Mortality salience and cemetery memorialization: An inquiry of thanatological concepts for pastoral care

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Abstract
The investigation focuses on two previously unrelated thanatological concepts that support pastoral care when facing the loss of a loved one to death: mortality salience and cemetery memorialization. Two research questions are explored: (a) What positive psychological structures from mortality salience buffer existential death anxiety? and (b) How may pastoral deathcare providers reframe modern cemetery memorialization practices to influence the outcomes of mortality salience among the bereaved? Findings from current literature discuss the priming of worldview defences, self-esteem, and nostalgia as important buffering mechanisms to strengthen psychosocial and spiritual well-being. To assist in the healthy adaptation of loss, the investigation examines the contemporary practices of cremation and permanent placement of dead human bodies and the interplay between mortality salience and cemetery memorialization within the death-avoidant context of deritualization. The investigation elucidates how deathcare practitioners may assuage grief and support active mourning among the bereaved.

Key words
pastoral care; grief and bereavement; mortality salience; cemetery memorialization; deritualization

Introduction
Pastoral caregivers serving in deathcare professions play a key role in building strong communities that support individuals and families who
are facing death, dying, and bereavement (Rumbold et al 2021). Yet, given the recent trend toward deritualization following the death of a loved one, caregivers are looking at more modern and effective ways to improve bereavement outcomes to support their communities in the adaptation of loss (Gibson 2016). Two previously unrelated concepts have emerged in the field of thanatology that provide new insights to aid deathcare practitioners in caring for the bereaved: mortality salience and cemetery memorialization. As such, the current investigation will explore two research questions to synthesize and advance these concepts for pastoral care. First, what positive psychological structures from mortality salience buffer existential death anxiety? Second, how may pastoral deathcare providers reframe modern cemetery memorialization practices to influence the outcomes of mortality salience among the bereaved? Before exploring these two contemporary themes of thanatology (i.e., mortality salience and cemetery memorialization), a brief history of the social and cultural considerations of deritualization is provided to contextualize the need for the current review of related literature. By exploring the interplay between mortality salience and cemetery memorialization, this article will demonstrate how deathcare professionals can expand their toolkit in serving the bereaved (Chapple et al 2017).

A brief history of deritualization

An ongoing practice in the United States toward the deritualization of death is contributing to potential distress among the bereaved (Gibson 2016). Deritualization broadly denotes “the growing trend of a public openness to revise, replace, minimize the significance of, and even eliminate or avoid

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1 Pastoral caregivers serving in professional deathcare ministries include a wide array of licensed and non-licensed practitioners, such as funeral directors, educators, coroners, embalmers, funeral assistants, administrative professionals, hearse drivers, family service counselors, cemetery personnel, crematory operators, and after-care/bereavement coordinators. Deathcare professionals play an important role in a community’s continuum of care by assisting client-families before a death has occurred (i.e., pre-need education and planning), when a death has occurred (i.e., at-need funeral and disposition services), and after a death has occurred (i.e., after-care grief support). From a broad non-clerical perspective, deathcare professionals serve an important pastoral function in their communities by combining compassionate care and professional expertise to support the bereaved in the integration of loss following the death of a loved one.
long-held funerary rituals to assist in the adaptation of loss” (Gibson & Louw 2018). As a growing number of bereaved people continue to choose cremation as the preferred mode of disposition over burial at a cemetery, traditional forms of memorialization and ceremonies are on the decline. In 2015, the cremation rate eclipsed the burial rate for the first time in the history of the United States (NFDA 2022). According to the report, the current national cremation rate is 59.3%, and the current burial rate is 35.7%, with the cremation trend expected to continue rising to 78.7% by 2040 (NFDA 2022). Though cremation itself is a meaningful ancient practice utilized by countries across the world to dispose of the dead, in the United States families are increasingly choosing to opt for a simple or direct cremation with minimal or no funeral ritual at all to support the bereaved in acute grief. Of the cremations performed in the United States in 2021, 41% of families chose a direct cremation of the deceased loved one, many without having any formal ceremonies for support; this contrasts with 35% of bereaved families who chose cremation with a memorial service, and 24% of families who chose a casketed funeral with a final viewing of the deceased before cremation (NFDA 2022). Given these recent trends, many deathcare professionals, clinicians, and pastors are growing concerned that families who do not utilize helpful funerary rituals following the death of a loved one may not receive adequate support for active mourning (Hoy 2013). What is not known in current research is the long-term effects of deritualization, as a product of a death avoidance culture. Will deritualization trends obstruct important psychological mechanisms needed for processes of grieving and restoration? What is becoming evident is that pastoral caregivers must learn more about the psychological structures that emerge as part of mortality salience and how to possibly harness these positive structures to reframe meaningful cemetery memorialization. By learning more about the relationship between mortality salience and permanent memorialization, pastoral caregivers serving as deathcare professionals may garner opportunities to revitalize how cemeteries can still serve an important role in bereavement

