



# THE FELLO GOOD

A growing home-funeral movement believes that families can benefit from tending to — and spending





# GOODNIGHT GOODBYE

g time with — the bodies of their deceased loved ones. By Maggie Jones / Illustration by Deanne Cheuk



## Heidi Boucher

loaded two big straw baskets into her Toyota Highlander. She always kept them packed, ready for death. Inside were a pair of leather work gloves and a hammer, a bunch of bed pads, a few adult diapers (dead bodies sometimes leak), Q-tips for cleaning ears, noses and mouths and for applying lipstick, cotton balls, disinfectant spray, a plastic zip bag of safety pins to help drape silk and other fabrics around a gurney or casket, a small screwdriver to tightly close a casket, latex gloves, a hairbrush and oils infused with rose, lavender and rosemary.

Boucher also had her black attaché case of paperwork on funeral planning, which included a few funeral-home price lists for cremation and other services, as well as the files of 20 or so clients who had already made plans for Boucher to help with their bodies after death. Among them was Susan L'Heureux, a 79-year-old wife, mother, grandmother, reading teacher at a community college, lover of nature, spontaneity and books. L'Heureux had died about an hour earlier in her home in Oakland, Calif., and Boucher was on her way to her.

Over the last few decades, Boucher has helped more than 100 families take care of loved ones' bodies in the hours and days after death. Some of their deaths were long expected, whether from cancer, multiple sclerosis or another chronic disease. But she also helps families with the sudden, inconceivable loss. The teenager who jumped from the Golden Gate Bridge. The man who shot himself. The children and adults killed in car and motorcycle accidents. The people who died of drug overdoses. They have been atheists, Christians, Buddhists, Jews.

Boucher, who describes herself as a home death-care guide, is in her mid-50s, with an earthy, hip style — dark hair piled loosely atop her head, a stack of gold bangles on her left wrist, silver hoop earrings, chunky black glasses. The oldest daughter of five and a mother of three

adult children, she has a maternal warmth and deep-set blue eyes that draw people to share their confidences. For the grieving, Boucher likens death care to walking into a pool, "to avoid the shock of jumping into the cold. Some people like jumping into the cold. But virtually everyone who has had a conventional funeral and later comes to me says that they wish they had more time."

Susan L'Heureux wanted her children and husband to have time. She had been living with amyotrophic lateral sclerosis, A.L.S., for a few years. Her legs stopped working. Next, her arms. Then her breathing became more difficult, and she had trouble swallowing.

She knew she wanted to be cremated. And though she typically had strong opinions, she left the funeral details up to her family. When we talked late last year, Susan was in her bedroom overlooking a golf course and a group of trees, including her favorite redwood. "I'm glad I'm not going to be whisked away and waxed up in a funeral home," she said. Her daughter, Suzanne, an art-history teacher and a gallery owner, had heard about Boucher from someone at her daughter's school. She had also watched a documentary on home funerals called "In the Parlor: The Final Goodbye," written, directed and produced by Boucher. (Boucher, who lives in Fair Oaks, Calif., is also an independent TV-and-film and production designer.) She was intrigued. In part it reminded her of home birth, which she experienced with her youngest child. Each seemed about "reclaiming the most fundamental aspects of life," she said.

Caring for her mother in death would be an extension of what Suzanne did during the last years of her mother's life. Her older brother, David, agreed. So did her father, Conrad, a thoughtful man

who favors plaid button-down shirts and keeps reading glasses perched on his almost bald head. A former priest, he had long been interested in Buddhism and open to creative rituals. When he was a religious-studies professor, his favorite class was "The Inner Journey in Myth, Bible and Literature," in which he had students keep personal journals and led them through guided imagery.

It was a Friday afternoon in late February when Boucher arrived at Conrad and Susan's apartment with a bunch of flowers, her baskets and a chest holding 25 pounds of dry ice. David and Suzanne were in the living room with Conrad, along with Suzanne's two children, Miles, 15, and Lila, 10. Everyone was tired but calm. After Boucher sat down, they told her about the last day of Susan's life, how she was surrounded by the family, how they put their hands on her as she took her last breaths.

Then the adults took Boucher back to the bedroom, where Susan lay in her bed under a blanket that David bought for her, imprinted with four large photos of Susan, Conrad, their children and grandchildren. Boucher approached her silently, touching one of her feet, as a way to connect to her. She asked everyone to gather washcloths and a couple of basins with warm water. When Boucher wondered if Susan had a favorite scent, Suzanne mentioned rose, and Boucher added rose oil to the water. Over the last year, Suzanne had regularly massaged her mother's face and temples with rose oil. It had become an aroma of mother-daughter love.

Then Boucher lit a candle and began to guide the family. For the sake of ease, they cut off Susan's shirt. Next, Boucher asked if everyone was O.K. if she pulled back the blanket, and as she did, she covered Susan's breasts and genitals with towels. Conrad dipped a washcloth into the warm water and washed down along one side of his wife's body. Suzanne, on the other side, put a washcloth to her face, along her neck, down her arm. All her life, Suzanne loved her mother's skin, the way it looked, the way it felt. Though she was grieving, touching and tending to her felt soothing. They dipped and washed and dipped back into the warm water again, before patting her skin dry.

In the months before his mother's death, David was unsure what his role would be after she died. He knew only that he wanted to be in the room with his mother and to support his sister and father. He had taken care of his mother a couple of weeks a month, flying up from Los Angeles, where he works as an editor at ESPN. Toward the end of her life, he was with her nearly full time. Though his father, his sister and home health aides had somewhat more physical intimacy with her body, he helped with most aspects of her care. As he stood at the bottom of the bed watching them wash her, David picked

SUSAN L'HEUREUX  
AT HOME  
AFTER HER DEATH  
IN FEBRUARY.







up his own cloth and began to press it along his mother's ankles and her feet.

