those dying of noninfectious diseases (Jacobs and Wilkes, 1988).

Tradition, as well as being of the Catholic faith, plays a large factor in an individual’s decision to choose earth burial (Cattrell, et al, 1984; Dawson, et al, 1990). These two factors are highly correlated. However, Dawson, et al, (1990) note cremations are slowly rising for those of the Catholic faith. Cottrell, et al (1984) made a point of noting the incidence of college students stating a preference for non-traditional means of body disposition is much higher than what actually occurs among the American population. Over time, we may see an increase in cremation as tradition fades and with young people of today being more receptive to cremation.

Opposing this trend (or becoming more innovative with additional services) will be the funeral directors who overwhelmingly favor the body being present at a traditional
service (French, 1985).

Change takes time. Traditional funerals remain the norm in the Deep South, among Catholics and in families with strong ethnic or religious traditions (French, 1985; Sloane, 1991; Szanton, 1992). Cremation is increasingly popular due, in part, to the decline in those traditions as Americans attempt to gain control over the process of dying and death. Twentieth-century proponents of cremation believe the dead can be memorialized in other ways or live in the hearts and memories of those who knew them (Sloane, 1991).
Chapter III

Methods

The original intent of this thesis was to replicate Dawson's study on differences in final arrangements for cremation using a rural population as opposed to Dawson's work with a metropolitan population. As work progressed, it became evident that responses would not be statistically significant for research purposes. It was determined to include a qualitative aspect to the research as well as the intended quantitative approach. The sum of these two methods provided a unique perspective to the research that resulted in a broader scope of understanding regarding the differences in final arrangements between burial and cremation.

Quantitative Method

The research process for obtaining respondents of cremated individuals was first to obtain a listing of licensed funeral directors in the state of Nebraska. The Bureau of Examining Boards for the State of Nebraska provided such a listing. The next task was to determine what would constitute a "rural" setting from which to draw a list of respondents. The Nebraska cities of Omaha, Lincoln, Grand Island/Kearney and Scottsbluff were considered to be "metropolitan areas." Initially, a 50-mile radius extending from the designated metropolitan cities was considered. With this projected distance, however, only 114 funeral homes met the rural criteria. Knowing that Dawson
and The National Research and Information Center (NRIC) found obtaining information from survivors of deceased persons who had been cremated to be particularly difficult, it was determined to decrease the metropolitan radius criteria to 25 miles of Omaha, Lincoln, Grand Island/Kearney and Scottsbluff, Nebraska. By doing so, the number of funeral homes then fitting the “rural” criteria was expanded to 201 funeral homes.

A letter was sent to the licensed funeral directors outside a 25-mile radius of Omaha, Lincoln, Grand Island/Kearney, and Scottsbluff, Nebraska, asking for their support of this thesis project by supplying a listing of those cremations they had directed during the calendar years 1992 and 1993 along with the names of the responsible party for the deceased (See Appendix A). Several days after the letters were mailed to the funeral directors, a letter was received from the Nebraska Funeral Directors Association, Inc., stating the Association was notifying their membership to not honor the request for names of the deceased or responsible parties (See Appendix B). At the suggestion of the Nebraska Funeral Directors Association, a call was placed to the Nebraska Department of Health, Bureau of Vital Statistics. After stating the purpose for the call to a supervisor with the Department, I was informed the information contained on death certificates is not considered for public access and any information I would request would have to be with the permission of the respective county attorney for each deceased individual.

By now, several funeral directors were beginning to return a listing of their cremations and names of the responsible party. It should be noted 201 letters were mailed, 15 letters were returned with addressing problems and were undeliverable, for a
total of 186 letters being delivered. The following is a breakdown of what was returned:

Five responses of “No cremations during the requested time period.”

Four responses of not willing to share the requested information with these notations:

“I do not feel comfortable about giving you the names or the responsible party names of cremated remains. I am sure that the State Department of Health=Bureau of Vital Statistics in Lincoln has ALL THIS INFORMATION.”

“We do not furnish this type of information to non-family members.”

“This is an invasion of the privacy to our families. I suggest you contact the Department of Health for this information.”

“I don’t think our families need to be bothered. Sorry!”

Eight responses with the requested information which provided 69 names of deceased individuals and responsible parties.

Even though a poor response was noted with only eight funeral homes responding (4.3%) positively to the request, it was determined to proceed with the survey to see what results could be obtained.

A survey was developed patterned after Dawson’s study, asking for information on the occurrence of various final arrangements and the factors influencing them. The survey covered such areas as services or ceremonies, remembrance items, visiting, viewing and
embalming, factors influencing cremation, and disposition of ashes. In addition, a second questionnaire was developed to determine characteristics of the respondents and of the deceased in areas such as religious preference, religious activity, education, employment, income level and living arrangements. A cover letter was drafted to accompany the survey explaining the purpose of the request and the importance of obtaining this information. The letter was on University of Nebraska at Omaha letterhead and was co-signed by the Chairman of the Department of Gerontology. The respondent was provided the option of remaining anonymous or, if they so desired, they could include their name and address for a copy of the results and conclusions from the survey (See Appendix C).

As previously stated, the results from the quantitative research were disappointing as to the statistical significance that could be derived from the gathered information; it will be detailed in the next chapter. At this point, it was determined a qualitative aspect to the research may yield more insightful data on this sensitive topic.

Qualitative Method

The qualitative method for this project entailed obtaining interviews with relatives of individuals who had been cremated. The first step was to find individuals who would be willing to be interviewed for this project. Contact was made with three Omaha area funeral homes to determine if they would be of assistance in providing next of kin information as had been attempted in the quantitative method. Taking a different approach, an offer to draft a letter was extended to the respective funeral home to send to
the responsible party, on their letterhead, whereby the responsible party/next of kin could contact me if they so chose to participate in the research. It was the desire to not create an issue with the names being given directly to me, as had been an issue in the past. All three of the funeral homes denied my request for assistance.

As was noted previously, the respondents in the quantitative study were given the option of remaining anonymous or providing their name and address for results and conclusions of the study. Of the surveys returned, four respondents indicated they would like this information. In an attempt to find interested parties to interview for the case studies, a letter was drafted to these four individuals asking them to consider an interview (See Appendix D). Only one positive response was received.

At this point, verbal contacts were made of friends, relatives, clients and others regarding their acquaintance of an individual who had been cremated or a relative of a cremated individual. After several months, nine next of kin/responsible parties had been found and interviews taken. A variance is noted to the rural nature this thesis project was intended to view. Two of the cremated individuals were originally from metropolitan areas; however, their final years were spent in a rural setting. The interviews were conducted in various places such as Omaha, Bridgeport and Wahoo, Nebraska, and Parkville, Missouri (See Appendix E). Eight of the case studies were conducted in the home of the respondent and one case study was conducted over the phone.

