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Abstract

Families encounter some issues after the death of their loved one due to COVID-19. Therefore, this study aimed to explore the family's views on the death of their loved one due to COVID-19. This integrative review was conducted from May to Jan 2021. We searched PubMed, Google Scholar, Scopus, Web of Science, CINHAL, Magiran, and SID databases. Fifteen studies met the inclusion criteria. The results were classified into two categories, including before and after death. The issues raised before the death of the loved ones include no visit and absence at death time, fear of being infected with the COVID-19, death anxiety, failure to perform religious rites at death, and psychological problems. The after-death issues were related to funeral, burial, rituals, prolonged grieving, maladaptation, loneliness, and repeated mourning.

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Therefore, health policymakers should provide support before and after the death of loved ones for families.

Keywords

bereavement, COVID-19, death, dying, family members, grief

COVID-19 has affected many aspects of human beings, including economic, social, interpersonal, psychological, and cultural dimensions. The coronavirus is a global threat against human lives (Abdollahimohammad & Firouzkouhi, 2020; Lai et al., 2020).

Many people are at risk in the globe, and they have lost their loved ones with COVID-19. On the other hand, the sense of control and security has been exposed to instability during the COVID-19 pandemic. Differences in personality and cultures can lead to abnormal or complicated grief, which can have side effects for survivors. The COVID-19 pandemic has taken many lives and is still rampant. The mortality rate of the COVID-19 is increasing in the world. By February 2021, the number of affected cases globally has reached more than 100 million, with about 2.5 million death (Worldmeter, 2021).

In addition to families' death burdens, they do not allow for mourning naturally, venting their emotions, and expressing grief. However, they are also quarantined for a long time after their loved one's death and cannot be with other friends and relatives (Abdollahimohammad et al., 2016).

Lack of time for mourning and the evacuation of emotions may lead to overreaction in the future. The main feature of mourning is prolonged denial of the loss. In other words, unexpressed emotions complicate bereavement and resulting in psychological problems, including depression, anxiety, bipolar disorder, obsessive-compulsive disorder, sleep disorders, eating disorders, anger, guilt, and suicide (Sadock et al., 2017).

A funeral help mourners go through loss stages, including shock and denial, anger, bargaining, depression, and acceptance faster (Gruenwald & Gruenwald, 2003).

The COVID-19 pandemic has changed regular visits, communication, treatment follow up of the families with their patients. Besides, not performing the ordinary death rituals can increase feelings of isolation, loss, and despair in the bereaved (Firouzkouhi & Abdollahimohammad, 2021; Morris, Moment, et al., 2020).

Studies show that the COVID-19 pandemic has created a particular condition connected with the death of loved ones and the grief of families. It is necessary

to prepare an advanced care plan for the bereaved families on how to transient that period of life (Carr et al., 2020; McAfee et al., 2020).

The COVID-19 has devastated many people lives. It is also a challenge for bereaved ones, especially in losing loved ones and close relatives, and uncertainty for the epidemic's future (Goveas & Shear, 2020).

We conducted an integrative review to identify discrepancies in various studies regarding families' views on the death of loved ones due to COVID-19. The integrative review approach is particularly well-suited for reviewing a topic across diverse research designs and methodologies to provide a more comprehensive understanding of the phenomenon under study (Miech et al., 2018). Therefore, this study aimed to determine families' views regarding their loved ones who died due to COVID 19.

Study question: what is the current scientific evidence regarding families' view on the mourning of their loved ones' death due to COVID-19?

Methods

This integrative review study explores families' perceptions of the deaths of their loved ones during COVID-19. This type of review study collects and synthesizes the knowledge generated from the results of the previous studies (Firouzkouhi et al., 2021; Whittemore, 2005).

Based on the proposal and concepts of Whittemore and Knafl (2005), five stages were designed and performed included: Identification of the problem, Literature search, Evaluation of data, Analysis of data and Presentation (Whittemore, 2005). Besides, PICO- Patient or Problem, Intervention, Comparison or Control, and Outcome (Souza et al., 2010) strategy was utilized to direct the quest for logical examinations and locate the best logical proof for an integrative survey. The first criterion (Patient or Problem) was identifying the group to be studied, i.e., families who lost a loved one due to COVID-19. The second (Intervention) was analyzing the views of the families of deceased patients and evaluating their challenges. The third (Comparison) was not applicable for this study. The fourth (Outcomes) analyzes different aspects of family problems regarding death due to Covid-19.