That evening in the bedroom, Suzanne and her daughter, Lila, looked through Susan's closet for her final outfit. Lila picked a green button-up sweater and a pair of slacks that her grandmother liked. Boucher then showed Suzanne and Conrad how to gather the sleeves of the sweater and pull them up Susan's arms, as if dressing a small child. It was easier now than it would be in several hours after rigor mortis set in, stiffening her muscles and joints for hours, before they relaxed again. And it was also easier than it had been in the last weeks, when Susan's pain often grew intense. "Could you imagine trying to do this two days ago?" David said. "She would have pitched a fit."

David helped with her pants and slipped warm socks on his mother's feet. Suzanne brushed her hair. To prevent Susan's jaw from falling open, which happens as the muscles relax, Boucher and Suzanne placed her head on a pillow and tucked a rolled towel under her chin.

While the family took a break in the living room, Boucher went to the balcony with her ice chest. Using her hammer, she broke the dry ice into three-inch-thick chunks. She wrapped each chunk in a piece of bed pad and placed the packets along Susan's body, from her armpits down to her hips. She put some on her stomach and a small one under her head. Suzanne still wasn't sure how long to keep her home. Though Boucher's clients typically choose three days, for spiritual or religious reasons or because that's when they feel they'll be ready to part with the body, Suzanne thought that three days might be too "woo-woo." Regardless, the ice, along with the open windows, would keep her body cool and slow down its decomposition.

Later that night, Suzanne headed home with her family, while David slept in the guest room. Conrad got under a down comforter on a narrow wooden bed near Susan's, where he had slept for weeks. He had designed the bed and built it with his son-in-law, Tony, Suzanne's husband; it was just the height of Susan's hospital bed, allowing him to hold her hand at night. It was also narrow enough that he could tuck it away in the morning, leaving room for him, a hospice nurse or a home health aide to care for Susan.

When Conrad awoke the next morning, he went through his usual routine. He made coffee. He looked at his favorite news websites. He did it all quickly, anticipating that at any moment, Susan would call out to him. She would need him for breakfast, for his companionship. Instead, that morning there was silence, and then Conrad remembered she was gone.

**In the United States**, we have come to see death as an emergency. We call the doctors, the nurses, the police, the emergency workers, the funeral staff to take over for us. They hurry corpses from

hospital rooms or bedrooms into designated, chilled death spaces. They dig and fill the graves for us and drive our loved ones, alone, to the crematories. They turn on the furnace, lift the bodies, close the door.

There may be no other rite of passage around which we have become more passive. We carefully vet the doctors or midwives who will deliver our babies. We pore over options for wedding venues and officiants. But often we don't plan for death. So when it arrives, we take what's easily available. In a 2016 survey by the National Funeral Directors Association, 81 percent of respondents said they called only one funeral home before making their decision. If death practices reveal a culture's values, we choose convenience, outsourcing, an aversion to knowing and seeing too much.

box.) Finally, a group would carry your coffin on their shoulders to the backyard or the town cemetery and, after a small service, lower you into a newly dug hole in the ground. The whole process demanded work, attention, a reckoning.

That began to change during the Civil War. For the first time in the United States, men died en masse, far from family. Families who could afford to shipped the bodies back home. But the train trips were long — some railways began to refuse decomposing bodies in wood coffins — and families wanted their sons, brothers and husbands looking as preserved as possible, as Drew Gilpin Faust recounts in "This Republic of Suffering: Death and the American Civil War." Surgeons, undertakers and others began performing rudimentary embalming of soldiers using arsenic, zinc chloride or other ingredients. It was Pres-

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We used to live far closer to death. If you died before the turn of the 20th century, women from your family and your community would lay you on a table or a bed. They would wash you, dress you in simple clothes, comb your hair, clip a lock of it to wear in a necklace. As men dug your grave, family and friends would sit beside you, reciting prayers, singing, surrounding you with candles and flowers to help ward off the odor from your decomposing corpse, while the children came and went, unshielded from the inevitability of death and decay. And when it was time for your body to go, your family would wrap you in a shroud or a winding sheet, often made of wool or cashmere, and place you into a wood coffin, a six-sided burial box tapered at the feet and head. (The word "casket," in contrast, is now used in the funeral industry to refer to a four-sided burial

ident Abraham Lincoln's death, though, that introduced embalming to the general public. His embalmed body was on display in Washington for nearly a week and then traveled by train for two more weeks, making frequent stops for viewings, ending up in Springfield, Ill. Initially, observers noted that his face was remarkably lifelike. A few days in, as one New York editor wrote, Lincoln, who was re-embalmed multiple times during the journey, was a "ghastly shadow."

The funeral industry emerged over the following decades — faster in urban areas than in rural ones. In 1890, there were 9,891 funeral directors in the United States; 30 years later, the figure had more than doubled, despite the fact that the death rate had dropped substantially, as Gary Laderman, a professor of religion at Emory University, writes in "Rest in Peace: A



Cultural History of Death and Funeral Homes in 20th-Century America.”

By the 1930s, with increasing numbers of people dying in hospitals instead of homes, death became professionalized. Funeral-industry groups had lobbied state legislatures to create laws about who could prepare and bury bodies. And embalmed bodies, which funeral directors promoted as sanitary, medical and therefore necessary, became the centerpieces of funerals. Funeral directors, not families, became the new death experts.

Embalming was performed on a majority of corpses by the middle of the 20th century. Now, experts estimate, about 50 percent of dead bodies in the United States are embalmed (the funeral industry doesn’t publish statistics). During a roughly three-hour process, the

Finally, before fixing the hair, applying cosmetics and dressing the body in clothes chosen by family members or friends, he makes one more incision, this one in the lower abdomen. He inserts a tube attached to a trocar, a long, sharp surgical instrument, to puncture the intestines, the stomach, the lungs and the bladder and suction out fluids and gases, replacing them with a stronger mix of embalming fluids.

When Jessica Mitford wrote her 1963 best-selling investigation into the funeral industry, “The American Way of Death,” she was particularly critical of embalming and claimed that funeral directors were little more than swindlers, peddling products and services that people didn’t need and couldn’t afford. More than a decade later, the Federal Trade Commission held public hearings on opaque pricing and other

reality, a vast majority of people die of noncommunicable diseases, and in general, people are more contagious alive than dead.