The interviews were structured to a point where questions were asked that elicited the same type of information gathered on the surveys. But, often the respondent was
encouraged to provide other reminiscences of the individual and their relationship to the person. Several of the respondents offered to show pictures of their loved one and other family memorabilia to help one understand the special relationship that was present. Many of the interviews lasted well over an hour and one in particular lasted almost two hours. Respondents were encouraged to be as open as possible and to provide as much insight as was possible reflecting on the cremated individual’s background, values and reasons why cremation was chosen.
Chapter IV

Results

Quantitative Method

Of the names received from the eight responding funeral homes listing their cremated individuals from the designated time period, 63 usable names were identified. Individuals under the age of 21 were excluded from the survey as were individuals where the responsible party was a bank trustee. Three surveys were returned for incorrect addressing for a total of 60 surveys being received by the responsible party. The final tally of returned surveys numbered 28, a 47% return. Normally, a 30% or greater return could be considered usable; however, due to the small number of surveys reviewed here, the data would not be considered statistically significant. It is the intent to at least look for trends or correlations from the returned surveys.

Deceased Characteristics

The median age for the deceased among the returned surveys was 74.5 years. The difference between the average age of the deceased males (M=67.6) and the deceased females (M=78.5) was consistent with Dawson’s study and reflects the fact that males in our society tend to die at a younger age than females. It is interesting to note, the present survey experienced a response rate of 85% Caucasian and 15% African/American, compared to Dawson’s 94.7% white response rate. However, it should be addressed that Dawson’s study drew only from cooperating funeral homes of the National Research and
Also consistent with Dawson’s study of a cremated population was the religious affiliation, with 64% reporting as Protestant and 36% as Other. It is noted that none of the surveys indicated Catholicism as a religious preference. The percentage identified as ‘Protestant’ may be somewhat misleading as the questionnaire did not direct the respondent to identify ‘Other’, beyond the listed choices of Catholic, Jewish, or Protestant. It the author’s assumption that religious denominations such as Methodist, Baptist, etc., may have been identified as ‘Other’ when in fact should have been marked as ‘Protestant’. When reviewing the level of religious activity of the deceased, 61% were reported to be active 0 to 1 time a month. This low level of participation matches Dawson’s findings. Yet, the most active level of church attendance at 1-2 times a week was reported 22% of the time, with just 2 times a month reported 17% of the time.

A review of the education level of the deceased individuals shows for this rural population, 83% had achieved a high school diploma or greater, and of this number, 26% had a college degree. When reviewing the employment of the deceased 43% were described as ‘management’ or ‘professional’, and 52% were described as ‘trade/agricultural’. With Nebraska being an agricultural state, these numbers still compare positively with Dawson’s study indicating, cremated individuals have a higher education base and higher employment levels.

Regarding the marital status of the cremated individuals, it was found that 61% were single, (including divorced) or widowed, while only 39% were married at the time of
One thing that deserves additional comment is the surveys returned from the African/American respondents. As the present study obtained a larger percentage of return from this race (albeit only three surveys) than did Dawson, it is noted the characteristics seen with the African/Americans hold equally true for the areas outlined above. All three of the African/Americans had a high school diploma or advanced education, two of the three were single, two of the three had low religious activity, all were Protestant or Other, and two of the three were described as professional while the third one’s employment was listed as trade/agricultural. The trend noted here shows race to not be a factor, at least in this survey, as a determinant for cremation.

Occurrence of Final Arrangements

A thirty-eight item check list, divided into six sections, instructed the respondents to mark "... EVERY arrangement or request which you know, or believe, was carried out in regard to the person who died." The final arrangement items checked on this thirty-eight item check list included seven items regarding services or ceremonies, nine items regarding remembrances of the deceased, six items regarding visiting, viewing, and embalming, ten items regarding factors influencing cremation, and six items regarding other factors influencing cremation.

Services or Ceremonies: The following results reflect the occurrence of the final arrangement items regarding services or ceremonies. From the 28 surveys, it is noted 13 or 46% held a service at a church, 7 or 25% held a service at the funeral home, and 22 or
79% followed with a grave side service. These proportions vary from Dawson’s in that their study saw a larger percentage using a funeral home for a service rather than the church setting, and an appreciably lower percentage (21.9% us 79%) for a service at the grave site. Also noted is the disparity of the two studies with reference to no service being held; the present study found only two surveys (7%) indicated no service held, while Dawson found a 19.8% rate of no service held. Closer was the incidence of a memorial service being held at a later date; the present study noted a 14%, versus Dawson’s 19.8% finding.

**Remembrance Items:** In reference to the remembrance items, this study noted a larger percentage (82%) of flowers being sent from the family than did Dawson’s (62.3%). When questioned about flowers being sent from others, the present study found an 86% “yes”, compared with 53.2% for Dawson’s study. It is also interesting to note that this study found 50% giving religious donations compared to 28.3% for Dawson’s study. Conversely, Dawson’s study found 45.3% responding positively to having medical donations received versus 25% for the rural population of this study. Finally, this study found 79% responded that a monument or marker was located at the disposition site compared to only 41.7% found in Dawson’s study.

**Visiting, Viewing, and Embalming:** The area of occurrence of final arrangements regarding the visiting, viewing and embalming of the body is the next area of review. When asked if a time was designated for visiting with viewing of the body, the present study found only an 8% response, while Dawson’s study found 22.3% responding
positively. But, when queried regarding a time for visiting with the body absent, this study found a 26% positive response versus Dawson's 10.9% response. It is interesting to note the rural sample indicated a 64% response regarding a social gathering after the disposition compared to a 36.4% response from Dawson's sample. Both studies showed a fairly consistent finding regarding the body being embalmed; this study found 16% of the deceased were embalmed compared to 14.3% for Dawson's study.

Factors Influencing Cremation: (1=No Influence to 5=Very Much Influence).
The highest rating factor for cremation was found to be the preference of the deceased (M=4.31) which compares closely with Dawson's findings (M=4.12), showing only a mean difference of .19. The next highest rating factor in the present study was found to be that the respondent favored cremation, which was noted at M=2.96; Dawson noted a factor rating of M=3.46 for a mean difference of -.5. The third rating factor reported keeping expenses low. This study found M=2.73, while Dawson noted this factor at M=2.14. The other rating factors of cause of death, religious tradition, family tradition, funeral home personnel, cemetery/crematory personnel, and clergy/religious counselor were reviewed and the mean was found to be less than 1.4 with a mean differences all less than one. None of these differences were statistically significant.

