



## Fire and fear: Rapid cremations in the Philippines amidst COVID-19

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The Philippines is among the countries worst hit by COVID-19, with 422,915 reported cases and 8,215 deaths as of November [1]. With no mass testing procedures in place, these numbers are severe underestimates. To prevent the spread, domestic regulations in the Philippines have called for expeditious cremations of confirmed or suspected COVID-19 victims within 12 hours postmortem; burial is permissible but less preferred in order to accommodate Islamic funeral laws or areas where no crematoria are present [2–6]. Moreover, many funeral homes are pushing for cremating bodies even when COVID-19 is unconfirmed or not suspected out of an abundance of caution. Following government guidelines, crematoria are rapidly processing cremations even when contrary to traditions of whole-body interment in the Philippines [7].

Long-standing myths regarding the transmissibility of diseases and miasma from dead bodies prompt sanitation regulations amid infectious diseases. Save for hemorrhagic fevers and cholera, as well as improper handling of lungs and body fluids during autopsy without standard personal protective equipment (PPE), dead bodies are generally not infectious nor transmit disease. Although knowledge of SARS-CoV-2 is rapidly evolving, the potential risk of virus transmission from the dead to the living is considered low, especially when cadavers are handled using standard PPE or when physical contact is minimized [8–16]. To date, there has been no documented case of viral transmission from a corpse anywhere in the world (*cf.* [17]). Strict protocols that enforce immediate and mandatory cremation in a country where burning the dead remains largely taboo aggravate people and disrupt the grieving process of the bereaved. By investigating how these regulations relate to historical and ethnographic contexts about managing lives and death, combined insights from forensic science and cultural anthropology can be used in recommending possibilities for honoring the dead in culturally sensitive ways even during these turbulent times.

### 1. Interment over cremation

While archaeological findings on pre-colonial cremation practice exist [18,19], there is no contemporary ethnographic evidence for the practice of cremation among Indigenous groups in the Philippines, but mummification and cave and jar burials are well-documented [20,21]. Three centuries of Spanish colonization (1521–1898) have deeply embedded among Filipinos the Christian belief in the sacredness of the human body as a receptacle of the holy spirit. Cremation was also largely banned in 19th century Europe when used as an “act of defiance” by the irreligious and protesters against Christian belief in the resurrection [[22]:261]. Catholic norms transported by Spanish colonizers to the Philippines blended with rituals for honoring the dead, and cremation arguably came to be feared.

Catholic practices were already deeply entrenched in daily life in the Philippines when the country was handed over by Spain to the U.S. in 1898 under the Treaty of Paris. In 1917, under the Code of Canon Law, the Catholic Church iterated its recommendation to forbid cremation, except during times of disasters or plagues when the intermediate disposition of bodies is needed. In 1963, with instructions from the Vatican, the Catholic ban on cremation was finally lifted globally. The Catholic Bishops Conference of the Philippines has adopted guidelines on cremation. These guidelines include recommendations on holding the funeral mass and rites of the final commendation and committal. According to these guidelines, cremated remains must be buried or kept at a columbarium and not scattered. The urn containing remains must also not be kept at home. Despite church acceptance of cremation and its relatively cheaper cost, interment is the commonly preferred burial practice among Filipinos, as established, for example, in a recent survey conducted in Bicol among aging adults [23]. Usual funerary rites often include holding a wake in the residence of the deceased, with the bereaved hosting novenas, nightly prayers, and offering mass for the dead for about three days, concluding with inhumation at a cemetery.

### 2. Colonial sanitation regimes

Impulsive measures seeking contagious disease containment and the aversion to cremation in the Philippines can be traced back to sanitary regimes imposed by the U.S. colonial government in the Philippines at the turn of the 20th century. Historian Reynaldo Iletto [24] argues that the 1902–1904 cholera epidemic must be understood within the context of the 1891–1902 war of resistance in the Philippines. According to him, the management of cholera and regulations about sanitation “assimilated into the universal history of medical progress, torn from its original

moorings in a colonial war and pacification campaign” [[24]:126]. Facing the cholera epidemic in March 1902, the U.S. colonial government immediately imposed protocols that provoked hostility and stirred apprehension, anger, and fear among Filipinos, rendering sanitation regulations (even if well-intentioned) ineffective. Authorities recorded 166,252 cases, with a death toll reaching 104,461, during the epidemic that lasted until March 8, 1904, but “[r]eliable observers are of the opinion that at least one additional case occurred for each one that found its way into the official records” [[25]:16–17].

Among the first directives of the U.S. colonial administration was to burn houses to the ground beginning with the entire Farola slums district in Manila, the focus of the infection, which had over 400 nipa huts. All over the Philippines, the burning of homes would occasionally spiral out of control, such as in Batangas, where the planned burning of one house led to the burning of 81 others, or in Dagupan, Pangasinan, when the entire town was almost accidentally burned [26]. Detention centers for the sick were also built. Angered by the burning of houses and fearing detention, Filipinos hid sick relatives and sought refuge elsewhere. Ordinance about the management of infected bodies dictated that dead bodies be interred in hermetically sealed metallic coffins. The Board of Health at that time was to take absolute control of infected bodies through burial or cremation to manage bodies that could not be interred following the strict ordinance. Unable to afford sealed coffins and afraid of cremation, Filipinos preferred to dispose of their departed by throwing them into the river or burying them within the grounds of their homes. American regulations to manage the epidemic refused to take account of socialities surrounding death and grieving as it hammered the point that colonized bodies and their homes are hopelessly infected.