The search strategy transpires in four steps, including (1) identification of a clinical problem, (2) formulation of a relevant and specific clinical question, (3) seek for scientific proof and (4) assessment of accessible proof. Therefore, we tend to follow the classification and analysis of the four parameters geared toward characteristic the matter.

The guiding question for the current integrative review was, "what is the current scientific evidence regarding families' view on the mourning of their loved ones' death due to COVID-19?" The eligible articles were analyzed according to the selection order. Two researchers analyzed the contents and

extracted the information. The selection process and criteria are described in Table 1 and Figure 1. This review was conducted from May to Jan 2021.

The inclusion criteria for sampling were original quantitative and qualitative, reviews, letters to editor, and perspectives English or Persian articles that published in national and international indexed scientific journals from December 2019 to March 2020 in the databases of PubMed, Google Scholar, Scopus, Web of Science, CINHAL, Magiran and SID. The Mesh keywords for searching were "Families, Views, Death and Dying, COVID-19, Coronavirus, Pandemic, Bereavement, Bereavement care, Palliative care, End-of-life care, Grief, COVID-19, and Family members." The MeSh Keywords with Boolean operators such as AND and OR were used for searching. Exclusion criteria were the publications in languages other than Persian and English.

Search strings used in PubMed based on the MeSH keywords:

(COVID 19 [MeSH Terms] AND Family views [MeSH Terms] [All Fileds]) AND Death [MeSH Terms] OR Bereavement [MeSH Terms] AND COVID 19 [MeSH Terms] AND Grief [MeSH Terms]).

This review was performed consistent with a standard protocol for systematic reviews that was supported the method manuals of the well-known reportage things for Systematic Reviews and Meta-Analyses (PRISMA). We initially found a total of 85 articles; in order to evaluate articles, the title and the abstract of each article were reviewed to confirm the paper's consistency with the research question. In case of any doubts regarding the inclusion or exclusion, the full-text article was reviewed. Thirty-eight were accessed in full-text, and finally, 15 articles were included for review and a synthesis matrix (Figure 1 summarizes study selection).

The collected data were organized in a synthesis matrix for analysis. The matrix is useful in grouping and comparing data, identifying thematic categories, and explaining the subject under study considerations. Finally, the generated knowledge was synthesized, along with describing the concepts and examining the limitations. To fully comply with this integrative review's ethical aspects, a thorough review of the databases was implemented to include all eligible articles. To avoid selection bias, two researchers independently conducted quality assessments, and if necessary, the differences were resolved through discussion with a third-party reviewer.

Results

In this review study, 15 articles were selected directly related to the families' view on mourning for their loved ones' death due to COVID-19. The 15 studies included in the review were drawn from five countries: the USA (3), United Kingdom (4), Sweden (1), Kashmir (1), Iran(2), Spain(2), Netherland(1) and Brazil (1). The standard feature of these countries is that most deaths of COVID-19 occurring in them, and families have faced various challenges due

Table 1. Summary of Studies Analyzed by Title, Year and Country of Publication, Design, Objective and Outcomes, 2020.	llyzed by Title, Year and C	Country of Publ	ication, Design, Objective and	l Outcomes, 2020.
Title	Authors (year), country	Design	Objective	Outcomes
Caring for Bereaved Family Members During the COVID-19 Pandemic: Before and After the Death of a Patient	Morris et al. (2020), United States	perspective	Caring for Bereaved Family Members During the COVID-19 Pandemic	All hospitals implement essential bereavement outreach, using pal- liative care tools and psychological strategies to prepare families for the death of their loved ones and to support them afterwards in the initial months of them bereavement.
COVID-19 brings a new urgency for advanced care planning: Implications of death education	McAfee et al. (2020), United States	REPORT	Deaths due to COVID-19, especially among older adults and people of color, have created an urgency for advanced care planning	Results include: (1) integrate death education into teacher prepara- tion programs, (2) incorporate death education in undergraduate curricula, (3) provide better edu- cation in death and dying to future health professionals, and (4) edu- crate the public
Death and dying during the pandemic	Yardley and Rolph (2020), UK	EDITORIALS	New expressions of humanity help dispel fear and pro- tect the mental health of bereaved families	Sharing experiences and listening to patients, their loved ones, and our colleagues will enable us to create new ways to help people know that every death is consciously witnessed; that each of those who diad marrened
Dying From COVID-19: Loneliness, End-of-Life Discussions, and Support for Patients and Their Families in Nursing Homes and Hospitals. A National Register Study	Strang et al. (2020), Sweden	Descriptive study	End-of-life (EOL) discussions were offered and to what degree patients were alone at the time of death when dying from coronavirus disease 2019 (COVID-19),	ID-19 sibility and th neone le soci tences milies.
				(continued)

