

***The Diversity of Indigenous Wisdom on Grief:
Exploring Social Work Approaches to Bereavement***

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Abstract

The aim of our study was twofold: 1) to describe the diversity of indigenous wisdom on grief and maintaining relationships with the deceased by exploring practices of Buddhists in Japan, Muslims in Malaysia and Christians in Sweden; and 2) to discuss social work approaches for bereaved families based on their indigenous wisdom.

Background: The International Federation of Social Workers and International Association of Schools of Social Work established the Global Definition of The Social Work Profession in 2014, which considers indigenous knowledge as a main underpinning of social work and encourages social workers to develop approaches that accommodate local values and traditions. However, in some societies, such as Japan, psychotherapeutic bereavement interventions for bereaved families are becoming more common. Theories supporting such interventions are considered applicable to all peoples, irrespective of cultural differences.

Method: Using literature reviews, the authors describe their respective societies' indigenous rituals and spiritual values concerning grief and death. They also critically examine bereavement interventions used in their respective societies.

Findings and discussion: Psychological theories underpinning bereavement interventions tend to reflect Western or Christian values. They are not consistent with the values of Buddhist Japanese and Islamic Malaysians. They could lead to these non-Western mourners being considered maladjusted or pathological, and ultimately to their disempowerment. The rapid process of secularization is depriving Japanese and Swedish people of the chance to use their indigenous wisdom. This might force them to depend more on Western bereavement interventions, some of the concepts of which they do not agree with.

Keywords: Grief, Bereavement, Indigenous wisdom, Cultural diversity, Social work, Japan, Malaysia, Sweden, Religions, Secularization, Buddhism, Islam, Christianity

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Introduction

People worldwide currently are greatly influenced by globalization, not only economically, but also conceptually in various aspects of our social lives. We, the authors, are social work scholars, and our paper focuses from a social work perspective on grief and how people have dealt with this very painful experience. We discuss some possibly harmful effects of globalization on people's life with grief, especially those effects promoted through American-made concepts. As Watters (2010) wrote:

With the increasing speed of globalization, something has changed. The remarkable diversity once seen among different cultures' conceptions of madness is rapidly disappearing. A few mental illnesses identified and popularized in the United States—depression, post-traumatic stress disorder, and anorexia among them—now appear to be spreading across cultural boundaries and around the world with the speed of contagious diseases. Indigenous forms of mental illness and healing are being bulldozed by disease categories and treatments made in the USA. (p. 3)

Consequently, grief is one of the emotions that are labeled as a disease through the process of globalization and the medicalization of intrapersonal issues, although what is meant by “grief” is different in different cultures (Rosenblatt, 2008). In this trend, what we should remember is that such application of a medical model to grief can deprive humans of their power for living. Averill and Nunley (1988) warned of the danger of applying medical models to emotions:

Emotions, as ordinarily conceived, are value-laden phenomena. In order to make emotions fit the medical model, they would have to be stripped of their value characteristics, and hence of much of their meaning and social function. (p. 90)

Both meaning-making of human life events and utilization of social functions are crucial for the social work profession. Thus, this medical model of emotions clashes with the social work ethos. As Goldsworthy (2005) states:

A meaning-making approach to grief and loss removes the language of pathology and illness associated with grief and loss, and instead frames it as part of the experience of change that touches each of us throughout the rich tapestry and journey of life. It is consistent and compatible with social work values and ethics (p. 176)

On the other hand, when we consider meanings of human life events associated with grief and bereavement, we believe we should pay more attention to how people have dealt with such stressful experience traditionally, which we call “indigenous wisdom,” including religious responses, because “in coping with grief and other sources of stress, many people turn to religious resources, perhaps in part because these resources offer something beyond the limits of this world as people confront crises of meaning” (Kelley & Chan, 2010, p. 201). For millennia before grief was medicalized, people in each part of the world had developed their indigenous wisdom to overcome difficulties related to grief. In order to take a meaning-making approach seriously, we need to revisit indigenous wisdom.