A symbiotic relationship has developed between our cultural assumptions about what constitutes the “right” funeral and the funeral industry’s interests, notes Tanya Marsh, a professor at Wake Forest University School of Law, who specializes in funeral and cemetery law. “We were complicit in handing over control of this sphere of life to a profit-making industry. If we don’t like it, we can take it back.”

In some religions and cultures, community members do take control by tending to corpses themselves. Muslims wash and shroud dead bodies. Jewish law mandates that people show respect for the dead by washing them and not leaving them alone. In burial societies, known as *chevra kadisha*, Orthodox Jews — as well as increasing numbers of non-Orthodox — gather in groups, segregated by sex. They address the corpses by name, say prayers and ask forgiveness for any mistakes they may make, before bathing them, dressing them in white linen shrouds and staying with them until burial. In Japan, where the cremation rate is nearly 100 percent, a traditional Buddhist funeral ceremony includes placing drops of water on the lips of the dead before cleaning and dressing them. Later, the family gathers to witness the cremation and often picks up the remaining bone fragments, using long chopsticks to place them in an urn.

In a 2017 study of 57 cultures, selected as representative of societies around the world, Claire White, a religious-studies professor at California State University, Northridge, and her colleagues found that most of them included death rituals in which people viewed corpses. In 90 percent of those cultures, the families also had some physical contact with the bodies, including touching them, kissing them, washing them and dressing them. The authors of the study, published in *The Journal of Cognition and Culture*, argue that the prevalence of such rituals suggests that they have a therapeutic value, perhaps helping the living to grieve and accept that a person has died. And though not everyone has the option of viewing the dead — bodies go missing; accidents leave bodies burned beyond recognition — a qualitative 2010 study in *The British Medical Journal* found that when given a choice, many people wanted to see a dead loved one after a traumatic death. Many found it helpful because, among other reasons, it made the death real to them, or it allowed them to say goodbye, or they felt they owed it to the dead person.

After more than 40 years of directing funerals, Thomas Lynch, a poet and an essayist, believes that seeing the dead body “is the hardest and most helpful part” of accepting that a death is real. Lynch, whose most recent book is “*The Depositions: New and Selected Essays on Being and Ceasing to Be*,” writes that when

h the body as my mood swings from messiness to pain to joy to relief.”

embalmer washes the body with a disinfectant solution and massages and moves the limbs to loosen the stiffness from rigor mortis. He — most funeral directors are men, though the number of women is rising — “sets” the facial features. He closes the eyelids, sometimes using adhesive glue or a plastic eye cap, and the mouth, suturing or sewing the jaw to the gums.

Next, he cuts into the base of the throat, near the clavicle, to reach a carotid artery and inserts a small tube through which a machine that looks like an oversize blender pumps several gallons of embalming fluid into the body. The fluid, a tinted potion of formaldehyde and other chemicals (some funeral homes now offer a nonformaldehyde alternative), is designed to erase the natural pallor of death and plump up the skin. From a nearby vein, he is meanwhile draining the blood.

funeral-industry problems, with thousands of comments submitted by a frustrated and angry public. It wasn’t until 1984, over the objections of the funeral industry, that the F.T.C. created the Funeral Rule, which, among other things, requires funeral directors to give prices by phone and disclose that, aside from special exceptions in some states, embalming is not required by law.

Though the industry has improved from Mitford’s days, many funeral homes still promote embalming. They say it’s the choice that brings you peace of mind and preserves the body (it delays but doesn’t stop decomposition), while creating the “best possible appearance.” One funeral arranger told me she was trained at a large Los Angeles funeral home to tell customers that not embalming was illegal, “because of the danger to you and the danger to your family.” In



someone dies, “it is not them we fear seeing, it is them *dead*. It is the death.”

Few experiences are as intimate as witnessing the transition from a loved one’s last breaths to the final, unforgiving stillness of death. It’s a rite of passage that is no less monumental than birth. “Something profound has happened in this room,” notes Sallie Tisdale in “Advice for Future Corpses (and Those Who Love Them): A Practical Perspective on Death and Dying.” Be there for it, says Tisdale, who is a Zen Buddhist and a palliative-care nurse. Don’t cover the dead body immediately, and resist leaving the room. Slow down. Pay attention. Look.

**On Sunday afternoon**, two days after Susan L’Heureux died, her body still lay in her bedroom. A few dozen friends would soon arrive to visit with the family and, if they wished, to see Susan. Jazz played softly in the two-bedroom apartment, which Conrad and she had shared for a decade after moving from Ohio to be closer to their children. The décor was simple, unfussy. Conrad’s blue reading chair sat across from the couch and coffee table. Next to the galley kitchen, bottles of wine, seltzer, cheese and bread were spread across a dining table.

The night before, Miles, Suzanne’s 15-year-old son, told his mother that he felt his grandmother’s presence in the bedroom. He believed she knew they were with her. Everyone, including Tony, Suzanne’s husband, who was out of town the day Susan died, had gathered, some sitting on Conrad’s bed, others standing. Miles asked everyone to hold hands and, on the count of three, shout out to Susan in unison: “We love you!”

Lila, his younger sister, was initially more reluctant. She told her mother she felt nervous about going in the room. Suzanne reassured her that it was O.K. to feel that way. “That’s your Nana, who held you all your life. We don’t know what’s happening, if it’s her spirit here or not, but either way, that’s your Nana. There’s nothing to fear.” In Susan’s bedroom, Suzanne told Lila that she still liked to hold her mother’s hand, and she reached out to do so. Later, Lila placed her stuffed dog with a brown-and-white face and a blue collar on her grandmother’s stomach. Then she wrapped both of her hands around her nana’s hand.

David also found time to be with his mother. Early on Sunday before the visitation, he walked into her bedroom and wished her good morning. He told her she looked beautiful, and he meant it. In the last weeks of her life, Susan increasingly used a face mask attached to a machine to breathe. Occasionally she asked one of her children or Conrad to take it off (she could no longer move her hands). The mask was uncomfortable, and she wanted them to see her without it, though she could keep it off for only a minute or so. Now the equipment of illness — the breathing-assist machine, the mask — was

gone for good. In some ways, Susan looked more like herself in death than she had in the last weeks of life.