Factors Influencing Final Arrangements: (1=No Influence to 5=Very Much Influence). Of the six areas reviewed in the present study, all were found to be less of an influence than Dawson found. The most notable difference was with regard to the deterioration of the body after death; this study displayed a M=1.15 while Dawson's found
a $M=2.51$, for a mean difference of 1.36. The appearance of the body at death was the second highest noted difference with this study noting a $M=1.31$ and Dawson’s study noting a $M=2.60$, for a mean difference of 1.29. The concern for use of land was noted to be closely associated between the two studies; this study was $M=1.81$, while Dawson found $M=2.58$. A mean difference of less than one was noted for the areas of cost of arrangements, social and community tradition and convenient/efficient arrangements.

**Disposition of Ashes:** This study found 86% of the cremains being buried, which is a large percentage. This compares to only 40.4% for Dawson’s study. While only 11% of this study indicated the ashes were scattered, Dawson noted a 28.7% incidence of scattering. Finally, while only 4% of this study reported the ashes were kept in the family, Dawson noted a 21.5% response rate to the family keeping the ashes.

**Qualitative Method**

In reviewing the nine case studies, several trends and themes seem to stand out. First and foremost, the decision for cremation was made by the deceased or the interviewee. If the interviewee made the decision for cremation, it was with the knowledge that the deceased was in agreement with this method of body disposition. Second, seven of the nine deceased had some form of cancer that left the body disfigured. In all but one of these cases, no viewing of the body was allowed. Thus, it appears the condition of the body at the time of death may play a role in the decision for cremation. Even going back further, the interviews were able to elicit a sense of poor body image
from childhood in four of the cases studies. Characteristically, one with a sense of poor body image would not be comfortable with the concept of being viewed after death.

The case studies also reflect these individuals to be fairly basic, down-to-earth type of people. Although two of the deceased were professionals, the remainder worked in service industries or factories.

Although none of the deceased were ‘wealthy’, several were noted to be ‘comfortable’ in their finances. The remainder were of a lower to low-middle economic status. However, it was a trend that these individuals were thrifty and frugal, with few lavish expenditures or materialistic agendas. In only one case was it mentioned that cost was considered as a factor influencing the decision for cremation. In this particular case, the individual did not have life insurance and did not wish to burden his children with the cost of a traditional funeral.

Finally, the case studies show a trend of low religious activity in adulthood. However, the majority of individuals were brought up in God-fearing Protestant homes were the work ethic was valued and one was encouraged to be a good citizen.
While the prevalence of earth burial remains the traditional method of body disposition in America today, the use of cremation for body disposition is slowly gaining greater acceptance. As cremation has only been used in this county since 1876, it is interesting to note that today approximately 20% of deaths use cremation for body disposition. It is noted that as cemetery managers began incorporating the option of cremation into their operations, recognizing that cremation was one more service to offer the customer, people began to feel less negative about cremation. Thus, the concept of cremation has moved away from the sanitary concerns first espoused by the early proponents and from the economic issues in the early 1900's to today where a decline of American traditions regarding burial is evident and where individuals are struggling to retain more control over the process of their own dying and death.

This thesis addressed the cremation issues that Dawson's study surveyed with regard to influence factors for the cremation decision. Several notable differences were discovered. First, this survey found more services being held at the church/grave site than Dawson's, where Dawson found a greater use of the funeral home for services. It would seem the rural communities still cling closely to the value of their religious base for comfort in the time of need. Also, in small towns, most citizens are well known, and although they may not be active in their religion, at death, the church is a stabilizing factor
and return to the ‘roots’ of community for the final send off.

A second difference noted came from the area of ‘no service held’. This survey noted a 7% rate versus Dawson’s 19.8% rate for no service held. It appears as if the contacts and connections one has in a rural setting may make a stronger impact for a service to be held than in a metropolitan setting where an individual may be a ‘transplant’ with few friends or family for which a service would be important.

A third difference is noted with regard to remembrance items between the two surveys. This study found a much higher use of flowers being sent from family and friends as well as religious donations being received. Dawson found a higher incidence of medical donations being received. Again, an appearance is seen here where tradition is playing a significant role in how a rural community responds to the death of one of its own. With the church being the cornerstone of a rural community, it would seem only natural that a remembrance to the church is often given as well as the church being adorned with flowers. In many cases, monies received from donations are specified for particular items and donors are noted in the church bulletin. In the less traditional ways of metropolitan areas and for more of an anonymous nature, Dawson’s incidence of remembrances to medical donations seem less personal and traditional.

A fourth difference noted between the two surveys looks at the social gathering held after the service. This study found for the rural setting a 64% rate of a gathering versus Dawson’s 36% rate. Again, this appears to follow traditions path that with the service being held at the church, then the trip to the cemetery, all family and friends gather
back at the church or home of the family for a meal. Typically, the ladies of the church prepare a meal to welcome those in attendance for the service back for a gathering with the family to show support and sympathy.

This thesis does however, have limitations. Obviously, difficulties were noted in obtaining data, which resulted in a small number of surveys with which to work. Possibly, with grants or endorsements from the funeral industry or memorial societies, a greater amount of information could be gathered, where more definitive trends could be noted. In retrospect, it would be interesting to have had the cause of death noted to determine if this aspect played any part in the decision for cremation, either from the deceased or the responsible party.

In review, although members of a rural population may choose cremation, many of the traditional trappings of funerals are still present, probably for the sake of the survivors and their comfort level with tradition. But what has brought about the decision for cremation in the first place? To this question, I would like to offer several theories.

In both the surveys and the case studies, it was overwhelmingly obvious the decision for cremation was the preference of the deceased. Obviously, personal beliefs instead of simply selecting the traditional funeral process because of its familiarity and social acceptance were paramount. It seems feasible a control issue may be evident with the individuals wishing to maintain some degree of control over their body disposition rather than allowing all aspects of tradition to again hold forth. Further study to identify the specific personal beliefs which bring about this decision would hold merit.
One other issue which continues to come up in reviewing the case studies is this:
Eight of the nine case studies had disease ravaged bodies which may have been a factor for cremation as these individuals may have not been comfortable with their body image at this point and did not wish to be “laid out”. It is well documented that AIDS victims, again a disease which ravages the body, more often opt for cremation than traditional burial. As neither Dawson’s study nor the quantitative aspect of this study asked for cause of death, or overall feelings about one’s body image, to draw a conclusion on this aspect is not possible. However, further research into this area could prove interesting.

Finally, as traditions break down with regard to ethnic and religious concerns, and as we as individuals wishing to exert more control over our dying, death and final disposition, will opt for more non-traditional methods of body disposition, including cremation.
APPENDIX A
February 6, 1995

Dear Funeral Director:

As a graduate student in Gerontology at the University of Nebraska at Omaha, I would like to ask for your assistance as I prepare to collect data for my master's thesis. The thesis is designed to survey attitudes on cremation in rural Nebraska to determine how these attitudes may differ from metropolitan areas.