“The Global Definition of the Social Work Profession,” which was approved by both the General Meeting of the International Federation of Social Workers (IFSW) and the General Assembly of the International Association of Schools of Social Work in July 2014, represents a new foundation for social work practice, which stresses the importance of indigenous wisdom. It states:

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and *indigenous knowledge* [emphasis added], social work engages people and structures to address life challenges and enhance wellbeing. (IFSW, 2017)

The term “Indigenous” may remind readers of Aborigines in Australia and Native Americans. Actually, the commentary of the definition by IFSW defines indigenous people as those who “typically aspire to remain distinct culturally, geographically and institutionally, rather than assimilate fully into national society” (IFSW, 2017). However, we believe social workers’ definition of social work can be extended so that it includes not only the knowledge of indigenous people, but also local knowledge, because we have realized that the dream of globalization of social work practice might cause local knowledge to be ignored. As Gray and Coates (2008) state:

As with many modern, Western professions, social work adheres to the globalization agenda by holding to certain universal views of social life which can be applied to all situations and contexts. Despite the profession’s expressed concern for “starting where the client is at” social work is following Western assumptions and beliefs and it seems unwilling to take seriously the realities of the social situation in which many people live their daily lives. (p. 13)

If this sort of criticism and concern about the globalization discourse of international social work is considered in relation to the Global Definition, we feel our proposed extension of the definition of indigenous knowledge would be largely agreed upon.

In sum, the trend of globalization, with the wave of medicalization and commercialization of mental health care, is now making a medical model of grief more common. Grief is being stripped of its tremendously deep meanings as one of the most serious human life events, and changed into a mere symptom of mental disorder, which can have very common patterns in every part of the world, and which can be cured or prevented by ready-made prescriptions. Mourners have been respected and empathized with, as those enduring inevitable experiences that every person would experience sooner or later, but now they are at risk of being treated as possible patients of mental disorder. That is against the mission of social workers, which is to empower people.

In order to cope with such a social trend, we want to illustrate local knowledge or indigenous wisdom for alleviating grief in three different cultures: Muslim culture in Malaysia, Buddhist culture in Japan, and Christian culture in Sweden. We do not intend to ignore other religions and cultures in each of the countries. However, in order to simplify our illustration, we focus on some of their typical cultures.

The three cultures are chosen for three reasons. First, the three cultures' religious backgrounds are those of three different major religions: Buddhism, Islam, and Christianity. Second, Japanese and Swedish cultures are amongst those with the least religiosity, while Malaysians have high religiosity (Inglehart et al., 2010). According to Gallup's survey in 2009, when asked whether "religion is an important part of [your] daily life," 17 % of Swedes and 24 % of Japanese said yes, while 96 % of Malaysians said the same (Crabtree, 2010). Third, the cultural map of the world drawn by Inglehart and colleagues (2010) shows that these three countries and the US can be distinguished by two cultural values dimensions: "Traditional versus Secular-Rational Values" and "Survival versus Self-Expression Values."

[The first] dimension reflects emphasis on obedience to traditional authority (usually religious authority), and adherence to family and communal obligations, and norms of sharing—or, on the other hand, a secular worldview in which authority is legitimated by rational-legal norms, linked with an emphasis on economic accumulation and individual achievement. . . .

[The second dimension] reflects the fact that in postindustrial society, historically unprecedented levels of wealth and the emergence of the welfare states have given rise to a shift from scarcity norms, emphasizing hard work and self-denial, to postmodern values emphasizing the quality of life, emancipation of women and sexual minorities and related Postmaterialist priorities such as emphasis on self-expression. (p. 9).

Then, if we add the United States to our consideration as the country that is aggressively promoting globalization in the mental health field as mentioned above, according to Inglehart and colleagues (2010), Japan and Sweden are on the edge of Secular-Rational Values, while Malaysia and the United States are located on the area of mildly traditional values; and, Sweden is extremely and the United States is mildly adherent to self-expression values, while Japan and Malaysia are in the middle of the continuum of survival and self-expression values. By ignoring the extent of their adherence to each value, we draw a simple map in Figure 1.