As the guests began arriving, some of them lingered in the living room and kitchen. Others asked almost immediately to see Susan.

“Absolutely,” David said to one couple, leading them down the hall. “Come on in.”

Suzanne kept the door barely open, hoping to signal that this was a quieter, more reverential space than the living room. Inside, a spray of purple flowers sat near Susan’s hands, her short nails painted red from a manicure the week before. Her skin was pallid, slightly yellow. She didn’t look alive, but neither did she look frightening. That morning, Suzanne had spritzed some of her mother’s favorite perfume on her, put red lipstick on her lips and used some to rouge her cheeks. On either side of her bed stood vases filled with hydrangeas, lilies, roses. The family had turned her dresser into a shrine. A cluster of bright orange roses shared the space with candles and cards Lila had made with crayon-drawn messages for her grandparents — one for Christmas, another in the shape of a heart for Valentine’s Day. Next to them stood three framed photos. One was of Susan’s own mother; another was of Susan when she was a baby; in the third, an elegant portrait of Susan as a young woman, she smiled with eyes both kind and wise.

As guests came and went, Suzanne spoke softly, telling them that they could take a flower from a vase and place it on her mother if they wished. Among the visitors was Susan’s friend Karen Bougae. For the past six months, she came to see Susan a couple of times a week, helping with her care. Bougae opened the shades in the morning for her, while at Susan’s request, Cat Stevens’s “Morning Has Broken” played in the background. Bougae then sat with her, as they talked about their children or what Susan wanted for breakfast.

But it wasn’t until the night before the visitation that Bougae decided she wanted to see Susan again. She was motivated in part because the last time she saw her, Susan was having a terrible day, struggling with pain. As hard as it might be to see her dead, Bougae decided it was worse if her final image of her friend was one of agony.

For Bougae, who is 76, Susan’s visitation would be more like the ones she remembered from her childhood in the Bronx in the late 1940s. Back then, families in her Irish-Catholic working-class community held wakes, washing and dressing bodies themselves. They laid out their loved one, on a dining table, in a casket, on a bed. The family and close friends then accompanied the body to church and to the burial. Now, in the room by herself, Bougae stood close to Susan and reached out to hold her hand. She told her she loved her. She said how much she meant to her. She looked at Susan, who lay still, already two days dead.

“You’re not answering me,” she said gently as the reality sank in. “You’re not answering me.” She stared at her friend, her skin loose from her bones, her body no longer warm. “You’re really gone, aren’t you?”

**Heidi Boucher was 10** when she saw her first dead body. It was the early 1970s, and her family was living in England. After learning that her French teacher had died, Boucher heard that her body was in the chapel across the street, and she begged her parents to let her go. Inside, sunlight streamed through windows overhead onto the lilac walls as Boucher walked up to the body. Her teacher was dressed in a white gown and draped with a white veil. She was not embalmed (the practice is far more common in the United States and Canada than anywhere else in the world). “She looked like a cross between Sleeping Beauty and Snow White,” Boucher remembers. “There was nothing scary about her. She looked more beautiful than she had when she was alive.”

A few years later, her family moved to California, where as a teenager she spent much of her time with her best friends — twins, whose mother was Nancy Jewel Poer, one of the early leaders of the American home-funeral movement. Along with Poer’s children, Boucher helped out by sanding caskets and dyeing silks to decorate them.

Poer, like many early home-funeral guides, came to the work for personal reasons, spurred by the experience of her own mother’s death. When her husband’s grandmother died in the early 1980s, Poer decided that she and her family would take care of her body at home, inviting people over for a vigil. Around the same time in Vermont, Lisa Carlson was struggling with how to handle the death of her husband, who had committed suicide. She had little money, and one funeral director told her it would cost \$700 for a cremation. After the autopsy, Carlson bought a plywood casket for \$60 and obtained a transit permit. Then she and a friend drove her husband in his pickup truck to the crematory. The bill was \$200. She, too, would go on to become a pioneer in family death care, writing a seminal book, “Caring for the Dead: Your Final Act of Love.”

By the late 1990s, Jerrigrace Lyons, who cared for a friend after she died, had joined the movement along with others, including Boucher. They helped families with home funerals and trained dozens of new guides.

Their goal isn’t to persuade every family to have a multiday vigil; it’s to support them as they choose the kind of goodbye they want. For some families, that’s as simple as asking a funeral home to wait several hours before picking up the body. “I rarely say I’ll be there right away, unless the family requests it,” says Amy Cunningham, a funeral director who owns her own funeral home in Brooklyn and helps with home funerals. Caitlin Doughty, a mortician, death rights activist and author of “Smoke Gets in Your Eyes: And Other





JERRIGRACE LYONS WITH HER MOTHER, ROSE LOWENTHAL, AFTER HER DEATH ON AUG. 31, 2017.

has more than 2,000 members — up from 500 five years ago. About 80 list themselves as home-funeral guides, death-care educators or death midwives, but there are more who aren't on the site. It's also unclear how many families have participated in home vigils, though several prominent women in the field told me they have helped with hundreds. And there are many more families who take part in some version of home death care, sometimes using tips from the N.H.F.A. and other websites on how to care for a body, build a casket or file a death certificate (in states that allow consumers to do so). With more people dying at home rather than in hospitals for the first time in over 50 years, interest in home funerals may grow.

Home-funeral guides tend to share the values of those who support the growing "death positive" movement, a term Doughty popularized, which encourages people to acknowledge that death is inevitable and to plan ahead for their — or their loved ones' — final days, as well as for what happens to their bodies after death and at their funerals. The home-funeral movement also bears similarity to home-birth and hospice practices. They arose (or in the case of home birth, rearose) in the 1960s as a result of concerns about overmedicalization — and a desire to return important life events to home and to families. Heather Massey, founder of In Loving Hands, a center for natural death-care education on Cape Cod, believes that rather than turning to funeral homes or even home-funeral guides, we should have teams of people within communities to help people become self-sufficient about death care. "It can be private, just you and a loved one," she says. "Not everyone has to be draped with silk scarves," she adds, referring to the home-funeral aesthetic of placing fabrics around caskets and gurneys. Look at your own heritage, she explains. Look for rituals that make meaning out of grief, out of death — out of what feels unspeakable.