I would be most appreciative if you would take the time to provide a listing of those cremations that you have had during the calendar years of 1992 and 1993, along with the name of the responsible party for the deceased. A survey will be sent to the responsible party of the deceased seeking to determine attitudes and decisions regarding the cremated individual. All information will be used for statistical purposes only and confidentiality will be maintained.

Your participation in this data collection will be very much appreciated. I do realize that clerical time will be necessary to provide the information, but I will be very grateful for your taking the time to aid in my research that could be useful to your profession.

Enclosed you will find a form for your convenience in listing the information I will need. I have enclosed a self-addressed stamped envelope for your reply. If you would like a copy of the conclusions that I draw from this research, please indicate this on the return envelope and I will make sure that you receive a copy.

Again, I do thank you for your time to further our knowledge base on attitudes regarding cremation.

Sincerely,

Nadine Freshman

James A. Thorson, Ed.D.
APPENDIX B
Greetings:

Your letter of February 6, 1995, sent to funeral directors in the state of Nebraska requesting cremation information has been called to our attention.

Because of confidentiality and invasion of privacy legislation which currently regulates funeral directors and the country as a whole, we have concerns about your request. To guard against the possibility of repercussions from families that our membership serves, the Nebraska Funeral Directors Association has sent our members a bulletin strongly recommending that they not send the information you request. We believe you will understand our position in this matter.

For assistance in obtaining information on cremations in Nebraska, we would suggest you contact the Bureau of Vital Statistics at the Department of Health in Lincoln. All death certificates for Nebraska are filed with them. Their phone number is (402)471-2871.

Sincerely,

DON ELLERBEE
Executive Director
APPENDIX C
April 6, 1995

Greetings:

Please allow me this opportunity to introduce myself. I'm Nadine Freshman, wife, mother, health-care professional and graduate student at the University of Nebraska at Omaha.

It is my persona as graduate student that brings this letter to you. I am in the process of conducting a research project for my master's thesis which is looking at the incidence of cremation and the factors that may have influenced this decision for your spouse and/or relative.

A study by Dawson and Santos in 1990 surveyed metropolitan areas of the country, but I have chosen to survey the rural population of Nebraska to determine if the factors for cremation differ in any way from Dawson's study.

Enclosed you will find a short survey asking you to recall the occurrence of various arrangements regarding the cremation, any services that were held, and the disposition of the ashes. You will also find a two page survey asking for demographic data on you and the deceased. By your taking a few minutes to answer these questions, you will be providing the study with a wealth of valuable information regarding the loss experience. It is only through your responses that new light can be shed on this sensitive topic.

I truly appreciate your time in answering these questions and would appreciate your responses by April 30, 1995. If you would like a copy of the results, please indicate this on the questionnaire along with your name and address. Otherwise, you may remain anonymous and all responses will be kept confidential and used for statistical purposes only.

Sincerely,

Nadine Freshman, RD, CN

James A. Thorson, Ed.D.
Department of Gerontology
OCCURRENCE OF FINAL ARRANGEMENTS

Please indicate EVERY arrangement or request which you know, or believe, was carried out in regard to the person who died.

SERVICES OR CEREMONIES:

Was a service or ceremony held at the funeral home? Yes No
Was a service or ceremony held at a church? Yes No
Was a service or ceremony held at grave side? Yes No
Was a service or ceremony held at the crematorium? Yes No
Was a service or ceremony held at a private home? Yes No
Was a service or ceremony held at a later date? Yes No
Was no service held? Yes No

REMEMBRANCE ITEMS:

Were flowers sent from the family? Yes No
Were flowers sent from others? Yes No
Were no flowers requested? Yes No
Were religious donations received? Yes No
Were medical donations received? Yes No
Were community donations received? Yes No
Was a monument/marker located at the burial site? Yes No
Was a monument/marker used? Yes No
Other remembrances?  __Yes  __No
If yes, please list ____________________________________________________

VISITING, VIEWING, AND EMBALMING

Was a time designated for visiting and viewing the body?  __Yes  __No

Was a time designated for visiting with NO viewing?  __Yes  __No
(However, the body was present)

Was a time designated for visiting with the body absent?  __Yes  __No

Was there a private viewing only?  __Yes  __No

Was there a social gathering after disposition?  __Yes  __No

Was the body embalmed?  __Yes  __No

FACTORS INFLUENCING CREMATION

Please rank the following statements from 1 - 5 (1 = No Influence, 2 = Little Influence, 3 = Some Influence, 4 = Much Influence, or 5 = Very Much Influence) indicating how much influence each statement played in the decision for cremation.

Cremation was the preference of the deceased.  _____

Cremation was the preference of the respondent.  _____

The cause of death was a consideration for cremation.  _____

Cremation was chosen due to religious traditions.  _____

Cremation was chosen due to family traditions.  _____

Cremation was chosen upon recommendation from the funeral home personnel.  _____

Cremation was chosen upon recommendation from the Cemetery/Crematory personnel.  _____

Cremation was chosen upon recommendation from the clergy/religious counselor.  _____
Other family members desired cremation. ______

Cremation was used to keep expenses low. ______

OTHER FACTORS INFLUENCING CREMATION

Please rank the following statements from 1 - 5 (1 = Not at all important, 2 = Somewhat Important, 3 = Important, 4 = Very Important, or 5 = Extremely Important) indicating how much importance was placed on these factors had in the decision for cremation.

- Cremation was chosen due to cost of other arrangements. ______
- Cremation was chosen due to social/community tradition. ______
- Cremation was chosen for convenient/efficient arrangements. ______
- Cremation was chosen due to the appearance of the body at death. ______
- Cremation was chosen due to the appearance of the body at death. ______
- Cremation was chosen for concerns of body deterioration after death. ______
- Cremation was chosen with concern for use of land. ______

DISPOSITION OF ASHES

Please indicate the manner in which the ashes of the deceased were handled for final disposition.

- _____Buried
- _____Placed in columbarium/masoleum
- _____Scattered
- _____Kept in the possession of the family
- _____Other (Please describe):

Thank you very much for sharing this information regarding the deceased. I appreciate the time you have taken to provide this information. I sincerely hope this has not caused any additional emotional pain for you.
RESPONDENT CHARACTERISTICS

Note: As the respondent, these questions pertain to you (as spouse, next of kin, and/or responsible party). Please answer all questions in relation to you at the time of the deceased’s death.