2 Many countries have prevalent and rising cremation rates, including (but not limited to): Japan (100%), Hong Kong (91.7%), South Korea (89.7%), Sweden (82.8%), United Kingdom (78.5%), Canada (74.6%), Germany (72.0%), Peru (65.2%), Spain (45.2%), and Italy (33.2%) (NFDA, 2022).
outcomes and human well-being, even families who choose cremation as a preferred mode of disposition.

**Mortality salience**

In deference to the first research question, the current article asks: what positive psychological structures from mortality salience buffer existential death anxiety? Thanatology, as an academic and applied discipline that studies how death, dying, and grief disrupts social and psychological order, has identified mortality salience (MS) as a unique human experience that generates a state of anxiety about one’s own mortality (Chapple et al 2017; Martens et al 2011; Gailliot et al 2008). Simply stated, MS is a concept that emerged out of Terror Management Theory (TMT) and describes the phenomenon of becoming aware that death is inevitable for all people (Gordillo et al 2017; Burke et al 2010). According to TMT, human awareness of life’s transience, historically referred to by the Latin phrase *memento mori*, can produce enormous distress and initially undermine basic psychological functioning (Routledge et al 2010). MS is a state of conscious awareness of one’s death, often associated with terror and existential threat (Greenberg, Sheldon, and Pyszczynski 1986). Decades of research have elucidated how MS affects biophysiological, psychological, and sociocultural aspects of functioning (Pyszczynski et al 2015).

Although early MS research focused predominantly on negative implications of death awareness, such as increased prejudice, aggression, and racism (Jonas et al 2002), more recent research demonstrates that feelings of anxiety surrounding one’s awareness of inevitable death kindle positive internal strategies and coping mechanisms that help manage the trauma of painful or difficult emotions among the bereaved (Prayag et al 2021). A consistent finding among recent MS research is that people may live with relative psychological equanimity even when acknowledging their own inevitable mortality by investing in positive psychological structures that mitigate the dread of death (Paul & Vasudevan 2021; Juhl et al 2010). A meta-analysis of MS has surfaced two defence mechanisms known to buffer death anxieties: (a) intensifying one’s worldview and (b) bolstering one’s self-esteem (Martens et al 2010; Jonas et al 2002).
Worldviews are a defence mechanism that can defend people who are thinking about their own mortality by providing a lens that gives the world a sense of stability and permanence. For example, a religious worldview provides one with a belief that a human soul transcends death. In this way, a worldview facilitates symbolic conceptions of the self not constrained by physical limitations of the self (Routledge et al 2010). Simply put, one’s worldview can assuage existential anxieties (Martens et al 2010; Jonas et al 2002).³

Recent findings in MS research distinguishes between two dynamics of worldview defences. In short, when people are reminded of their own death, they will naturally engage in both proximal and distal worldview-related defences (Huang & Qu 2021). Proximal defences occur immediately after a death reminder occurs to suppress, distract, or rationalize distressing thoughts out of one’s consciousness (Martens et al 2010). Distal defences push death thoughts even further away from consciousness by affirming transcendent beliefs and values to make one perceive life as meaningful and worthwhile (Martens et al 2010).⁴

Like worldview defences, self-esteem has also been identified as a mechanism that buffers the deleterious effects of death awareness (Huang & Qu 2021). A healthy self-esteem protects people from the psychological threat of death. Routledge et al. (2010) reported that although individuals

³ Though religious worldviews predictively offer solace that oneself will transcend physical death, there appears to be a paucity of research that investigates how a humanistic worldview could also assuage death anxieties. It is not clear in the research that just because one believes in an afterlife, that person's worldview is necessarily more effective than a secular or humanistic perspective. Further research is needed to determine if perhaps a humanistic worldview could buffer existential anxiety as well as a religious worldview by embracing a belief that since death simply brings a natural end to life, life's meaning, and value is predicated upon its frail and transitory nature. Moreover, research is warranted to explore how a humanistic worldview could foster inner peace and serenity by promoting the continuity of one's legacy and values through the lives of other loved ones (in contrast to a religious worldview's constructionist view of the immortality of one's soul).