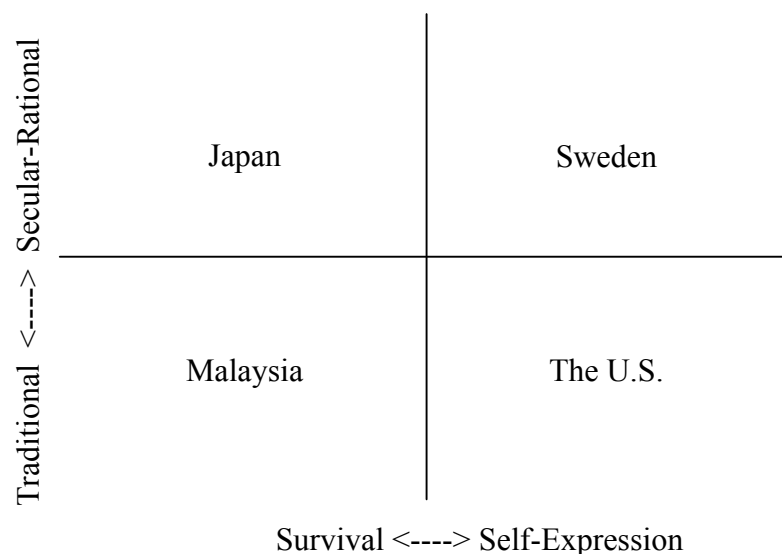


Figure 1: Four countries on a cultural map

Adapted and simplified from “Location of 80 societies on a global map of cross-cultural differences,” by Inglehart et al. (2010).

While considering these cultural differences in these countries, let us illustrate cultural matters related to grief in the three regions. Also, we will discuss what practice social workers could follow with mourners under those circumstances.

The Muslim-based religious culture in Malaysia

Malaysia is a country in South-East Asia. “According to a 2000 government census, about 60% of the population were Muslim” (“Malaysia,” 2007). Islam is the official religion of the country. Islam influences the Malay people in various aspects of their daily life (Ghinani, 1998). An observation of the daily life of a Malay community would showcase various religiously collectivistic activities such as having frequent visits to a religious institution such as a mosque. If a death occurs in a Malay community, various rituals are observed that involve not only the immediate family members of the deceased, but also the community at large (Morgan, 2002; Sakr, 1995).

The Quran clearly describes the concept of death and life in the Hereafter. According to Islam, life in the world serves as the purpose of being a test for humans (Quran: 67:2). The Hereafter, then, is created to measure the “successes” of humans in enduring the test according to Islamic rules. This influences the ways the Malay people deal with various aspects of death. In Islam, death is to be accepted as part of the overall divine plan (Giladi, 1993). When a Muslim dies, his/her eyes and mouth should be closed and the limbs should be straightened. The body should be turned to the direction of Mecca, the direction Muslims also face when offering their prayers. Before the burial, the body should be bathed, scented and shrouded in unsewn pieces of white cloth. It is crucial for the deceased to be buried as soon as possible. A funeral prayer is held at a mosque. The family and community members follow the funeral procession to the graveyard. The funeral procession happens within 24 hours of death.

After the burial the family members will often organize *tahlil arwah* (a collective prayer session for the dead). This ritual emphasizes the search for forgiveness and blessing for the deceased. People conduct this ritual three days after the burial. This ritual can be interpreted as a way in which the Malays maintain their bonds with the deceased. It is emphasized that even though the relationship has ended in this world, the bereaved can still conduct some actions that can be beneficial to the deceased in terms of providing blessing to the dead. Muslim graveyards are normally near the mosques so that the deceased are able to listen to their prayers. Their graveyard is the best place to visit for helping them to practice self-reflection. Those who visit their parents’ graveyard every Friday will be rewarded with heaven in the Hereafter. Malays maintain continuing bonds with the deceased through religious activities. Rather than just praying for the deceased, Malays prepare a feast and invite their friends and family members to pray for the deceased during the ceremony of the feast. They participate in such feasts a certain number of days after the person’s death, on his/her death anniversary, or on days of religious celebration. Malays also believe they must do good deeds—not only visiting graveyards but also giving alms and reciting the Quran—so the deceased will benefit, for example by gaining entry to Heaven and receiving lighter punishment on Judgement Day.

In Malaysia, there are no specific policies that specify what interventions should be offered to grieving individuals. Most of the support focuses on practical aspects such as funeral arrangements. In terms of the practice of intervention for grieving, there is a lack of comprehensive understanding on what to do in professional settings, partly because Malays are reluctant to seek professional help such as that of a counselor or a therapist. Many Malays believe that psychological disturbance, including grief, is to be attributed to either physical or supernatural causes (Razali & Najib, 2000). They believe that a supernatural spirit occurs with the will of God, and that it makes them have negative feelings. *Bomoh* (shamans) are more often consulted with than are mental health specialists, especially for emotional and psychological problems.