Relationship to Deceased ____________________________________________________

Race: _____Caucasian _____African American _____Indian _____Other

Sex: _____M _____F Age: _____ Marital Status: _____________________________

Religious Preference: _____Catholic _____Jewish _____Protestant _____Other

Religious Activity: ____0-1 times a month ____2+ times a month ____1-2 times/week

Education: _____Less than HS Diploma _____HS Diploma _____Post HS work

_____College degree

Employment: _____Trade/Agricultural _____Technical _____Management

_____Professional _____Other (Specify): _____________________________

Income level: _____Less than $25,000/yr _____$25,000-$40,000/yr

_____$40,000-$60,000/yr _____$60,000-$90,000/yr _____$90,000+/yr

Living Arrangements: ____Alone _____with Spouse _____with Family _____Other

(If other, please specify) ___________________________________________________

DECEASED CHARACTERISTICS

Note: Please answer these questions in relation to the deceased at his/her time of death.

Race: _____Caucasian _____African/American _____Indian _____Other
Sex: _____ M _____ F Age: _____ Marital Status: _______________________
Religious Preference: _____ Catholic _____ Jewish _____ Protestant _____ Other
Religious Activity: _____ 0-1 times a month _____ 2+ times a month _____ 1-2 times/week
Education: _____ Less than HS Diploma _____ HS Diploma _____ Post HS work
_____ College degree
Employment (please indicate as during working years): _____ Trade/Agricultural
_____ Technical _____ Management _____ Professional _____ Other
(If Other, please describe) ________________________________________________
Income level: _____ Less than $25,000/yr _____ $25,000-$40,000/yr
_____ $40,000-$60,000/yr _____ $60,000-$90,000/yr _____ $90,000+/yr
Living Arrangements: _____ Alone _____ with Spouse _____ with Family _____ Other
(If other, please specify) ________________________________________________
January 3, 1996

Ms. Lisa Hageman
XYZ Street
Anytown, NE

Dear Ms. Hageman:

Last April, you were kind enough to complete a survey mailed to you regarding your father and the events of his cremation. At this point in time, I am still gathering data for my thesis in the form of case studies. It seems the surveys did not elicit enough information for statistical analysis so I am now looking for qualitative material.

I am writing to you as you indicated you were interested in the results of my study. Would you be interested in again helping me by allowing me to interview you? The interview would last about an hour and would ask you to recall more personal items and remembrances of your father than were listed on the initial survey. I would prefer to do the interview in person at a location that would be convenient for you. As before, no identifying information would be used, only initials, and solely for research.

You can reach me during the day at my work number 398-6171 or in the evenings at home 493-1624. I would appreciate hearing from you and I would like to thank you again for taking your time to further my research on the issue of cremation.

Sincerely,

Nadine Freshman
APPENDIX E
CASE STUDY #1

Deceased: MAB
Interviewee: Sister-in-law MMC
Date of Birth: July 7, 1907
Aurora, Nebraska
Date of Death: April 7, 1987
Lincoln, Nebraska
Race: Caucasian
Gender: Female
Religion: Congregationalist-----Methodist

Mrs. B was born in Hamilton County, Nebraska on the homesteaded farm of her grandparents near Aurora, Nebraska. She was the younger of two children. When Mrs. B was a young school girl her family moved to Lincoln, Nebraska, as her father accepted a political appointment with the State of Nebraska.

Education was given a high level of importance by the family. It is noted that Mrs. B’s mother graduated from high school in the 1880's, an unusual occurrence in those days. Mrs. B attended the University of Nebraska at Lincoln for three years, working towards a teaching certificate. She was active in Phi Mu Sorority and maintained an active interest in the sorority through adulthood. Mrs. B did not graduate from college due to the death of her father and the subsequent lack of funds. After the death of her father, Mrs. B continued to live with her mother and found employment, in what is described by the interviewee as “preschool and child care.” It is noted that Mrs. B’s relationship with her mother was very close, with the mother being quite dominant in the relationship, and described as “possessive.” Mrs. B never did live on her own, but always cared for her mother, even after she was married.
Mrs. B married Mr. B on June 2, 1951. It was a first marriage for her and a second marriage for him. Ironically, Mrs. B was a close friend of the former Mrs. B and helped out quite a bit during the former Mrs. B’s illness prior to her death. After the marriage, Mr. and Mrs. B purchased a home with adequate space for Mrs. B’s mother to reside with them. During the time of the marriage, Mrs. B did not work.

All through her adult life, Mrs. B was known to have been very active in the Methodist Church. She taught Sunday School and attended services regularly, sang in the choir and was active in many of the ladies circles. She was bestowed with various honors for her volunteerism with the church. This high degree of religious activity was evident throughout Mrs. B’s life.

Mrs. B’s marriage was cut short in 1959, when Mr. B was killed in a work-related accident where he worked as a garage mechanic. There had been no children in this union. After Mr. B’s death, Mrs. B returned to work and lived out her life, caring for her mother in what is described as an “economically comfortable” situation.

Prior to her death, Mrs. B had expressed a desire to donate her body to science. However, UNMC rejected her application. It is noted that during her life, she was sickly and frail for a number of years and endured many surgeries. As she was aware that after the Med Center is finished with cadavers, cremation is used for body disposition, this may be possibly where Mrs. B began to consider cremation. It is noted that no one else in Mrs. B family had even been cremated. Mrs. B died of heart and kidney failure.

It was Mrs. B’s desire to be cremated with a memorial service at the Church.
There was no viewing, no songs, and no social gathering. The ashes were not present at the service. A minister presided at the memorial service. The ashes were buried in the family plot in Aurora, Nebraska. There was no service at the time of burial. Donations were specified to Mrs. B’s church, sorority and charitable organizations. Mrs. B had arranged for her own marker, so all that was needed was a last date.

Mrs. B. is remembered as “genteel and simple.” With no close survivors, she opted to make arrangements that were easy and efficient and did not cause an inconvenience for anyone. She left a “large estate” which was distributed between the interviewee, a niece and a nephew.
CASE STUDY #2

Deceased: WGN
Date of Birth: June 26, 1910
Weston, Nebraska

Interviewee: First Cousin ED
Date of Death: February 14, 1989
Omaha, Nebraska

Race: Caucasian
Gender: Male
Religion: Baptist-------Presbyterian

WGN’s grandparents left their native Sweden in the 1860’s due to religious persecution and settled on a homestead in Weston, Nebraska. WGN was born on this homestead and was raised a Baptist. Religion was a large part of this family’s life. In fact, the family gave part of their original homestead for the Baptist Church and cemetery in Weston.

WGN’s father was a farmer on the family homestead, but he chose to not follow in his father’s footsteps due to his long standing bout with eczema. Instead, WGN graduated from Wahoo, Nebraska High School and later graduated from a school of osteopathy in Des Moines. He settled in Sidney, Nebraska and set up his practice. The interviewee indicated that Dr. N kept a large and active practice and was well-respected in the community. He never married and lived alone with the aid of housekeepers. After the death of his parents, a sister who had never married but had lived with the parents, came to live with Dr. N in Sidney. She kept house for the doctor and greeted patients at his practice.