⁴ One possible limit of worldview defenses was noted. Specifically, MS heightens death anxiety among people who lack feelings of meaning in life. Routledge and Juhl (2010) reported: “People who indicated that their lives were full of meaning did not respond to mortality salience with increased death anxiety. Individuals lacking this existential resource did evidence increased death anxiety after thoughts of death were primed” (p. 851). It is unknown how a maladaptive perception of meaning in life could negatively affect the outcomes of the worldview buffering structure within a state of MS.
with low self-esteem struggle with existential death awareness, individuals with high self-esteem “remain unscathed and unflappable.” MS research suggests that worldviews and self-esteem work together and appear to be closely related (Jonas et al 2002). Just as one may embrace a worldview that facilitates an enduring sense of self, one may also need to feel that they contribute to the advancement of their culture and are worthy of the self-transcendence their worldview affords (Routledge et al 2010).

In addition to worldview defences and self-esteem, MS can induce other positive effects too, such as decreasing utilitarian attitudes (Trémolière et al 2012) and increasing prosocial attitudes and behaviour (Jonas et al 2002). These findings and others have led theorists to formulate a mortality salient hypothesis. The mortality salient hypothesis posits that “if psychological structures buffer the consequences of mortality awareness, then experimentally heightening the awareness of death (mortality salience) will result in elevated levels of investment in or defence of these buffering structures” (Juhl et al 2010). In other words, if certain psychological mechanisms, such as worldview defences and self-esteem, provide protection from the anxieties of death awareness, then heightening or inducing death awareness may increase further investment in these positive structures. In support of the mortality salient hypothesis, one recent study demonstrated that when people receive a MS induction relative to those in a control group, those who become more death aware show greater commitment to romantic relationships, feelings of entitativity (i.e., in-group belongingness), belief that one’s tribe (i.e., one’s collective self) will continue to exist long into the future, and a belief in God or divine intervention (Juhl et al 2010). Apparently, when individuals are reminded that they are mortal and transient beings, they can prevent death cognition from turning into death anxiety by clinging to the relationships and beliefs that instil life with purpose and permanence (Juhl et al 2010). The MS hypothesis suggests that inducing death awareness has surprising benefits to support human well-being.

A key insight for pastoral care providers is to learn how MS is primed at different times for individuals who mourn the recent death of a loved one (Greenberg et al 1986). For example, any time the bereaved has occasion to reflect on their own death, such as viewing a dead body, making final arrangements for a loved one in a funeral home, or just walking in a
cemetery, MS may be induced, and death anxieties would naturally emerge (Gailliot et al 2008). However, given the positive psychological structures discussed above, pastors and other deathcare professionals may now have a compelling interest in learning how to create more supportive contexts to induce MS among the bereaved – especially given the recent trend of deritualization that minimizes opportunities for mortality to become salient. To this end, the current investigation will consider how modern cemetery memorialization, as a safe context to induce MS among the bereaved, may buffer death anxieties by imbuing life with meaning and significance.

**Cemetery memorialization**

In deference to the second research question, the current article asks: how may pastoral deathcare providers reframe modern cemetery memorialization practices to influence the outcomes of mortality salience among the bereaved? As deathcare practitioners better understand the dynamics of MS, and its potential for germinating positive buffering mechanisms such as worldview defences and self-esteem among the bereaved, consideration is warranted to see if new approaches to cemetery memorialization can elucidate MS pathways that may improve bereavement outcomes. Rumbold et al. (2021) conducted a study that explored current memorialization practices, including the relative potential to assuage human suffering when facing the death of a loved one. The research design combined qualitative methodology followed by in-depth interviews among eight professional service providers across Australia. The article highlighted the trends toward informal memorialization and the merging of physical and digital spaces as locations where transformation and the integration of loss can occur. In the study, a distinction was made between public and private forms of memorialization as evidence for the changing social environment surrounding death-related rituals. Traditional public forms of memorialization typically include committal services at a cemetery that are open to the community; private forms of memorialization include graveside services reserved just for immediate family members and the closest of friends. Rumbold et al. (2021) argued that despite the current shifts from public to private memorialization, the human need to memorialize remains unchanged and deathcare providers are expected to meet this
changing need. While the study acknowledged the limitation of drawing too wide-ranging conclusions from small selective samples, the evidence was compelling that memorialization facilitates human grieving and the adaptation of loss. This recent study made evident that memorialization is still important to support the search for meaning following a significant loss of a loved one to death. The study also provided a useful basis for deathcare providers to consider how memorialization goals align well with a community’s broader continuum of care, providing compassionate and constructive partnerships with other caregivers who support and improve bereavement outcomes.5