According to Maqsood (2002), Muslims can grieve, but their religion puts a certain limitation on their grieving. Muslims are prohibited from displaying any extreme responses such as wailing and hurting themselves. Muslims are advised to turn to God during stressful episodes and at times of grief. However, Malay Muslims need to understand that they have the right to grieve. Social workers are challenging the mentality of Muslims that believes to talk about the deceased would show a lack of piety. Some Malay Muslims believe that talking and thinking about the deceased may signify their distrust of God. They try to forget the deceased and pretend that they are moving on with their lives. Social workers in Malaysia have to enlighten such people and encourage them to embrace their own ways of grieving.

The Christianity-based secular culture in Sweden

Sweden is a country in the North of Europe. Until agreement was reached on the separation of church and state, the Church of Sweden, an Evangelical Lutheran church, represented the religion of the state, and “according to recent estimates, about 79.6% of the population belong to the Church of Sweden” (“Sweden”, 2007). In Sweden, now a dominantly secular society, traditional grief theories which emphasize that the bonds to the deceased should be definitively ended dominate the grief discourse in terms of of lay theories. These are applied both by professionals and mourners themselves, who expect to be able to “let go” of the relationship to the deceased. However, in research interviews with bereaved people it is clear that mourners do retain their bonds with related deceased persons, but that they may be ashamed to express such connection for fear of being regarded as abnormal or mentally ill.

Apart from the funeral, people in general do not go to services in church or visit the grave as often as occurred in the historical Christian period, when these practices were part of everyday life. In the present postmodern time, people use the Internet to find a voice and to share their experiences of loss with others, but also to communicate with the deceased—for example in memorial blogs. After catastrophic deaths a collective mourning is expressed, usually at the scene of the incident, but in general grief is managed more in an individualistic fashion and many mourners express the feeling of being alone in grief.

Grieving people are generally not offered professional bereavement support. A consequence is that problems related to loss and mourning tend to be constructed as individualistic mental issues in need of psychiatric healthcare. Only a few bereavement care facilities exist that offer a therapeutic approach whereby mourners

are provided a space to reflect on their relationship to the deceased and life after the loss.

Death is quite a taboo subject in Swedish culture and mourners interpret the silencing reactions in their family and social networks as expectations to “move on” in life rather than to “dwell on” the loss experience. Some deaths are more taboo than others, such as those caused by drug addiction, murder or suicide; family members as a consequence experience being stigmatized in grief with a loss of social support. However, these taboos are perhaps changing as mourning family members are speaking about their experiences in public more frequently than previously as a way to increase knowledge and reduce stigma; for example, in the form of chat blogs on the Internet, written autobiographies or film documentaries. The challenge for the field of social work is to incorporate a knowledge base about loss and grieving grounded in mourners’ own narratives of experience, so professional social workers can support grieving in the encounter with clients who have experienced all kinds of losses, not only as a result of death. One such example is a narrative approach to grieving, which particularly supports mourners to become narrators of their own bereavement stories in order to support a reconstruction of meaning and identity in the wake of profound loss that resists stigma (Silvén Hagström, 2016).

The Buddhism-based secular culture in Japan

Japan is a country in East Asia. Most Japanese have two religions: Buddhism and Shintoism. According to a national survey in 2015, the numbers of believers in Buddhism and Shintoism are 88.7 million and 89.5 million respectively (Ministry of Education, 2015). The total number of the Japanese population in 2015 was 127 million (Statistics Bureau, 2016). The fact that the total number is less than the sum of the numbers of believers of the two religions shows “Japanese people adhere to more than one religion” (Hood, 2015, p. 90). Judging only from these figures alone, Japanese may appear to be very pious people, but according to Inglehart et al. (2010), a mere 24% of Japanese people say that they are religious. Mullins (2011) may help solve this puzzle, stating:

In popular consciousness, “religion” is often understood in a highly restricted way to refer only to organized religion or religious institutions. Consequently, Japanese usually claim to be “without religion” (*mushūkyō*) because they do not identify themselves as members of one particular religious group. The majority of Japanese, nevertheless, continue to participate in household and institutional rituals, festivals, and annual events, and many hold what most observers would regard as “religious” beliefs. (pp. 63)

One such ritual is a Buddhist funeral. According to the 2014 survey of the Japan Consumers’ Association (as cited in Sōgi Annainin, 2017a), over 90% of funerals were conducted in Buddhist ways while only 4% were non-religious.