During his adult life, at some point in time, he did belong to the Presbyterian
Church but was described as, "not too active." Dr. N was active in the Masonic Lodge, enjoyed travel, concerts, and reading and attending events as AK-SAR-BEN. The interviewee indicates that Dr. N was very generous to her and took her on many nice trips as well as out to dinner every Thursday. He liked "good" cars and prided himself on having a current model. Dr. N is remembered as a someone who displayed a strong work ethic, didn’t waste money, but was “thrifty and cautious.” He is described as one with an organized, logical mind. His affairs and money were all “in order.”

Dr. N retired from practice at the age of 75. At that time, he purchased a one-bedroom apartment at Immanuel Village and lived there until his death from lung cancer three years later. Through viewing Dr. N’s death certificate, I was able to determine that he had a direct cremation with no embalming. The interviewee shared that Dr. N requested a memorial service at Immanuel Village with a minister from Dundee Presbyterian Church presiding. It is noted that flowers were present at this service. As per Dr. N’s wishes, there was no viewing and no visitation. His ashes were interred in the family plot in Weston. A prayer service was held at the gravesite with a social gathering of the few family and friends at a local cafe after the service. Donations were specified to Immanuel Village or Dundee Presbyterian Church.

The interviewee indicates all arrangements had been designated and handled by Dr. N. He had prepaid the mortuary for their services. It is noted that the interviewee feels strongly that Dr. N chose cremation due to a consideration of the disease process that ended his life. Only one other family member is known to have been cremated, Dr.
N’s sister.

Dr. N left an estate in excess of $100,000. The interviewee shared with me that she receives a quarterly interest check on the estate. Upon her death, the balance of the estate will be transferred to Immanuel Village. The interviewee cites this as an example of Dr. N’s caring and generous way, a man who devoted his life to helping and caring for others and asking for little in return.
CASE STUDY #3

Deceased: HLP
Interviewee: Wife DP

Date of Birth: July 15, 1906
Mansfield, Mass.

Date of Death: March 3, 1988
Omaha, Nebraska

Race: Caucasian
Gender: Male
Religion: Trinity Interdenominational Church

HLP was an accountant for his adult working life, having received an accounting degree from the University of Boston. He and his wife were the parents of two children. By the interviewee's account, they led, "a very simple life."

After HLP retired from his accounting position, he and his wife moved to Omaha to be closer to their one surviving child. The interviewee relates that one child predeceased she and her husband and it was their daughter’s desire to be cremated. Mrs. P feels that her husband was comfortable with the idea of cremation, although it was her decision that HLP be cremated based upon convenience as the ashes were buried in a family plot in Massachusetts. It is noted that HLP felt it more economical to be cremated than for earth burial.

It is noted that Mr. P was always very active in the church. He was an elder and also taught adult bible classes. Mrs. P states she checked with the elders at their church to be assured that cremation was sanctioned.

Upon HLP’s death from colon cancer, a direct cremation was performed with no viewing or visitation. A memorial service was held at their church in Omaha. Flowers
were present, but donations were not specified. After the ashes were interred in
Massachusetts, a luncheon was held for family and friends.
CASE STUDY #4

Deceased: DLD
Interviewee: Wife ID

Date of Birth: August 25, 1935
Detroit, Michigan

Date of Death: August 19, 1992
Detroit, Michigan

Race: Caucasian
Gender: Male
Religion: Catholic/Baptist

DLD is noted to have had an “unhappy” childhood. His parents divorced when he was seven years of age. At that time he went to live with a maternal aunt as neither his father or mother desired to accept the responsibility for him. The interviewee states this left a profound impact on Mr. D, which was evidenced through his low self-esteem and estranged relationship with his parents. She also notes Mr. D struggled with obesity all of his life which further impacted his self-esteem. Mrs. D states her husband was 5'9" and weighed three hundred thirty pounds. Upon graduating from high school, Mr. D, not wanting to get a job, decided to enlist in the Air Force. This decision led to a 20-year career as a Crew Chief and a final rank of Tech Sergeant. With the Air Force, Mr. D was stationed in Kansas, New Foundland, Maine, Guam and Louisiana. While with the Air Force, he accumulated two years of college credit.

Mrs. D describes her marriage to Mr. D as “normal”, taking the good with the bad. She indicates they had no religious affiliation but on rare occasions attended Baptist services. They had one daughter. Mrs. D worked during the marriage as a waitress/bartender.
After mustering out of the Air Force in Louisiana, Mr and Mrs D returned to his home area of Detroit. He took a position of Service Manager in a car dealership. Approximately five years after his retirement from the Air Force, DLD was diagnosed with an aggressive form of leukemia. He suffered greatly in the year before his death. Mrs. D relates that her husband was “afraid to die”, which she attributes to his Catholic upbringing. “He fought to the end and didn’t want to let go.” However, in the end, Mr. D, who was on a respirator, agreed to “pulling the plug.” Mrs. D states she was comfortable with his decision as he had suffered greatly.

It was Mr. D’s long standing desire to be cremated. At first, Mrs. D stated she was not comfortable with his wish, but over time has accepted it and now she desires to also be cremated. Mr. D was a direct cremation with no embalming, no viewing, and no visitation. Mrs. D remembers that her husband stated, “I don’t want anyone to see me.” She feels this is based on the ravages of the disease and that fact that his sense of body image was poor. A brief service was held at the mortuary with a eulogy given by a nephew of Mr. D’s. A picture of Mr. D was present at the service. Others in attendance were welcomed to provide remembrances. Flowers were sent by the immediate family with a request of no other flowers by the family. However, donations were suggested to the American Cancer Society.

Mr. D is remembered as a generous man who was “just a big ol’ teddy bear.” He had many friends and was extremely well-liked. It was Mr. D’s desire that his ashes be scattered over the Detroit River. Approximately a month after his death, close friends of
the deceased took his ashes and scattered them. Mrs. D was not present as she is afraid of
the water and would not go in the boat with the friends. I feel she sums up her feelings
quite well by saying, "I have my husband in my heart and my head.......I don't need any of
the ashes."
CASE STUDY #5

Deceased: BJD

Date of Birth: August 19, 1907
   Detroit, Michigan

Race: Caucasian
Gender: Female
Religion: Lutheran

BJD was the youngest of 5 children born to a “comfortable” family. Although
baptized a Lutheran, the deceased was never known to be active in church affiliations. As
a child, it was well known that she was pampered and spoiled. As a young woman, the
deceased was “tiny” with a petite frame standing 4'9" and weighing one hundred pounds.
The interviewee describes BJD as “kittenish.” With only a high school education, BJD
began working after graduation in a spring factory; a job she would hold for the next 35
years, until forced to take disability due to emphysema.