Table 1. Continued.				
Title	Authors (year), country	Design	Objective	Outcomes
Dying, Death and Mourning amid COVID-19 Pandemic in Kashmir: A Qualitative Study	Hamid and Jahangir (2020), Kashmir	Qualitative Study	The impact of COVID-19 pandemic on dying, death and mourning in Kashmir	Death and mourning in the COVID- 19 pandemic emerged as well- known themes in the lives of countless individuals, families, groups, and communities in
Coronavirus Pandemic a Factor in Delayed Mourning in Survivors	Javadi and Sajadian (2020), Iran	Letter to editor	Problems of mourning in the survivors	diverse contexts The emphasis is on supporting the family to have proper mourning offers the continent database
Acompaniment in Grief. Times of Coronavirus.	Bermejo (2020), Spain	Letter to editor	Reflection on grief, the loss of a loved one, and the way of accompanying those who experience this suffering is quite scarce	Health professionals sufficiently trained in psychology, particularly in counselling, will help prevent complications and pathological grief if they accompany healthy processes at the end of the lives of loved ones, to encourage possible
Acute grief after deaths due to COVID-19, natural causes and unnatural causes: An empirical comparison	Eisma et al. (2020), the Netherlands	An empirical comparison	Determine acute grief is a strong predictor of future pathological grief, we compared grief levels among people recently bereaved due to COVID- 19, natural, and unnatural causes	communication COVID-19 bereavement yielded higher symptom levels of pro- longed grief disorder PGD and persistent complex bereavement disorder PCBD than natural bereavement (but not unnatural bereavement).
				(continued)

6

Table 1. Continued.				
Title	Authors (year), country	Design	Objective	Outcomes
Bereavement in the Time of Coronavirus: Unprecedented Challenges Demand Novel Interventions	Carr (2020), United States	review	Determine challenges and novel interventions in bereavement in the time of coronavirus	The erosion compounds COVID- related deaths of coping resources like social support, contempora- neous stressors including social isolation, financial pre charity, uncertainty about the future, lack of routine, and the loss of face-to- face mourning rituals that provide a sense of community and Unlift.
Bereavement in Times of COVID-19: A Review and Theoretical Framework	Stroebe and Schut (2020), the Netherlands	Review	A review of the literature on adaptation to bereavement during the COVID-19 pandemic	Narrative synthesis showed that knowledge was based mainly on expert assessments of prior bereavement research and pro- fessional experience; there is so far the absence of empirical evidence linking features of COVID-19 bereavement
Fear, Loss, Social Isolation, and Incomplete Grief Due to COVID-19: A Recipe for a Psychiatric Pandemic	Mortazavi et al. (2020), Iran	review	Determine fear, loss, social isolation, and incomplete grief due to COVID-19	suctantiants of negatin outcomes. communities and mental health professionals should be prepared to face an upcoming wave of unresolved bereavement and depression, and PTSD due to the complicated grief and prolonged bereavement grief factder.
The Dead with No Wake, Grieving with No Closure: Illness and Death in the Days of Coronavirus in Spain	Fernández and González- González (2020), Spain	Critical Discourse Analysis	investigates the situation and the social and cultural impact it has provoked	Grief in solitude has become widespread and all the more fundamental in a society that values social support from close friends and family members.
				(continued)