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**I didn't know anything** about home funerals 16 years ago when I watched my father die. It was the summer of 2003, and after a long illness and three days in a coma, he took his last slow, jagged inhale in my parents' bedroom in Norwich, Vt. In the minutes after his death, my mother crossed his hands over the green fleece blanket that had kept him warm for days. My oldest brother recited Psalm 23 ("he makes me lay down in green pastures"). I touched

(Continued on Page 46)

Lessons From the Crematory," invites families to come to her Los Angeles funeral home and dress the unembalmed bodies, write notes to tuck into their caskets, place flowers around them, clip locks of hair. "Three days isn't something I'd necessarily do with my parents," Doughty says. "But I want the power to let things unfold without pressure. To be with the body as my mood swings

from messiness to pain to joy to relief and finally a willingness to let the person go on my own terms."

Unlike with birth doulas or midwives, there is no organization that certifies home-funeral guides, which means there's no way to know exactly how many there are. The nonprofit National Home Funeral Alliance, started nearly a decade ago to help educate the public, now



## Home Funerals

(Continued from Page 37)

his face, once so broad and handsome with commanding blue eyes.

"Go outside," my mother nudged me after a while. Take a walk, she said. "Look up at the Vermont sky that your father loved."

It was late August, and a bloom of stars spread across the dark. As I walked, I murmured, partly to myself, partly to my father, to the sky, to whatever might lie beyond.

My father had been in his mid-70s and suffering from a chronic disease. But death wasn't supposed to happen so soon, not that week. Not that week when my sister, his youngest daughter, was getting married. Not that week when his newest grandchild, my daughter, was less than 2 months old and I had deeply imagined the irreverent, playful relationship that would unfold between them. I felt desperate in so many ways, but most of all I was desperate for more time with him. A month. A week. Something.

When I returned from the short walk that night, I knew he'd still be there. No one in my family had called 911 or a funeral home. My older sister, a practitioner of Tibetan Buddhism, believes dead bodies should not be moved or touched for up to three days to allow the soul to transition out of the body. Not long before my father died, she had, with some trepidation, asked my mother if we could keep him at home for a while. My mom is Catholic but is open to different spiritual practices and not squeamish about bodies. She said yes, for one day.

Later that night, my mother got into her bed, which was pulled up next to the hospital bed where my father lay. Then, almost wordlessly, two of my other siblings and I gathered blankets, sleeping bags and pillows and spread out across my parents' bedroom floor, as we would have in elementary school to watch TV. My brain and body felt thick with numbness, disbelief. But that night I also felt a strange calm.

The next day there would be calls to make, an obituary to write, a small local funeral to plan, a bigger memorial service several weeks later in Louisville, Ky., where my parents lived most of the time. But for now, there was no rush. No strangers were intruding, not on us, not on his body. In the midst of the shock, we were wrapped in a mournful, private cocoon.

As my parents' bedroom grew still that night, I listened to the silence, to the painful absence of my father's breath. There would be no shortcut to mourning him in the coming months and years. But for now, and for the next 12 hours, time slowed for me. The presence of his body averted the cruelty of saying goodbye to all of him at once. As I lay under the blanket, with him just a few feet away, he was easing me toward a transition that I wasn't yet ready to bear.

**People who choose** at-home death care typically opt for cremation and green burials. Like home funerals, green burials closely mimic how we once handled death. No embalmed bodies or cremated remains are allowed in certified green cemeteries. Nor are metal caskets and grave vaults. And corpses must be buried in biodegradable materials — pine boxes, shrouds, wicker caskets. While there was only one dedicated green cemetery in the United States and Canada two decades ago, now there are more than 220, creating new competition for the conventional funeral industry.

But no change has been as threatening as cremation. In 1980, less than 10 percent of dead bodies in the United States were cremated. Last year that number reached 53 percent, and by 2035, the N.F.D.A. expects it to climb to 80 percent. The largest corporate funeral business, Service Corporation International, boasts about its strategy to presell cemetery spaces to people in their late 50s and early 60s, when, given the trends, the likelihood is that many of those same people will opt for cremation or other greener options by the time they die.

People prefer cremation for many reasons, including that funerals with cremation are about 40 percent less expensive than conventional ones, which typically cost just over \$9,000, in addition to grave and cemetery fees. Cremation is also somewhat environmentally kinder, though it releases greenhouse gases into the air.

For family funeral-home owners, most of whom are not getting rich, cremation cuts deeply into revenues. They've tried to compensate, in part, by selling personalization: legacy videos, memorial fingerprints of the dead stamped in stone, in stationery, in jewelry. Urns in the shape of hearts, angels and butterflies, as well as teddy bears, mallard ducks and cowboy boots, carved images on caskets, "MemorySafe Drawers" that tuck into caskets to hold letters, photos and other mementos for the dead.

The industry is more conservative, though, when it comes to families' taking personal control of their dead. "Most funeral homes are well intentioned, and they don't want to change because they sincerely believe they know better than we do about how to grieve," says Tanya Marsh, the law professor. In part, funeral homes and the public are hindered by laws from 100 years ago, when embalming and full-service funerals were central. That means that in most states, a young funeral director who doesn't want to include embalming in her business still has to go through training and do an apprenticeship. Many states also require all funeral homes to install expensive embalming facilities.

For consumers, some of the legal constraints can seem exasperating. Family members can drive their dead mother to her burial plot in California, but they can't in New York and Connecticut. By law, a funeral professional has to

do it. Also, in some states, only funeral directors can file a death certificate (which typically has to be done within 72 hours of death). In Nebraska and in New York, which Marsh says has the most extensive funeral and cemetery regulations in the country, funeral staff also must be present for a burial. And if a body has to cross state lines from Alabama to Mississippi for burial, it must be embalmed first. As Josh Slocum, head of the Funeral Consumers Alliance, a watchdog and educational group, and an author, with Lisa Carlson, of the book "Final Rights: Reclaiming the American Way of Death," says, "The funeral-industry lobbyists have a stronghold on legislation."