At the age of 27, BJD married Mr. D and to that union one son was born. Family
heresy relates that Mrs. D ran around a lot and had many affairs, resulting in numerous
abortions. The marriage lasted seven years. The interviewee opines that Mrs. D lacked
adequate parenting skills as well basic hygiene and cleanliness standards. It is also noted
she had poor nutritional habits and through years of not taking care of herself, Mrs. D
ballooned to two hundred fifty pounds later in life. Through her adult years, Mrs. D had
many major surgeries. After the divorce, the son was sent to live with an aunt, as neither
of the parents desired to accept responsibility for his upbringing. Her son was known to

Interviewee: Daughter-in-law ID

Date of Death: October 11, 1988
   Detroit, Michigan
never be able to achieve a close relationship with his mother. It is noted that Mrs. D never remarried, however, she did live with a succession of men. By now, it is noted that Mrs. D had alienated herself from her family and never regained a closeness to her brothers and sisters.

By her late 50's, the deceased, with advancing emphysema, was forced to leave work and rely on disability. Although she had few friends, she kept busy with bingo, crafts, flower arranging, playing the lottery and collecting knick-knacks. BJD is described as a creative and sensitive individual.

With advancing health issues entering the picture, Mrs. D went to live with her son and his family. Given a year to live after a diagnosis of breast cancer, Mrs. D survived ten years. The daughter-in-law, who provided this information, states “I took good care of her when no one else would. She was one tough ol’ broad.” It is noted that Mrs. D’s greatest fear was having to be placed in a nursing home. She was afraid to die and was not at peace with herself at the time of her death. She struggled to maintain her independence until the end.

When the end was near, Mrs. D’s son approached her regarding her wishes for body disposition. She was quite uncertain but agreed that cremation was the most expeditious. Mrs. D was a direct cremation with no viewing nor visitation. A friend of the family provided a eulogy; there was no religious aspect to the memorial. It is reported that only 20-25 people were present at the service. Flowers were present and the family requested memorials to the American Cancer Society.
Mrs. D's son was presented with the ashes, and the story goes that he placed them in the closet until finally his wife said, "Do something with these." Well, a year and a half later, after the husband's death, the interviewee found the box of ashes on a garage shelf. She subsequently had them scattered on the Detroit River.
CASE STUDY #6

Deceased: EOD

Interviewee: Son TG

Date of Birth: February 14, 1917
Llewellyn, Nebraska

Date of Death: October 17, 1979
Bremerton, Washington

Race: Caucasian
Gender: Female
Religion: None

EOD was born on a ranch in the Nebraska Panhandle where her father was a hired hand. She was one of seven children; the second eldest. Shortly after EOD’s birth, the family moved to North Platte where the father took a job on the railroad. It is noted by the interviewee that EOD had a “hard life” and was “crippled” at age 6 from polio. Although the deceased did not consider herself to be handicapped, she recounted many incidents of non-acceptance from peers. Unable to be active, she turned to books and was well-read and produced many writings as a young woman. She stood barely 5’ and weighed less than one hundred pounds. Her son notes that her shoe size was a “2”, and she many times had to go to the children’s shoe department to find appropriate fitting shoes.

With an 8th grade education to her credit, EOD returned to the Llewellyn area and taught in country school for several years. During this time, she met and married a local gentleman, a laborer by trade, in 1936. This union produced two children of which the daughter predeceased the parents. The marriage was a turbulent one with many separations, a divorce and remarriage. Finally, the marriage was dissolved for a second
time in 1948.

The next 11 years saw EOD married, separated and finally divorced again by 1959. During this time she moved between North Platte, Denver, Topeka and Texas. By 1963, EOD met another gentleman and subsequently moved to Bremerton, Washington where she resided until her death.

Although EOD had no church affiliations, she was proud of the fact she had read the Bible through two times. Mrs. D held a strong belief in the afterlife and further believed in reincarnation. Her son describes his mother as having "psychic" experiences in which she claims she saw auras around people and many times communicated with the dead. As a child, EOD was called a "witch" by the towns people because of her ability to see/talk with the dead. She also experimented with crystals and astrology. The deceased also claims to have experienced an out of body experience in 1935 after a major surgery. At some point in time, the son believes his mother joined the Latter Day Saints Church, although she was not active in the church for any length of time.

After many bouts with cancer, Mrs. D finally succumbed to the disease in 1979. Her son states she was in extreme pain and would often pray to die. It is noted she was not afraid to die and in some ways was looking forward to the experience. Cremation was the desire of the deceased although she had no specific directions as to the disposition of the ashes. Although she died at home, the body was embalmed, a viewing was held, the body was cremated and a memorial service was held. Flowers were present at the service; no suggestions were given for monetary donations. The ashes were returned to
North Platte with a sister and the deceased was buried on top of the grave of her daughter. A graveside service was held at this time.

Mrs. D is described by her son as being the “most ready person to die that he ever knew.” Her legal affairs were all in order and she even returned items to the individuals that had given her gifts. The interviewee state his mother accepted life and was “fairly happy.”
Mr. Z was born the middle child of German parents who immigrated to the Ohio area. His father was a laborer while his mother was a housewife. The interviewee notes that as typical as a German family might be, there was little display of affection in the family. Mr. Z’s childhood was spent in Ohio where religion played an important role in the family’s life. Always an active member in the Lutheran Church, Mr. Z was baptized and confirmed in the Lutheran faith. When Mr. Z was 10 or 12 years old, his mother developed a brain tumor which rendered her unable to care for her family. At this time, a widowed aunt stepped in and assumed care of the children. Mrs. Z notes that the aunt exerted a positive influence on young Mr. Z’s life.

After graduation from high school, Mr. Z struck out on his own and joined a company that was building roads and bridges in Utah. Mrs. Z describes her late husband as a ‘maverick’, and aptly nicknamed “The Bear”, yet thoughtful enough to routinely send money home to help his parents. It was during this time in Utah that Mr. and Mrs. Z met. With the advent of World War II, Mr. Z enlisted with the Air Force and worked as a crew chief on a C-47. He was overseas for two years, flew on seven missions, and progressed
from a private to a master sergeant. After his two-year assignment overseas, Mr. Z returned to the states to Whiteman AFB in Knob Noster, Missouri where Mr. and Mrs. Z were married on April 6, 1943. One daughter was born of this union.

After Mr. Z was mustered out of the Air Force in 1947, he joined TWA and worked in the engine maintenance area and eventually rose to the level of inspector. A 33 year employee of TWA, Mr. Z retired from the company in 1980 in the Kansas City area.

Mrs. Z describes her 47 years of marriage to Mr. Z as “a good marriage.” They both were active in community and church and are charter members of the Lutheran Church in Parkville, Missouri. Mr. Z’s involvement with his church also extended to being Sunday School Superintendent and on the Grounds Maintenance Crew.