Title	Authors (year), country	Design	Objective	Outcomes
How do Funeral Practices Impact Bereaved Relatives' Mental Health,	Burrell and Selman (2020), UK	rapid review synthesizing	Survey the effect of funeral practices on bereaved rel-	the benefit of after-death rituals, including funerals, depends on
Grief and bereavement? A Mixed Methods Review with Implications			atives' mental health and bereavement outcomes	the the ability of the bereaved to shape those rituals and say
for COVID-19				goodbye in a way that is
				meaningful for them
Supporting Adults Bereaved Through	Mayland et al. (2020), UK	Review	review and synthesize learn-	affects the ability for an individual to
COVID-19: A Rapid Review of the			ing from previous litera-	connect with the deceased both
Impact of Previous Pandemics on			ture focused on the impact	before and after the death,
Grief and Bereavement			on grief and bereavement	potentially increasing the risk of
			during other infectious	complicated grief
			diseases outbreaks	
The effect of suppressing funeral	Cardoso et al. (2020),	Qualitative	to understand the meanings	Unexpected, frightening, and
rituals during the COVID-19	Brazil	research	individuals who experi-	invisible: death closes its siege,
pandemic on bereaved families			enced the loss of loved	Experiencing losses: there is no
			ones in the context of the	time to say goodbye, there is no
			COVID-19 pandemic	closure, the memory of the last
				hug: strategies to minimize
				suffering

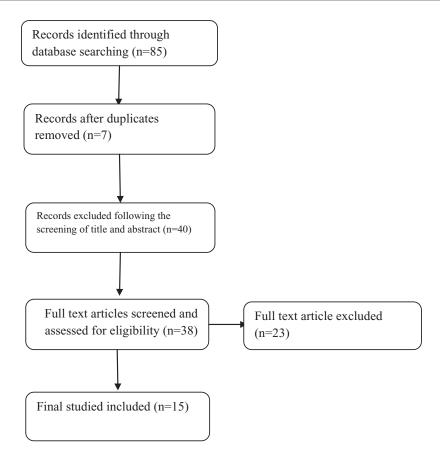


Figure 1. The Process of Selecting Articles.

to the loss of their loved ones. The study designs included quantitative (2), Descriptive study

(1), qualitative (1) Letter to editor (5), and review (6) approaches.

Table 1 shows the selected studies by title, year and country, type of study, the purpose of the study, and results. The analysis of articles revealed two categories, including before and after death (Table 1).

Before-Death

Ten studies emphasized the need for families to implement certain conditions and tips before the death of their loved one due to Covid-19. Many factors were considered to affect the later stages of the patient's death and the family's adaptation to it. The issues raised in this period were unable to meet with loved ones before death, unable to be present at the patient's bedside due to hospital conditions and regulations, and fear to be infected with the COVID-19, fear of death of oneself and others, death anxiety, failure to perform religious rites at death, and psychological problems due to quarantine and the refusal to visit the patient during the hospitalization (Bermejo, 2020; Burrell & Selman, 2020; Cardoso et al., 2020; Carr et al., 2020; Fernández & González-González, 2020; Hamid & Jahangir, 2020; Mayland et al., 2020; Morris, Moment, et al., 2020; Mortazavi et al., 2020; Strang et al., 2020; Yardley & Rolph, 2020).

After-Death

After-death issues might be affected by before death conditions such as care for patients and families during hospitalization. A well-designed care plan beforeand after death prevent prolonged grieving. If the patient's death and burial conditions are well maintained, it will be easier for the family to accept the patient's death and encounter less psychological issues. Therefore, postmortem or after death conditions such as holding burial and mourning ceremonies and customs affect the families' grieving. In this regard, 12 articles emphasized the post-mortem proceedings. The after-death issues were failure to hold a funeral for the loved one, no permission to visit the dead before burial, not performing religious services for the deceased, and restrictions to approach the dead during the funeral, administrative and national restrictions for holding the mourning ceremonies, prolonged grieving, maladaptation, loneliness, and repeated mourning (Burrell & Selman, 2020; Cardoso et al., 2020; Carr et al., 2020; Eisma et al., 2021; Fernández & González-González, 2020; Hamid & Jahangir, 2020; Javadi & Sajadian, 2020; Mayland et al., 2020; McAfee et al., 2020; Morris, Moment, et al., 2020; Mortazavi et al., 2020; Strang et al., 2020; Yardley & Rolph, 2020).