The industry also has taken on competitors, no matter how small. About a decade ago, Louisiana's state Board of Embalmers and Funeral Directors issued a cease-and-desist order to a group of Benedictine monks after they began making and selling cypress caskets to support the monastery. At the time, the caskets retailed for \$1,500 to \$2,000, less expensive than many others. The state board argued that only funeral directors are allowed to sell "funeral merchandise" in order "to protect" consumers. The monks sued. And in 2013, in a case that the industry fought all the way to the Supreme Court (the court refused to hear it), the monks won.

Around that same time, Pennsylvania's board of funeral directors filed two complaints against Daniel Wasserman, a rabbi in Pittsburgh who performed funerals according to Orthodox Jewish custom: bathing and dressing and helping bury the bodies of his congregants. The state claimed he violated the Funeral Director Law by conducting funerals without a license and threatened to sue. Similar state laws prevent home-funeral guides, unless they have a funeral director's license (and some do), from touching dead bodies for payment (many charge a consultation fee or accept contributions from families), lest it be construed as acting as a funeral director and practicing without a license.

In Wasserman's case, he filed his own lawsuit against the board before settling in 2012, when the board agreed to amend the law to say "clergy" could conduct "religious" burial services without a funeral director. It was too late, though, for the Rev. Dr. Lynn Acquafondata, a Unitarian Universalist minister, who in 2010 founded Final Journey Home, a home-funeral service in Pittsburgh. After the state board began an investigation of her work, she closed her business after her first funeral. Acquafondata, now a counselor specializing in grief in Rochester, N.Y., couldn't afford to take on the industry.

Even when the law isn't in the way, some funeral homes have their own policies that prohibit families from viewing or touching a body unless it's embalmed. At a group of North Carolina funeral homes, if your spouse has been dead for more than 24 hours, you cannot touch him or even be in the



same room with him, even though funeral homes typically keep bodies refrigerated. You can only see him through a glass window. "Timing and body conditions make it impractical," the website says, "for anyone to have safe direct physical contact with a deceased person that is NOT embalmed."

Hospitals, too, often have policies and practices that make it difficult for families to spend several hours or more with a dead body or prohibit them from taking their dead loved ones home. "They are so afraid of being sued," says Lee Webster, president of the education side of the Green Burial Council and past head of the National Home Funeral Alliance.

She talks to hospitals, hospice organizations, universities and other groups about families' rights and helps consumers push for new policies. Some hospitals do have special rooms where families can spend more time with their dead. But many families say they have felt rushed by the staff. Home-funeral guides sometimes recommend that families mention their religious beliefs in order to remain longer in the hospital room with the body, giving them space and time for rituals of their choice. Most families don't request it, though. Perhaps they don't want to be around death any longer than necessary. Often, they simply don't know they have rights. Or they are too grief-stricken to fight for them.

**On a July afternoon** in 2016, Heidi Boucher's oldest brother, Mark, took his three young daughters to the Makapu'u tide pools in Oahu, Hawaii. As the girls, between the ages of 6 and 12, looked at fish in an inner tide pool, Mark watched over them. Then, seemingly out of nowhere, a rogue wave rose up and crashed on them. It pulled the youngest, Mina, into its grip. Mark, a surfer and a strong swimmer, immediately leapt in. But another wave hit, sweeping Mark out, too. Lifeguards pulled Mina and Mark onto the beach. They were pronounced dead at a hospital.

When Boucher got the news, she took an early-morning flight to Honolulu. She was gutted, in shock. She also wanted to create the most meaningful funeral she could. Her sister-in-law deferred to Boucher's ideas about how to care for their bodies. But Boucher didn't have her baskets, and there was no house she could use to lay out and wash the bodies. She also didn't have a trusted funeral home, like the three she works with in California — whose embalmers will restitch a body or clean it up in other ways after a violent death, an autopsy or an organ donation, then return it to the family for a home funeral.

Her only option, she decided, was to pick up a Honolulu phone book and choose a funeral home that was family-owned. She told the funeral director that she was a death-care guide and that she needed a private room, where she could bathe and dress her brother and niece after they were returned from the coroner and where the family could gather for an intimate funeral service.

(They would hold memorial services in Oahu and California later.)

Though an embalmer typically cleans up a corpse, even if it's not being embalmed, before the family sees it, Boucher asked to see the bodies as soon as they arrived. In part she wanted to gauge how badly they were battered. But mostly, she was testing herself. She needed to be sure she could handle taking care of them.

As her brother and niece lay on two gurneys, she unzipped one body bag, then the other. She was terrified, but also relieved to see that Mark and Mina looked peaceful, not bruised and beaten. Then she took flowers that Mark's wife had picked earlier for Mark and Mina and placed them on their bodies.

The next day, Boucher and the embalmer washed and dressed them: Mina in a simple white dress, Mark in a white embroidered shirt he often wore and white linen pants. Boucher draped and pinned white cloth around them and over the gurneys. She lit the room with dozens of candles. Then she invited Mark's oldest daughter, who was 12, to come into the room. She wanted to help her aunt and be with her sister and father. Together, she and Boucher arranged white and pink roses, baby's breath, tiny flowers in the shape of stars and greenery in vases, before she led her mother into the room.

By that time, Boucher had already helped many other families with unexpected and particularly difficult deaths, including in 2015 after her neighbor Jane Lorand knocked on Boucher's front door one morning. Lorand's 28-year-old son, Danny, had long struggled with addiction to opioids and other drugs. Danny — auburn-headed, charismatic, a talented pianist — had been living with Lorand, renovating her house and working as a landscaper when, one morning, he disappeared. After Lorand finally learned he was at a nearby hotel, she rushed to him, fearing the worst. Fire trucks and police cars lined the parking lot. Emergency workers had broken down the hotel-room door and had just finished trying to resuscitate him when she arrived. They whisked him to the coroner's office before she could even see him.