While not feeling well for quite some time, Mr. Z finally saw a physician and was diagnosed with lung cancer. He underwent three operations in three weeks and three courses of radiation therapy. He is described by his wife during this time as being very quiet, scared, and accepting of the outcome. Although the deceased knew of other family members that had been cremated, he did not verbalize a firm desire to be cremated.

With the decision left up to Mrs. Z, she based her decision for cremation on several factors. First, she knew her husband would never want a visitation and viewing of the body. She was aware that their church had a Rose Garden on the grounds. And lastly, after a discussion with her pastor and daughter, she felt very comfortable with her decision to cremate her husband’s remains.

Mr. Z was a direct cremation with no embalming, no visititation and no private
viewing. A memorial service was held at the church which was well attended and lasted about a half hour. The pastor who knew both of them presided. A private family service was held at the Rose Garden for the family while the ashes were scattered. Mrs. Z states none of the ashes were kept. Memorials were accepted to the church which used the monies to purchase Communion candle sticks. Mr. Z’s name is inscribed on a plaque in the church lounge denoting his ashes being present in the Rose Garden.

Although Mrs. Z remembers her husband’s cremation to have cost approximately $1500, she states financial considerations were not a concern or given any thought in the process of deciding body disposition. She felt that since her husband voiced no preference regarding body disposition, she needed what was comfortable for her. The interviewee has made her wish known that she also desires cremation. It is noted that cremation is a common practice in the church she and her husband attended. Mrs. Z states she finds “great peace in visiting the memorial setting”.

CASE STUDY #8

Deceased: RJG
Interviewee: Wife AMG

Date of Birth: March 5, 1933
Higginsville, Missouri

Date of Death: March 2, 1993
Parkville, Missouri

Race: Caucasian
Gender: Male
Religion: Lutheran

The interviewee is noted to be the second wife of RJG. She states she has little knowledge of his childhood years other than RJG was born the eighth child of a 15 child family. His father worked for the railroad while the mother was a homemaker. By the time Mrs. G became a part of Mr. G’s life, (they were married in 1989) the parents were deceased.

Mrs. G knows that her husband had a high school education and served in the Korean War. He was employed as a policeman with a local Sheriff’s department and as a highway maintenance supervisor with the State of Missouri.

Shortly after Mr and Mrs. G were married, Mr. G suffered a massive heart attack which resulted in the need for a heart transplant, which was performed in 1991. It was also at this time, December 5, 1991, that Mr. G was baptized in the Lutheran faith, and he attended church services with his wife as often as his medical condition would allow. Although the heart transplant was considered a success, unfortunately Mr. G went on to develop amyotrophic lateral sclerosis (ALS), which is more commonly known as Lou
Gehrig’s Disease.

The disease process of ALS moved rapidly for Mr. G. He became dependent on a feeding tube and lost the ability to speak. His wife was able to care for him at home. Mrs. G recounts that on the afternoon of March 2, 1993, she had errands to run. Her husband, who was usually not left alone at this point, indicated he would be fine for the hour or so she would be gone. With great difficulty, Mr. G was able to maneuver himself outside to the back yard where he first fired one gunshot in the air and the second one to his head. In this way, he alerted a neighbor who found him so his wife would be spared the discovery.

Mrs. G recalls her husband as “always smiling and always pleasant.” He exhibited a good outlook on life and tried to make life easier for others.

Although Mr. G had made no provisions for body disposition, his wife states he was not opposed to cremation. Mr. G indicates it was her desire for cremation based on the condition of the body as well as uncomfortable thoughts of a casket.

Mr. G was not embalmed, with no viewing. A memorial service was held at the church although the ashes were not present. Memorials were established to the church with the monies purchasing two trees for the Rose Garden and a stained glass window for the church lounge. The family held a private service for the scattering of the ashes in the church Rose Garden. Mr. G’s two children and grandchildren were present as well as his wife.

Mrs. G visits the Rose Garden area and helps to keep the area clean and tidy. She
notes she enjoys coming to the area for the peace and solitude it affords.
CASE STUDY #9

Deceased: HDH
Interviewee: Daughter LP

Date of Birth: July 7, 1928
Ithaca, Nebraska

Date of Death: August 2, 1994
Wahoo, Nebraska

Race: Caucasian
Gender: Male
Religion: Methodist

Mr. H was born in rural Ithaca, Nebraska on the family farm. He was the middle child of three brothers. His parents farmed their own land, but lost the farm during the Depression after which time they rented farm land. The family was raised in a strict Methodist environment where religion played a large part of family life. The interviewee states that family stories describe her father as a “troublemaker” who was subsequently “kicked out of school”.

Sometime around 1948-1950, Mr. H joined the Army and was sent overseas during the Korean War. During this time, Mr. H received a GED from the military and served as a communications clerk. He was discharged in 1952 and spent a year in the Dallas area before moving to Arizona for his asthma.

While in Arizona, Mr. H met and married his wife on December 9, 1961. His employment consisted of a telephone line repairman, truck driving and over the road truck driving. In 1963, Mr and Mrs. H returned to Nebraska where Mr. H continued his occupation as an over the road truck driver. In November 1970, Mr. H was injured in an accident where he sustained a shattered ankle. After this, his daughter related his health
and mental condition slowly declined. The ankle never healed properly and required many hospitalizations. In 1978 or 1979, Mr. and Mrs. H divorced. Mr. H retained custody of this then 15-year old daughter and worked in a small engine repair shop for employment. His ex-wife left the area and returned to Arizona. The daughter relates that she was raised in a home with minimal religious activity and that as an adult her father was not actively religious.

The interviewee states she and her father were very close and after she married and had a child, they lived within a few doors of each other. Mr. H was especially fond of this granddaughter and spent a great deal of time with her. The daughter describes the relationship as “wonderful and close.”

Always a heavy smoker, Mr. H had been seeing the local doctor for bronchitis, but more definitive testing in Omaha revealed lung cancer in July 1994. Mr. H survived an additional few weeks after the diagnosis.

It was Mr. H’s long standing verbal desire to be cremated. He always said he, “never wanted to be laid out.” As he had no life insurance coverage, he didn’t want the expense of a funeral to be left to his children. A private viewing was not held. A simple service was held at the Methodist church with both the ashes and pictures present. The minister presided over the service. Mr. H’s cremains were buried in an urn at the foot of his father’s grave in the Ithaca cemetery. A step-son manually dug the hole for the urn with a post hole digger. As a symbolic gesture, the family members that were present each threw a handful of dirt on top of the urn.
A grave marker is present. After the grave side service, a luncheon was held at the church.

Mr. H’s daughter remembers her father as a good man, a survivor, very strict, and respected.
BIBLIOGRAPHY


