

## Burials for COVID-19 Pandemic

### Comparison of Safe and Dignified Burials process for viral haemorrhagic fever vs Safe management of a dead body for suspected COVID-19 deaths

Except in cases of viral haemorrhagic fevers (such as Ebola and Marburg) and cholera, dead bodies are generally not infectious and do not pose a public health threat. It is a common myth that persons who have died of a communicable disease should be cremated, but this is not necessary. Cremation is a matter of cultural choice and available resources. COVID-19 is caused by a newly emerged virus (SARS-CoV-2), which we are still learning about. However, lessons learned from other respiratory viruses can be applied to COVID-19. In the case of pandemic influenza, for example, only patients' lungs, if handled improperly during an autopsy, can be infectious. Otherwise, cadavers do not generally transmit respiratory diseases. WHO has developed interim guidance to support the safe management of dead bodies when COVID-19 is suspected. Red Cross Red Crescent has contributed to WHO's guidance, and advises National Societies to support and use this guidance.

The Red Cross Red Crescent has extensive experience supporting safe management of the dead in infectious disease outbreaks. This includes both *safe and dignified burials (SDB)*—the name given to the procedures and approaches specifically designed to prevent transmission of viral haemorrhagic fevers—and other approaches to safely manage the dead during outbreaks of cholera. These are both in addition to, and separate from, dead body management (DBM) procedures for disasters, conflict, or other mass-casualty events. The use of Ebola SDB procedures and approaches for COVID-19 response will not be supported technically or financially in the IFRC's global COVID-19 appeal, as they are inappropriate and unnecessary to prevent the spread of the pandemic.

The [WHO technical guidance](#) lays out the necessary precautions and personal protective equipment (PPE) required for autopsy and burial-related activities when COVID-19 is suspected. For Red Cross Red Crescent National Societies typically involved in SDB, DBM or other activities supporting burial of the dead at the community level, the section on *Burial by family members or for deaths at home* may be useful in determining whether NS staff or volunteers have a role to play in supporting community burials for suspected COVID-19 cases.

Following the Ebola SDB procedures for COVID-19 is intrusive and unnecessary, and may undermine trust between communities and RCRC volunteers and local branches and lead to increased risks for volunteers and staff. In places where mortuary services are not standard or universally available, National Societies may be called upon to support families and community leaders to safely prepare bodies of suspected COVID-19 cases for burial. These activities are much more limited in scope and scale than SDB programming.

Key similarities and differences between SDB for Ebola and safe burial practices for COVID-19:

Burial elements	COVID-19 Safe management of dead body, at the community level	Ebola Safe and dignified burial
Specialised burial teams required	No	Yes
Body can be prepared and buried directly by family members or community leaders, with appropriate education and support	Yes	No
Modified funeral practices	Sometimes	Yes
Body bag required	No	Yes
Body requires ambulance or designated vehicle transfer	No	Yes
Personal belongings of deceased destroyed	No	Yes
PPE incineration required	No	Yes
PPE required for community burial	Yes	Yes
<i>Gloves</i>	Yes	Yes
<i>Mask</i>	Sometimes*	Yes
<i>Face shield or goggles</i>	Sometimes*	Yes
<i>Apron</i>	Sometimes*	Yes
<i>Boots</i>	No	Yes
<i>Coverall</i>	No	Yes

\*See WHO guidance for details on use of PPE in community settings:

[https://apps.who.int/iris/bitstream/handle/10665/331538/WHO-COVID-19-IPC\\_DBMgmt-2020.1-eng.pdf](https://apps.who.int/iris/bitstream/handle/10665/331538/WHO-COVID-19-IPC_DBMgmt-2020.1-eng.pdf)