What is clear from the research is that to create MS opportunities for the bereaved at cemeteries today, pastoral caregivers need to encourage cemeterians to create more meaningful spaces for permanent placement. To combat deritualization, cemeterians must engage their communities to create favourable contexts for re-ritualization where caregivers can provide truly meaningful experiences for the bereaved to find comfort, meaning, and hope (Gibson & Louw 2018).6 Cemeterians can provide better support for the bereaved by further exploring non-traditional options for permanent placement, such as: (a) memorialization without formal ceremonies, (b) virtual or on-line memorization to connect families who are separated by geography, and (c) green memorialization that supports an improved ecology of death, including natural burial (without nonbiodegradable caskets and toxic embalming chemicals) and new technologies of human composting (Tekle 2016; Spade 2014). While these progressive ideas may appeal to some, memorialization will prove to be a challenge as the rising trend toward cremation perpetuates a belief that cemeteries are no longer needed, nor hold any lasting value when choosing cremation as a mode of

5 According to advocates of “the new science of bereavement,” the good news about grief is that it is not an overwhelming or an unending condition that must be worked through in some prescribed way (Bonanno 2009). In fact, empirical research has demonstrated that human beings are surprisingly resilient, even in cases of traumatic loss (Bonanno 2004). At the same time, the current review contends that there may be qualitative conditions that help the bereaved assuage grief and find greater meaning that are worth further study and analysis.

6 Re-ritualization has been operationalized as an intentional act of restoring and re-engaging in creative and meaningful ritual forms that give symbolic expression to significant thoughts and feelings of the bereaved within a social ethos that is no longer committed to a conventional or fixed approach to ritualization (Gibson & Louw, 2018).
final disposition. Given the increasing number of families who are opting 
for cremation, cemetery memorialization must also include meaningful 
disposition options specifically for cremated remains, such as spaces for 
scattering in nature, burial options with smaller footprints than traditional 
casket-size graves, above-ground mausoleum niches to protect or display 
urns, and even underground community ossuaries as an economical 
option for a special shared place of permanent placement. Final disposition 
at a cemetery may still play an important role in the search for meaning 
and the integration of loss into the lives of the bereaved. Given the many 
options available today, deathcare professionals must better connect with 
their client-families’ memorialization needs. Helping a family secure a 
permanent place for a loved one, whether buried in a casket, entombed in 
a mausoleum, scattered in a nature garden, or held in a cremation niche, 
may influence MS and foster opportunities for grief support and healing 
for the bereaved.

The current investigation of related literature suggests that there has 
been limited research into the long-term impact of funerary practices, 
including cemetery memorialization, on processes of grieving. Yet, one 
national study in Australia argued that bereaved families who do not use 
the professional services offered by funeral service practitioners report 
worse emotional functioning following the death of a loved one than those 
who do (Aoun et al 2019). Results from the Australian study indicated 
that funeral and cemetery service providers are the third most prevalent 
form of bereavement support, behind family and friends (Aoun et al 2019). 
This recent study supports the ongoing need for memorialization to be a 
significant psychosocial and even spiritual event for the bereaved. Pastoral 
caregivers may initiate MS among the bereaved by reshaping death rituals 
to include more meaningful methods for final disposition, including those 
who choose cremation for their deceased loved ones.7

7 To encourage cemetery memorialization, deathcare practitioners may need to educate 
bereaved families that cremation is not a mode of final disposition but provides much 
flexibility in the choices they must make following the death of a loved one. For 
example, instead of using the services of a cemetery immediately after a loved one has 
died, a bereaved family may feel the need to take one’s cremated remains home (or 
display in a special urn) to work through acute grief. Cremation also offers the bereaved 
an option to hold a celebration of life service at a later future date to accommodate 
busy schedules and coordinate travel for family and friends who live out-of-town. The
Discussion

Mortality salience
The current article combines two concepts to help pastoral caregivers assuage grief among the bereaved: mortality salience and cemetery memorialization. To summarize the initial findings of this investigation, MS research demonstrates that human beings have highly evolved cognitive capacities to aid in survival, including the capacity to live with relative psychological equanimity in the face of inescapable mortality (Vail et al. 2012; Juhl et al. 2010). A review of current literature suggests several ways MS can play a crucial role in bereavement outcomes:

- MS can motivate people to enhance their physical health and prioritize their goals.
- MS can help people live up to their worldview beliefs.
- MS can help build supportive relationships and encourage the development of charitable communities.
- MS can foster open-minded and growth-oriented behaviours (Vail et al. 2012).

Given these initial findings, the current review suggests that opportunities to evoke MS among the bereaved may encourage a search for meaning, order, and self-transcendence following the death of a loved one.