Lorand felt as if she had descended into a deep hole filled with strangers — police officers, medical workers, coroner staff. All of them seemed to have more authority over her son's body than she did. She wasn't sure what to do next. She didn't belong to a church. She had been to dozens of funerals over the years, and even though everyone's grief was complicated and different, the funerals seemed more or less the same. People dressed in a certain way. They stood and sat at appropriate times. They appeared to keep their emotions largely in check.

She wanted Danny back home, in the house he loved. But she didn't know anything about home funerals. Then someone told her about Boucher, who lived a block away. Boucher called one of the funeral homes she works with regularly,

and together, Boucher and a staff member there (Lorand had talked about it with Boucher and decided she couldn't handle caring for Danny's body after the autopsy) bathed and dressed Danny and laid him out in a casket at the funeral home, before bringing him to Lorand's house.

When they first heard about her plans to bring Danny home, Lorand's adult children protested and said they would stay in a hotel. But once Danny was there, lying in a simple wood casket in Lorand's home library, they reconsidered. They stayed at the house, coming and going when they needed. They cried, lay on the couch, went outside to smoke and returned when they felt ready. Lorand's 6-month-old grandson crawled around on the carpet under the casket. Her son Jonathan was living in Zurich and couldn't get back right away, but by Skype, late at night, he could see his little brother again.

For two nights, as Danny lay in the library with large candles glowing, Lorand slept on the couch near him. Each morning she awoke around 4, and while everyone slept, she stayed there with Danny, just the two of them, as the sun rose.

For some parents, it is far harder to bring their children back home. In 1995, Elizabeth Knox's 7-year-old daughter, Alison, was riding in the front seat of her father's car when, after a minor car accident, the passenger airbag hit her like a sack of cement. After Knox arrived at the hospital, her daughter was pronounced brain-dead. For the next 12 hours, before doctors took her off life support, Knox stayed with Alison. When a friend mentioned Nancy Jewel Poer and her work, Knox latched onto the idea. "My whole goal from the moment I heard about the accident was to be by her side," she told me recently. "The thought of bringing her home meant I could be by her side longer."

But a staff member told Knox that the hospital would not release Alison to her. She could be picked up only by a funeral home. Knox had given birth to Alison, held her when she cried, chose what kinds of food she ate, what doctors she went to, where she attended school. The law said that as a parent, she had to provide for her daughter's health and care. In death, in the midst of crushing grief, Knox had far less control over her child's body.

While Knox waited at the hospital, a friend found a funeral home that agreed to pick up Alison's body and deliver her straight to Knox's house in Silver Spring, Md. When the funeral workers arrived, though Knox asked them not to, they zipped the body bag over Alison's face.

Back at home, Knox — who would later become a death-care educator herself — with the help of her mother, her sister and a close friend, gave Alison a sponge bath. They made a wreath of flowers for her head. They dressed her in a white cotton dress that Knox bought for her that summer. And over the next three days, some 200 relatives, teachers, classmates and friends arrived to see Alison lying in a pine casket on her bed, surrounded by

*(Continued on Page 49)*



Home Funerals  
(Continued from Page 47)

stuffed animals. Classmates brought butterflies and flowers molded out of beeswax. They brought seashells and wildflowers. They placed all the gifts for Alison inside her casket, to honor her and to say goodbye.

**On Monday, three** days after Susan L'Heureux's death and just hours before funeral-home staff members picked her up for cremation, Suzanne went to her bedroom. For most of the weekend, Suzanne had been caring for her body, helping her own children cope with her death, arranging flowers and talking with guests. Now she was alone with her mother. She pulled a blue upholstered chair next to the bed. Then she put her head on her mother's arm. For the first time since her death, Suzanne wept over her.

A few days later, after Fernwood Cemetery and Funeral Home received the disposition permit from the state, Conrad, David, Suzanne, Tony and their two children gathered in a small viewing room at the funeral home, behind wood and frosted glass sliding doors. Elevated on a gurney, Susan lay inside a cardboard casket opened to her waist (California law requires that bodies be cremated in flammable boxes). Suzanne placed red tulips on her mother. Though the family would hold a memorial service months later, this was the last time they would be with her body. Suzanne read aloud the poem "The Well of Grief," by David Whyte. Conrad read Maya Angelou's "When Great Trees Fall," choking up as he spoke the words "when great souls die." Next Miles pulled out his guitar. In the otherwise silent room, he began to play the Beatles' "Blackbird." No lyrics, just the sound of his fingers on the guitar strings in a final song for his grandmother.

A few minutes later, a member of Fernwood's funeral staff returned to the room, and Suzanne asked if he could leave the box open so her mother's face would remain exposed. He did, as he wheeled her back to the cremation room, the family following.

Suzanne had told her children they didn't have to watch the cremation; they could walk out of the room at any time or stay in the reception area. Though the rest of the building was serene, the cremation room was industrial, practical, not designed to soften reality. The floor was concrete. The two retorts, as cremation furnaces are called, looked like oversize refrigerators. Before the family entered the room, the machine had been turned on and now made a giant, whirring sound that filled the space. The temperature in the retort had reached about 1,700 degrees. The gas fire would create a wall of flames that, over a couple of hours, would reduce Susan's body to ashes and pieces of bone. A staff member would then sweep out the remains and place them on a tray before funneling them into what's known as a processor. (Though it's not legal in many states, occasionally people request that rather than having all the bone fragments pulverized, they keep some.) Finally, the ash would be poured into a box or urn for the family to keep or bury or scatter.

But first there was this: the last moments with Susan. Her body, still in the box on the gurney, lay directly in front of the retort. Around her, the family gathered in a semicircle. As a staff member opened the furnace door, Miles walked out with his father. Lila and David went next. Suzanne and Conrad stayed, their arms around each other. They watched for another minute as staff members began to lift Susan and the box into the machine. Only then did Suzanne and Conrad turn to leave. They had accompanied Susan into death as far as they could. ♦

KENKEN

Fill the grid with digits so as not to repeat a digit in any row or column, and so that the digits within each heavily outlined box will produce the target number shown, by using addition, subtraction, multiplication or division, as indicated in the box. A 5x5 grid will use the digits 1–5. A 7x7 grid will use 1–7.