Discussion

To answer the study question, "what is the current scientific evidence regarding families' view on the mourning of their loved ones' death due to COVID 19?" The study results were classified into two categories: before death and after death.

One of the results of this study is related to the before-death of the patients. Its subcategories were missing the last visit and not being present at the patient's bedside, not performing religious rites at the patient's bedside, fear of death of oneself and others, anxiety about the news of death, quarantine rules, and not being allowed to see the body. The hospital doors are closed to family and friends to meet the patient with COVID-19. The family is always anxious to hear the news of their loved one's death, which causes them great anxiety and makes them unable to accept the patient's death and face prolonged and

abnormal grieving. Performing religious ceremonies, attending at the patient's bedside at the time of death has been impossible for COVID-19 patients (Ahaddour et al., 2017), which has increased grief in families and has had severe negative consequences for them (Otani et al., 2017; Romero et al., 2014). The families experience severe, long, and abnormal grief and worry when they cannot visit their loved ones before death or being with them at death time (Breen et al., 2018). Many patients die alone without the presence of families due to the limitations of the Covid-19 pandemic (Wakam et al., 2020). Family members are rarely allowed to say goodbye to their patients. The families have experienced some issues, including the experience of sudden death, death alone, the incompletion of death rites, no last family visit before death, and family dissatisfaction with the circumstances of the death (Eisma et al., 2020; Wallace et al., 2020). The results also showed that families were dissatisfied and unaccepted of their loved ones' death, even informing them about the patient's condition by phone or video. Besides, due to many deceased, the funeral procession was performed without the accompaniment of relatives, friends, and families or done virtually, which caused the psychological problem in the families, and remained a bitter memory in their mind (Fuller et al., 2021).

Post-mortem events is another outcome of the study that families face. Families who are not mentally and emotionally prepared for death do not experience positive results in the quality of life after their loved one's death. Family members may blame themselves or others for the death of a loved one or feel intensely guilty about not being present when their loved one dies.

Performing religious rites at or after death is necessary to calm the dead's souls and their families. Religious rites make death acceptance easier and make the suffering of losing loved ones more bearable. Practising death rituals in a pandemic environment allows people to express their feelings and adapt more quickly to the death of loved ones (Fernández & González-González, 2020; Mortazavi et al., 2020).

Many bereaved people may experience prolonged grief after the death of their loved one due to Covid-19. Public programs and customs, such as funerals and mourning ceremonies, which usually bring relief after death, are not easily performed, and bereaved people cannot communicate with others or participate in the ceremony due to social distance and quarantine guidelines (Morris, Nayak, et al., 2020).

The mourning stage is not individually at all. Every person is affected by the loss of a loved one. Social rituals are also a set of symbolic activities held to reconstruct reality. When a loved one is lost, the family seems to be in a new world. Therefore, these experiences are unfamiliar to the family. Social rituals help to adapt to misery and shorten the process (Yu, 2020). Also, observing and

touching the deceased for the last time before burial can help accept death (Hasanpour, 2020).

Limitations

One of the limitations of this study was the inclusion of studies in English and Persian only. The search was performed on limited databases. Most of the articles reviewed did not contain much information because the short text and original articles were also limited.

Conclusion

In the COVID-19 pandemic, a small number of hospitals and health care providers offer funeral and burial conditions for all families of deceased patients. Most medical systems cannot provide mourning and counselling services to alleviate the suffering of the deceased's families. Therefore, it is recommended to make programs such as meeting with the dying patient through the glass and seeing the corpse after death in safe conditions through the hospital or burial center to prepare for the acceptance of families' death and mourning in the early months after death. Besides, during the COVID-19 pandemic, alternative methods should be used for funeral and mourning ceremonies tailored to cultural and religious conditions. Religious missionaries explain the new conditions to families and provide the conditions for change. Providing support, respect, and recognition of cultural rituals are useful for bereaved families. People need to share grief, even if they are not able to gather together. Family members can support each other and friends and mental health professionals, e.g., grief counsellors or clergy. Therefore, bereaved families should share their feeling and emotions virtually using smartphone, text, email, and video chat.

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