Today, people use war as a metaphor for describing the turbulence brought by COVID-19. The cholera epidemic in the Philippines during the early years of American colonization unfolded as a literal war as newly colonized Filipinos struggled against both armed conflict and disease. In this actual war, mass cremation of the dead was a weapon of subjugation that intertwined with America’s pacification campaign in the islands. Archives from 1902 in Nabua, Camarines Sur document the arrival of cholera, and those who died were brought to the cemetery for cremation as this was the command of the Americans [[27]:51]. In the same year, Nabua was divided into 12 districts and an American-appointed Justice of Peace was installed, which meant that reorganization under the supervision of Americans was well underway amid the epidemic.

Only two years before the epidemic, residents in Nabua were evacuating their homes as a way of resisting the American arrival. Americans lit up farms and villages as residents fled [[28]:24]. In a nearby town, meanwhile, archives document the “macabre operation” of mass cremations held at night [[29]:108]. In this period of epidemic that folded into war, fire and burning were powerful symbols used to signify victory or resistance. Given the evidence in the historical record about quarantine and sanitary regimes during the American period, it would not be amiss to state that protocols that included the burning of property and bodies during a time of intense pacification worked to intimidate people to submission. What better way to quell dissent than to impose upon traditions, including those about rituals concerning death, grieving, and honoring the departed?

### 3. Cremations amidst COVID-19

The careless and callous sanitary protocols in the Philippine colonial past reverberate in cremation protocols during the COVID-19 pandemic under President Rodrigo Duterte’s regime set in a context of a war on drugs (see [30]). In July 2020, Bureau of

Corrections (BuCor) officials announced the sudden deaths due to COVID-19 of nine high-profile inmates housed in the most tightly secured maximum security compound at the New Bilibid Prison complex. Citing COVID-19 mandates, the deceased were immediately cremated in less than 12 hours postmortem without informing the next-of-kin or performing any autopsies. Pressed for more information, the BuCor refused to divulge any details regarding the circumstances around these cases such as the health records leading up to these deaths or any COVID-19 testing results. One of the nine deaths, Jaybee Sebastian, was a key witness against embattled Senator Leila de Lima who is under trumped-up drug charges and has been a vocal critic of the Duterte administration. Photographs of the supposed remains of Sebastian began circulating on social media, raising questions of potential death fraud [31], for which the Philippines has proven to be a global hotspot [32,33], or possible murder under the guise of COVID-19 [34] (Fig. 1). The obfuscation and lack of documentation from BuCor officials prompted probes by the Philippine Senate and National Bureau of Investigation on the issue. Whether these inmates truly succumbed to the virus, were murdered to silence them on certain political matters, or are now living new lives outside of prison under false identities, such a scandalous fallout is why cremation is highly discouraged when dealing with unidentified individuals and those under medico-legal investigations (see [35,36]).

Rapid and mandatory cremations have disrupted the intimate rituals surrounding death and loss that grant closure to the bereaved [37]. Bodies are rushed directly from hospitals to crematoria, barring families from seeing their loved ones before they are burned. Events that are meant to provide support and opportunities for mourning such as wakes, special masses, and family gatherings are banned. And the sheer volume, speed, and opacity at which cremations are occurring have left many families wondering whether the ashes they receive are indeed their relative or that of someone else. Additionally, with 10% of Filipinos residing overseas as migrant workers, transnational separation compounds the grief experienced when loved ones die either at home or abroad.



Fig. 1. Photograph of a transparent box containing the supposed remains of a high-profile inmate who died from COVID-19, which circulated on social media and raised several doubts on the circumstances of death.

Repatriated remains not already cremated before transport are to be cremated within 24 hours of arrival at the airport in the Philippines. Before the pandemic, entire overseas communities would raise funds or seek government support to bring bodies home intact. Such impersonal disposal of the dead in contrast to the usually rich mortuary customs of the Philippines has been described as a “second tragedy” that further traumatizes rather than heals [5].

#### 4. Conclusion

There has been a significant uptick of cremation rates and regulations across the globe in the wake of the COVID-19 pandemic (e.g. [38–44]), including forced cremations in the Philippines within 12 hours after death. Using disease transmission as grounds for immediate and mandatory cremation is one made from misconception, fear, and speculation rather than one backed by science. The aversion to cremation in the Philippines must be understood against the historical backdrop of colonialism whereby policies equated the dead with sanitation concerns rather than reverence and memory and associated fire with war, subjugation, and damnation. Indeed, many other nations may draw parallels from the Philippine context. Cremation should remain a cultural and religious choice in consideration of available resources and the rights and wishes of family members. Burial, including body viewings, is also a viable and safe option during the pandemic provided standard precautions such as physical distancing between attendees and the deceased, mask-wearing, and regular handwashing with soap are in place, and invasive treatments that can aerosolize body fluids such as embalming are avoided. Blanket regulations on cremation add to the emotional stress caused by the pandemic as they also lead to a prolonged and disjointed grieving process that inhibits achieving closure. Cremations happening at breakneck speed potentially open up opportunities for criminal activity, constrain effective management of evidence and chains of custody, and erode public trust in judicial institutions. Given the context provided above, there is little public health justification for immediate, hastened, or forced cremation during the pandemic. Instead, seeking to honor the dead in scientific and culturally sensitive ways, in spite of the hardships brought by COVID-19, opens a space for postcolonial repair, reduces trauma, and upholds aspirations for a collective humanity.

#### Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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