Cemetery memorialization
The current investigation further proposes that cemetery memorialization is a longstanding practice that, while on the decline, still holds meaningful opportunities to trigger helpful buffering mechanisms among the bereaved. While there is an apparent paucity of empirical studies that explore how cemetery memorialization assuages long-term grief, possible insights have emerged in the research of dark tourism. For example, Prayag et al. (2021) found that dark tourism destinations evoke MS and enable visitors to deal

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point is that bereaved families should be educated about the long-term advantages of memorialization in a cemetery and how permanent placement can occur at any point in the future should they choose cremation.
with grief by providing healing spaces to process, cope, and address the psychosocial effects of a known trauma. Dark tourism involves visiting places that are associated with significant deaths, such as the National September 11 Memorial and Museum (i.e., Ground Zero) in New York, Hiroshima and Nagasaki in Japan, and Auschwitz in Poland. In the same way, this review suggests that a cemetery gravesite for the bereaved may be analogous to a dark tourism site for a tourist. Just as locations for dark tourism trigger the helpful buffering mechanisms of MS, likewise, cemeteries may awaken MS and facilitate active mourning and restoration among the bereaved.

A serendipitous finding of nostalgia
The literature review uncovered an additional finding that advances the discussion for reframing cemetery memorialization as a helpful tool for deathcare practitioners. Prayag et al. (2021) reported that nostalgic feelings often emerge while visiting a site of dark tourism. For over 300 years, nostalgia was viewed as an unhealthy and dysfunctional emotion marked by loneliness and sadness (Reid et al 2021). However, current nostalgia research has uncovered a longstanding inferential error. The path from nostalgia to loneliness and sadness is not causal, but a mere correlated occurrence. This recent finding is serendipitous, given the re-emergence of interest in the concept of nostalgia. Though long associated as a damaging pathology, current research demonstrates that nostalgia, as a self-conscious, bittersweet, but predominantly positive sentimental longing for the past, has remarkable psychological strength, such as (a) bolstering one's self-concept (i.e., higher levels of self-esteem), (b) strengthening social connections (i.e., feelings of being loved), and (c) guarding against existential threats (i.e., sense of meaning in life) (Sedikides et al 2015; Juhl et al 2010). In the same way that a site of dark tourism induces nostalgia, the review considers if visiting a cemetery gravesite of a loved one (even repeatedly over time) may have the same effect.

Discomforting experiences often evoke nostalgic reverie, which can operate as a powerful coping mechanism (Reid et al 2021).\(^8\) Just as MS often

\(^8\) Seehusen et al. (2013) posits the dynamics of nostalgic reverie: “one remembers an event from one’s past – typically a fond, meaningful memory (e.g., childhood, close
triggers psychological mechanisms to buffer death anxiety, to nostalgize by visiting the cemetery gravesite of a loved one may also evoke a positive psychological buffering mechanism to assuage grief and aid in healing among the bereaved. Nostalgic reverie at a cemetery gravesite could thus be beneficial to bereaved persons as a long-term compensatory strategy to alleviate the negative impact of death of a loved one. Reid et al. (2021) explained that nostalgia may not only help the bereaved reflect on the death of a loved one with less distress, but nostalgia may also help the bereaved pursue a more constructive long-term trajectory for their lives. Nostalgia, as a serendipitous finding, has promising implications and practical significance for contemporary pastoral care that advocates for meaningful cemetery memorialization as an important concept in grief adaptation.

**Conclusion**

The current article explored two significant, yet previously unrelated concepts of thanatology, mortality salience and cemetery memorialization, to demonstrate how pastoral caregivers serving in roles as deathcare practitioners can better assist the bereaved to assuage grief and imbue life with meaning and continuing significance when facing the death of a loved one (Greenberg et al 1994; Rumbold et al 2021). To combat the current trend of deritualization that is contributing to potential distress through death avoidance and perceived cemetery irrelevance, the investigation found that making death salient and cemetery memorialization normative may evoke positive psychological mechanisms, such as worldview defences, self-esteem, and nostalgic reverie among the bereaved. Regardless of the final disposition method of a deceased human body (e.g., cremation or casket burial), to better support grieving communities, future research and practice is warranted to assist deathcare practitioners in connecting the bereaved with more meaningful and creative ritual forms (Gibson & Troyer 2017; Gibson & Louw 2018). In advancing the connection between mortality salience and cemetery memorialization, caregivers may improve bereavement outcomes among care-seekers by heralding a compelling relationship). One often reflects on the memory through rose-tinted glasses, misses that time or person, and may even long to return to the past. Consequently, one feels sentimental, most often happy, but with a tinge of longing” (2013:904).
and compassionate communal message: “Though the physicality of death destroys us, the idea of death saves us” (Yalom 2008).

**Bibliography**