60×			1–	
4–		2–	7+	
30×			15×	
2		2–		2÷
5+			5	

3÷		70×	2–		3–	
			1	2–		3÷
3–		3	4–		2–	
10+		7+		6–		120×
	15+		84×		2	
10+				1–	14×	
	7+					

Answers to puzzles of 12.15.19

DOING A DOUBLE TAKE

P	O	B	O	Y				S	N	I	P	E	R	S			M	A	D	A	M	
O	H	A	R	A	S			H	O	N	O	R	E	E			L	A	M	E	S	A
P	I	T	C	H	Y			U	P	G	R	A	D	E			P	I	T	C	H	Y
T	O	S	S		S	A	S	E						D	I	P	S		S	I	T	H
O	A	F				T	H	E	G	E	M	I	N	I			D	R	E			
P	R	O	T	E	A	M		K	A	R	A	T		P	R	O	T	E	A	M		
	T	R	E	A	T		P	I	N	E	L	O	G		E	N	T	R	Y			
			R	R	A	T	I	N	G		T	R	O	T	S	K	Y					
S	T	R	I	P	L	I	N	G						S	T	R	I	P	L	I	N	G
H	U	E				L	E	T		H	S	T		T	O	N		R	O	O		
E	N	E	W	S		R	O	S	E	P	E	T	A	L		E	L	A	T	E		
L	E	V	I	T	E	S		T	H	E	C	W		L	E	V	I	T	E	S		
F	R	E	R	E	S		G	E	E	W	H	I	Z		N	I	C	E	S	T		
			I	M	C	O	O	L			N	O	O	D	L	E						
H	I	D	E			N	A	M	E	S	A	K	E	S		N	U	M	B			
M	O	U	S	S	E	S		O	M	A	N	I		M	O	U	S	S	E	S		
M	U	D	T	I	R	E		S	O	C	A	L		A	L	G	E	B	R	A		
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B	O	X	E	R	S		P	I	R	A	T	I	C		B	O	X	E	R	S		
M	A	I	T	R	E		T	R	I	T	O	N	E		A	M	E	L	I	A		
I	T	S	S	A	D		S	E	A	L	E	G	S		Y	E	S	M	O	M		

KENKEN

1	3	2	5	4
5	1	4	3	2
4	5	3	2	1
3	2	1	4	5
2	4	5	1	3

7	3	1	6	2	4	5
4	5	7	1	3	6	2
2	6	5	4	1	7	3
1	2	3	7	4	5	6
5	4	2	3	6	1	7
3	1	6	5	7	2	4
6	7	4	2	5	3	1

PUNS AND ANAGRAMS

P	I	R	A	T	E	S		P	O	T	S	D	A	M
O	N	E	I	O	T	A		E	T	V	O	I	L	A
O	V	E	R	P	A	R		G	O	A	L	L	I	N
H	O	N		S	T	A	L	L	E	D		B	E	D
B	I	T	S		S	T	I	E	S		C	E	N	A
A	C	E	L	A		O	M	G		C	A	R	E	T
H	E	R	I	T	A	G	E		S	E	T	T	E	E
A	T	T	I	R	E		T	A	C	T	I	C	A	L
C	H	I	L	I		R	O	N		S	K	A	T	E
C	O	T	Y		R	E	N	D	S		E	S	T	A
O	R	T		M	O	V	E	S	O	N		S	E	P
S	E	E	P	A	G	E		O	R	I	G	I	N	S
T	A	R	D	I	E	R		M	E	L	I	N	D	A
S	U	S	A	N	N	E		E	L	E	G	I	S	T

SWITCHBACKS

		R		E		
I	C	E	T	R		A
N	E	T	S	Y		
	E	S	S	E	E	W
P	E	N	Y	A		
T	H	I	E	R		
					D	

WALLS

4	+	+	+	4	+	5
	3	2	+	2	2	
+	+	+	+	+	+	+
+	4	+	4	+	3	5
3	+	+	+	+	+	+
	2	3	3	+	+	

Answers to puzzle on Page 48

in your score.  
dictionary words in the beehive, feel free to include them  
torah, wahoo, worth. If you found other legitimate  
orator, rotator, rotor, tarot, tattoo, throw, tooth,  
arrowroot, gator, growth, harrow, horrah, horror,  
Warthog (3 points). Also: Agora, aorta, argot, arrow,  
SPELLING BEE





Photographed by Kathy Ryan at The New York Times on Jan. 16, 2015, at 2:47 p.m.

<b>Rivka Galchen</b>	<i>“The Case of the Angry Daughter,” Page 24</i>	Rivka Galchen is a fiction writer and journalist whose novel for children, “Rat Rule 79,” was published by Restless Books in September. She last wrote for the magazine about Stella Abrera, a principal dancer for the American Ballet Theater in New York.
<b>Danny Hakim</b>	<i>“‘I Think Everybody in the Country Ought to Be on Our Side,’” Page 38</i>	Danny Hakim is an investigative reporter for The New York Times. He was previously a European economics correspondent based in London, the bureau chief in Albany and Detroit and a reporter covering investing.
<b>Charles Homans</b>	<i>Screenland, Page 9</i>	Charles Homans is the politics editor for the magazine. He last wrote a Screenland column about Bob Dylan and the myth of boomer idealism.
<b>David Marchese</b>	<i>Talk, Page 13</i>	David Marchese is a staff writer and the Talk columnist for the magazine. Recently he interviewed Robert De Niro on redemption, Patti LuPone about being bullied on Broadway and Whoopi Goldberg about creative fulfillment.
<b>Mark Peterson</b>	<i>“‘I Think Everybody in the Country Ought to Be on Our Side,’” Page 38</i>	Mark Peterson is a photographer in New York who won the 2018 W. Eugene Smith Grant for his ongoing project about white supremacists in the United States. For the magazine, he most recently shot a cover photograph of an ICE protest.

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