A big problem of these funerals is the cost. Japanese funerals are mainly administrated by funeral companies, and according to the Japan Consumers’ Association’s survey in 2014 (as cited in Sōgi Annainin, 2017b), the average cost of a funeral is 1,890,000 yen (16,800 USD, if 1 USD = 133 JPY). The average of the first monthly salary of a college graduate was 202,000 yen in 2015 (Ministry of Health,

Labor and Welfare, n.d.). So, the funeral cost is about eight times the average monthly salary of a college graduate. Consequently more and more people want to avoid having funerals. An Internet survey of a thousand over-40-year-old persons shows that 48.8% of the respondents say that they do not want to have their own funerals done (PR Times, 2010). A quite similar result is obtained by another Internet survey, of 432 people from their 20s to 40s: 50.0% of respondents hope to avoid holding a funeral (iSHARE, 2010).

On the other hand, Japanese Buddhism has traditionally included ancestor worship, and that cultural factor helps maintain the continuing bonds between the bereaved and the deceased among family members. A traditional family has its own Buddhist altar within their house, and “many of the interactions in front of the buddha altar are continuations of the bond which was there before the person died” (Klass, 1996, p. 296). However, that custom is decreasing because Buddhism is losing power among the people. Japan has 77,000 Buddhist temples, about 20,000 of which have no monks (Ukai, 2015, p. 241). Japanese Buddhist temples are now disappearing, and a void in religiosity or spirituality is growing in Japan.

To fill the void in spirituality, a new cultural phenomenon is spreading, which Shimazono and Graf (2012) have called “the new spiritual culture,” which is “differentiated from traditional religion and traditional notions of ‘spirituality’ by its embrace of seemingly secular concerns like healthcare and healing, business ethics and self-help” (p. 459). On the wave of the cultural phenomenon of mental health, a Western-born discourse of grief and recovery, the Grief Work Hypothesis, is spreading in Japan. According to that hypothesis,

Principles of grief counseling and therapy follow the view that, in the course of time, bereaved persons need to break their ties with the deceased, give up their attachments, form a new identity of which the departed person has no part, and reinvest in other relationships. People who persist in retaining a bond with their deceased loved one are in need of counseling or therapy (Stroebe, Gergen, Gergen, & Stroebe, 1992, pp. 1206-1207).

Although this concept is already considered obsolete by researchers (Hall, 2014), many Japanese professionals and volunteers supporting mourners still use it. Additionally, a suicide prevention act came into force in Japan in 2006, according to which psychological support service with the Grief Work Hypothesis for family survivors of suicide is subsidized by local governments. On the other hand, some family survivors hold traditional concepts of keeping bonds with the deceased and hope they will live with grief; consequently they have conflicts with professionals and volunteers, who stress “overcoming” or “resolving” grief (Oka, 2016).

The challenge for social workers is to work with such mourners by de-pathologizing and normalizing grief. By de-pathologizing themselves, people can empower themselves. Social workers then will work with them to improve their lives.

Cultures	Malaysian Muslim	Swedish Christian	Japanese
Religious/secular “Would you say you are a religious person?” (Inglehart, et al., 2010)	Religious 89% (2006)	Secular 33% (2006)	Secular 24% (2006)
Relationships with the deceased	Continuing bonds are maintained through religious activities. For example, people invite friends and relatives to pray for the deceased during a feast ceremony.	A discourse that the bonds to the deceased should be definitively ended is dominant in this secular society with a historically Christian culture.	The relationships are perceived as “continuing bonds.” The ancestor worship of Japanese Buddhism helps the relationships with the deceased continue.
Indigenous wisdom for dealing with grief	Religious-based activities, rituals and narrations from previous prophets help Malay Muslims to find wisdom after their loss.	People use the Internet to share their loss experiences with others, and try to communicate with the deceased (e.g., in memorial blogs).	Buddhist memorial services are offered for deceased members of families on anniversaries of their death. Buddhist home altars work as a site of their souls.
Popularized bereavement care	Bereavement care highlights the importance of incorporating religious belief with spirituality. Muslims are told to accept the situation as a part of God’s plan.	Little bereavement care is offered, and problems related to loss and mourning tend to be constructed as individualistic mental issues in need of psychiatric healthcare.	The Grief Work Hypothesis and its varieties prevail among bereavement care givers, most of who are not fully trained. Their theoretical orientation is not congruent with indigenous wisdom.
Social taboo or religious doctrines	Talking about death is considered a social taboo among Malay Muslims because talking about it or expressing their grief may reflect distrust of God’s plan.	Death is a social taboo, and mourners tend to interpret the silence of their family and social networks as expectations to “move on” in life rather than to “dwell on” the experience of loss.	<i>Shintō</i> is another major religion of Japan and its syncretism with Buddhism has been developed through the ages. <i>Shintō</i> ’s abhorrence of “impurities of death” leads to a social taboo of death.
Challenge of social work	Social workers face challenges in helping bereaved Malay Muslims understand that questioning their loss may facilitate the process of meaning-making to adapt themselves to the loss.	Social workers need to help develop a knowledge base about loss and grieving that is grounded in mourners’ own telling of their experience.	Buddhist customs are on the decrease, and indigenous wisdom is falling into oblivion. Pathological models of grief are spreading and bereaved families’ social issues are neglected.

Table 1: Indigenous Wisdom in three cultures

Conclusions

We have discussed three cultures with different backgrounds and features, which are summarized in Table 1. One is religious, the other two non-religious. In the non-religious cultures people behave differently in terms of religions: in one culture people still follow many religious rituals while in the other they do not. All three cultures are influenced by the globalization of mental health concepts and medicalization. The epicenter of this wave, the USA, is located differently from any of the three countries in the two value dimensions of traditional versus secular-rational values and survival versus self-expression values. This difference implies that people in the three cultures might have cultural difficulties in incorporating globalized concepts into their lives or combining them with their indigenous wisdom.

Our approaches to grief or bereavement could be divided into two types (Table 2): One is to accept grief as part of life (Approach A) and the other is to pathologize it (Approach B). Each has different perceptions of relationships with the deceased,

which can be summarized as “continuing bonds” or “ties to be severed,” respectively. These perceptions are greatly influenced by religions: Japanese Buddhism encourages continuing bonds with the deceased, while Christian doctrines may encourage people to sever ties. Community power will bolster continuing bonds with the deceased, as the Malay case shows. Boosted by the modern trend toward medicalization and the Grief Work Hypothesis, Approach B, disguised as “science,” is now spreading in many countries, and some professional bereavement workers treat mourners as “patients,” which can disempower people. On the other hand, Approach A is congruent with the Global Definition of the Social Work Profession in the sense that taking grief as a normal part of human life helps to empower mourners. Social workers should respect the diversity of approaches to grief and help the bereaved use Approach A, if that is their wish.

	Perceptions on grief	Relationships with the deceased	People orientation	Major theories, knowledge, frameworks
Approach A Definition of Social Profession	Normal part of life	Continuing bonds	Empowerment	Indigenous wisdom, The Global Work
Approach B	Pathologized Grief	Ties to be severed	Disempowerment, patientization	The Grief Work Hypothesis

Table 2: Two Approaches to Bereavement

Many questions are left unanswered. First, it is obvious that cultures differ in different areas with different histories and socioeconomic situations. What is important for social workers is the metaphors or narratives used in facing the death of the loved ones and grieving. For example, what metaphors do Japanese or Swedes use as equivalents to “forgiveness” in Malay Islam? We need to explore more metaphors, narratives or stories around grief and bereavement. Second, on the wave of globalization, can there be universal elements that all the world’s social workers should know will work with mourners. How should we use “universal knowledge” and “local knowledge” or a combination of both? Third, as mentioned above in the section on Malay Islam, religious concepts could keep mourners isolated. Is there any pattern about religious or indigenous knowledge that works with mourners in maladaptive ways? Fourth, numerous theories and concepts have been developed for mourners by psychologists, but the mission of social workers focuses on the social function of mourners. To clarify the mission in the specific context of working with grieving people, we need to know the societal positions of mourners, who are not “patients.” Fifth, as social workers, we should not take grief or bereavement as a mere psychological phenomenon causing much stress to families or close friends. Grief and bereavement are linked to death, which is the inevitable destination of all our lives. We are the offspring of numberless people who experienced their own deaths. Our ancestors have surely accumulated wisdom in indigenous ways. In the chaotic era of globalization, that wisdom deserves our dedication.

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